

Explanatory Letter - Consent Form to share student personal information with third parties

Wednesday 01 July 2026

Dear Parent/Carer

The attached consent form is used to obtain consent for the Department of Education (department) to obtain and record student personal information from third parties and/or for the department to disclose student personal information to a third party. 'Third party' refers to people not employed by the department and includes medical or allied health professionals who provide their professional services to the student. 'Disclose' means giving personal information to another person or organisation or giving them access to this information.

Examples of personal information, which may be used, recorded and disclosed (subject to consent):

- identifying information such as first and last name, date of birth and/or age, name of school, year level;
- school records;
- observations about the student's behaviours and classroom interactions;
- academic performance, difficulties, or progress;
- health/medical/allied health reports and assessments; and
- any other information relevant to the stated purpose.

The specific personal information and materials to be covered by the consent have been listed on the consent form.

Purpose of the consent

This consent form is used to facilitate the sharing of a student's personal information between the department and a third party, where necessary, to enable the provision of appropriate services to the student.

Specific Requests for schools to complete online assessments

If a student's treating health or allied health practitioner requests the school to enter information into an online assessment platform to support their assessment, we need to let you know that once submitted, the personal student information entered by the school cannot be accessed, amended, or removed by department staff. The information will be controlled by the online assessment platform and the referring health practitioner. It may be stored on servers located outside of Australia, and may not be protected under Australian privacy laws. The school will not have access to the assessment results, however parents may choose to provide these to the school to assist the school to implement supports and reasonable adjustments.

Do I have to provide consent?

You do not have to provide consent to share your child's information. If you do not provide consent, information will not be shared with the third party. While this may limit the supports the third party can provide to your child, the school will continue to offer support based on the information currently available. If you choose not to provide consent, we encourage you to discuss alternative ways of supporting your child with your school and the third party.

How long will this consent be in place?

If relating to completion of an online assessment, this consent form applies to a one-off sharing of information as outlined in the form itself. If relating to sharing of information with or from a third-party, then the consent form will apply for a period of no more than 12 months, or until you withdraw consent.

We may ask for a new consent form from you if we later identify other third parties, additional personal information, or different purposes that need your consent but are not covered by this consent form.

Can I withdraw or limit consent?

You can withdraw your consent at any time up until the point that the information has been shared. You can also limit consent; i.e. you may wish to limit:

- the information that you agree to be used, collected, recorded or disclosed;
- the proposed purpose/s for which the information is being collected, recorded or disclosed; or
- who that information will be collected, recorded or disclosed with.

If you limit consent, then an online assessment may not be able to be completed. If you wish to limit or withdraw consent, please notify the departmental contact (specified below) in writing (by email or letter). If you provide an address the contact will confirm the receipt of your request.

Who to contact

To return a consent form, express a limited consent or withdraw consent, or if you have any questions regarding consent, please contact

Gainsborough State School Insight Committee - insight@gainsboroughss.eq.edu.au

Kind regards

Gainsborough State School Insight Committee

Consent form to share student personal information with third parties

This consent form allows the Department of Education (department), including staff employed by a school or region to:

- request and be provided with information and/or materials from the third parties listed in the form below; and/or
- disclose student personal information described in the form below to the third parties or online services listed in the form; and/or
- use the personal information received from those third parties for the purpose described in the form below.

Information that is shared will be limited to that listed on this form. Information may be shared in writing or verbally. Information collected by the department will be recorded and stored securely in accordance with the department's information management procedures.

If you wish to access or correct any of the personal information on this form or discuss how it has been dealt with, please contact the department contact in the first instance.

This form should be completed by a parent/carer for students under 18 years of age. Independent students may complete on their own behalf and, if under 18 years of age, a witness is required.

This consent is for:			
Student's name		Date of birth	
State school name	Gainsborough State School		

I consent to the following personal information and/or materials of the student being (tick the applicable box):

- ☐ Requested from the third party identified below; and/or
- ☐ Disclosed to the third party identified below

Student's materials (e.g. work samples), and student's first and last name, date of birth, age, school name, year level as well as other personal information as outlined below:

Staff observations and support provided, checklists, academic performance, school records, any other information relevant to the stated purpose.

If the school has been asked to enter student information into an online assessment tool by the third party, list in the box above the name of the assessment tool/s to be completed and a description of the types of information that will be provided (e.g. behavioural, academic, social-emotional).

Name of third-party individuals and/or organisations who information is being requested from or provided to:

(Please identify the name of the individual AND their organisation/medical practice/business; the name of the government agency; or the name or description of health practitioner or provider such as a medical specialist; psychologist; therapist etc)

Purpose for which the information is to be used once shared:

(for example: to discuss support strategies; to discuss personal care requirements, to assist the third party to complete a referral or an assessment.

Identify possible learning barriers

To discuss support strategies

Timeframe for consent (tick the applicable box):

- ☐ Consent is provided as a one-off for the purposes of completing the specified online assessment. If the request for information sharing has not progressed within 3 months of the date of signing, new consent will be sought.
- ☐ Consent applies until _____ but not longer than 12 months or until you decide to limit or withdraw consent in writing.

Consent and agreement

I am (tick the applicable box):

- ☐ parent/carer of the identified student ☐ the student (if a mature/independent student*)

** If this box is checked, Department staff should check the student record for documentation of any decision about mature minor competency of the consenting student.*

By signing below, I confirm that I have read and understood the 'Explanatory Letter – Consent form to share personal information with third parties', and I provide consent to:

the Department of Education, including school and other department staff, requesting, recording, using and/or disclosing student personal information and materials, as indicated above in this Consent form. I understand and acknowledge that the personal information and materials will only be accessed by appropriately authorised department staff and disclosed or shared with third parties to which I have provided consent, unless otherwise authorised or required by law.

Print name of student:	
Print name of parent/carer:	
Parent/carer signature:	Date:
Student mark or signature (if applicable):	Date: