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| Transition statement consent form 2  To share your child’s transition statement with their new school |

*Complete this form electronically or in writing (on-screen shading of fields will print clear).*

## Background

Kindergarten teachers create a transition statement for each child enrolled in a kindergarten program at the end of the year. The transition statement:

* helps ensure your child has a positive start to school
* summarises your child’s learning and development at the end of the kindergarten year
* contains valuable information, such as your child’s strengths and interests, and suggestions for support to transition to school
* is given to you when it is completed.

The QCAA encourages kindergarten teachers to work with you and your child to complete the transition statement.

### Consent form 1

You should have already received and returned *Transition statement consent form 1*, which asked you to consent to your child’s kindergarten creating a transition statement for your child in the secure online application provided by the Queensland Curriculum and Assessment Authority (QCAA).

If you did not give your consent, your child’s transition statement will have been created in the alternative QCAA Microsoft Word template.

### Consent form 2 (this form)

In this form, you are asked to consent to the kindergarten sharing your child's transition statement with your child's new school, and to provide the school name so that the kindergarten can share it, either:

* within the QCAA's secure online application — if you gave consent for the statement to be created in the application

or

* as a hard copy — if you did not give consent for it to be created in the application and the alternative template QCAA Microsoft Word template was used.

If you do not consent for the kindergarten to share, or you do not complete this form, you will need to personally share your child’s transition statement with their new school.

### Your privacy

This form will be retained by the kindergarten in accordance with applicable privacy law. For more information, visit [www.qcaa.qld.edu.au/kindergarten/qklg/supporting-transition-school/  
transition-statements](http://www.qcaa.qld.edu.au/kindergarten/qklg/supporting-transition-school/transition-statements).

**Initials of parent/carer:**

## Your consent

|  |  |
| --- | --- |
| **Your full name (parent/carer)** |  |
| **Your child’s full name** |  |
| **Your relationship to the child** |  |
| **Child’s date of birth** | /    / |

**Do you consent to your child’s transition statement being shared with your child’s school?** (Choose **one**.)

|  |  |
| --- | --- |
| Yes, I give consent for the kindergarten to share the statement with the school within the secure application.  Enter school name: | Your child's statement will be shared with the school within the secure application. Please provide the name of the school to share the transition statement with. |
| **OR** | |
| Yes, I give consent for the kindergarten to share the Microsoft Word transition statement with the school as a hard copy.  Enter school name and postal address with postcode: | Your child's statement has been created in the alternative QCAA Microsoft Word template. The kindergarten will provide it to the school as a hard copy. Please provide the school's name and postal address. |
| **OR** | |
| No, I do not give consent for the kindergarten to share my child’s transition statement with the school. | You can personally share your child’s transition statement with their new school. |

**If you decide to change schools after completing this form**, you will need to complete another *Transition statement consent form 2* to enable the kindergarten to transfer the transition statement to the new school.

**Do you consent to:**

|  |  |  |
| --- | --- | --- |
| * your child’s kindergarten teacher contacting your child’s Prep teacher, and/or other relevant school staff, to discuss the information in the transition statement with them? | Yes | No |
| * your child’s Prep teacher, and/or other relevant school staff, contacting your child’s kindergarten teacher to discuss the information in the transition statement with them? | Yes | No |

|  |  |  |  |
| --- | --- | --- | --- |
| **Signature of parent/carer:\*** |  | **Date:** | /    / |

I have initialled/signed both pages of this form. \***Note:** Only one parent/carer’s signature is required.

**Electronic signature:** By completing the fields above and inserting the signatory's name, the signatory agrees that this becomes a signed document pursuant to section 14 of the *Electronic Transactions (Queensland) Act 2001*.

**Please return this form to your child's kindergarten.**

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| **Kindergarten use only**  Retain a copy of both pages of this form for your records. | Date received     /    / |

## Confirmation of parent/carer’s consent to share

**Parent/carer:** Please keep this page.

|  |  |  |
| --- | --- | --- |
| **Your child’s full name** |  | |
| **Your child’s transition statement will be shared with** |  | |
| in the secure application | as a hard copy |
| **Date** | /    / | |

This is the school nominated on your *Transition statement consent form 2*.

To change the nominated school, complete another *Transition statement consent form 2* and give it to your child’s kindergarten.

Forms are available at: [www.qcaa.qld.edu.au/kindergarten/supporting-transition-school/transition-statements/requesting](https://www.qcaa.qld.edu.au/kindergarten/supporting-transition-school/transition-statements/requesting)