

Chaplaincy Service Consent form – Form 1



School: Regents Park State School

Parent name/s	
Student name (in full)	
Student Class	
Year	2025

This school community provides a chaplaincy service which is endorsed by the school's Parents and Citizens' Association and is made available on a voluntary basis to all students. Information about the service is available on the school's website and through newsletters.

_____ has accessed the chaplain and has indicated interest in meeting individually with them on a regular or ongoing basis. For this to occur, written informed consent is required.

The focus of these meetings will be determined by the student's need, however chaplains are not allowed to provide counselling, evangelise or proselytise, advocate for or denigrate a particular worldview or faith.

Consent provided on this form will be considered valid for the duration of the chaplain's involvement in supporting the student, unless this period is more than one (1) school year, in which case consent will be requested at the start of the following school year. Information on this form will be stored securely.

If you would like to discuss this matter, please contact myself, on 3802 4333 or the school chaplain, Sue Sawatzki.

Yours sincerely

Mrs Ronnie Kostaschuk
Principal

Please indicate whether you consent to these ongoing individual meetings.

- I consent to _____ meeting with the chaplain.
- I do not consent to _____ meeting with the chaplain.

Parent/Carer Signature: _____ Date: _____