

Transition to School Digital Statement consent form

The Transition to School Digital Statement communicates a child's priorto-school learning and development to their new school, to support continuity of learning.

About this form

The NSW Department of Education (department) is committed to protecting the privacy of personal information in accordance with the *Privacy and Personal Information Protection Act 1998* (NSW) (PPIP Act) and the *Health Records and Information Privacy Act 2002* (NSW) (HRIP Act).

The purpose of this form is to seek your consent for:

- Your child's early childhood education and care service (the Service) to disclose your child's personal and health information contained within your child's Transition to School Digital Statement to the department.
- The Service to disclose your child's personal and health information that is not contained within your child's Transition to School Digital Statement, but is relevant to your child's transition to school, to the department.

The information shared to the department may include:

- assisting your child's transition to school by providing relevant information to their future school; and
- personal information (such as your child's name, date of birth, behaviour, and attendance records at the Service, and whether there are any current court orders in place).
- health information (such as any allergies or disability that your child may have, any specialist support relating to your child's learning or development and whether your child has an NDIS plan).
- opinions (such as observations by early childhood educators about your child's feelings about and readiness to commence school and an assessment of your child's early learning and development status); and
- other information that may be relevant to your child's transition to school.

What if I do not consent?

Participation in the Transition to School Digital Statement process is voluntary. If you do not consent, the above information will not be provided to your child's future school (unless you collect the information from the Service and give it to your child's school yourself).

Once your consent is provided, you may also withdraw it at any time by contacting the Service.

Why is the information shared with and collected by the department?

The above information will be used by the department for the purposes of:

 assisting your child's future school to meet its duty of care.

The department may provide the above information to the school that your child will attend (either a government or non-government school) and to other NSW State and Commonwealth government agencies, for the above purposes. The department will not disclose the information to any other third party unless authorised by law, or with your consent.

The department may publish material including insights from the transition to school statements, however any such information will be de-identified.

About your personal information

Your personal information will be held and managed by the department in accordance with the PPIP Act and HRIP Act, and subject to the department's Privacy Policy. For further information please see the department's Privacy Management Plan

You have a right of access, correction, and amendment of your personal information. To access your information, please contact the Service or the department on the details below. If you have a concern or complaint about the way your personal information has been collected, used or disclosed you should contact the department via its Privacy webpage, or alternatively:

Legal Services Directorate - Privacy NSW Department of Education GPO Box 33 Sydney NSW 2001

E: legal.privacy@det.nsw.edu.au.



Your consent

(name of child) in their Transition to the purposes outlined in this form,	(name of your child's early childhood education al and health information of my child o School Digital Statement with the department for and for the department to use that information if rnment school, or to disclose that information to the d is going to attend.*
named above that is relevant to my their Transition to School Digital Sta information shared through convers	sharing personal and health information of my child child's transition to school but is not contained within attement with the department. This may include ations, emails, or other forms of communication. I also consent to the department using that a NSW Government school.*
Signature of parent/carer *	
Print name *	
Date *	
OR	
□ I do not consent to (name of your child's early childhood education and care service) sharing personal and health information of my child (name of child) in their Transition to School Digital Statement with	
the department for the purposes out	lined in this form.*
information about my child named a the department. This includes inform conversations, emails, or other form	ervice sharing any additional personal or health above that is relevant to their transition to school with mation that may otherwise be shared through as of communication between the service and the department using such additional information if my ent school.*
Signature of parent/carer *	
Print name *	
Date *	
-	



^{*} Indicates required field