EPPING BOYS HIGH SCHOOL

213 Vimiera Road, EASTWOOD, NSW 2122

Ph: 9869 2701 Fax: 9868 1198 Email: [eppingboy-h.school@det.nsw.edu.au](mailto:eppingboy-h.school@det.nsw.edu.au)

Principal: Timothy O’Brien, BEc, Dip Ed



10 February 2020

**Voluntary Student Activities of a Religious Nature in Schools**

Dear Parent/Carer,

A number of students at Epping Boys High School voluntarily participate in religious groups, which meet weekly during **lunchtimes**. In accordance with Department of Education policy, visiting group leaders undergo all appropriate child protection checks and practices and the content of the activities is regularly monitored.

Following are details of the voluntary groups of a religious nature, which operate at Epping Boys High School

|  |  |  |  |
| --- | --- | --- | --- |
| **Group** | **Run by** | **Day and Venue** | **Participating Year** |
| **ISCF Leadership** | School Chaplain | Tuesday lunch time Chaplains office (H block) | Years 10-12 |
| **ISCF – “CRASH”** | School Chaplain | Friday lunch time C7 | Years 7-12 |
| **ISLAMIC Individual Prayers** | Muslim students | Monday – Thursday lunch time C8 | Years 7-12 |
| **ISLAM Prayer group** | Muslim community member approved | Friday lunch time C8 | Years 7-12 |

The NSW Department of Education’s *Religious Education Implementation Procedures,* last updated in November 2017, requires parental permission for students who participate in voluntary student activities of a religious nature in schools. Before participating in any of the above mentioned activities, a student must present the tear-off permission slip, signed by a parent or carer, to Mr Bailey. Group leaders will maintain a list of all students from whom a permission note has been received. Permission will remain effective unless a letter of withdrawal is received from the student’s parent or carer.

Should you have any enquiries in relation to this letter, please contact Mr McInerney, the School Chaplain, via the school email.

Yours sincerely,



Tim O’Brien

Principal

***Please detach and complete the permission slip below and return to Mr Bailey, Head Teacher Administration.***

**✂---------------------------------------------------------------------------------------------------------------------------------------------**

**Voluntary Religious Activity Group**

**Parent/Carer Permission**

**Student’s Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year: \_\_\_\_\_\_\_\_\_\_**

**Siblings Name/s: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Year: \_\_\_\_\_\_\_\_\_\_**

I have read the information about the religious activity groups which operate at Epping Boys High School. I understand these activities operate under the auspices and supervision of the Principal.

I give permission for my son to participate in: ***(Please tick the group/s in which your son would like to participate)***

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **CRASH Leadership** | School Chaplain | Chaplains office (H block) | Years 10-12 |  |
| **CRASH (ISCF)** | School Chaplain | Friday lunch time C7 | Years 7-12 |  |
| **ISLAMIC Individual Prayers** | Muslim students | Monday – Thursday lunch time C8 | Years 7-12 |  |
| **ISLAM Prayer group** | Muslim community member approved | Friday lunchtime C8 | Years 7-12 |  |

I understand this consent will remain effective unless a letter of withdrawal is provided by me to the school.

**Parent/Carer’s Signature**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Parent/Carer’s Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Please print name)**