

Mount Magnet District High School Laurie Street (PO Box 60) MOUNT MAGNET, WA 6638 MountMagnet.DHS@education.wa.edu.au TEL: 08 9963 4081

FAX: 08 9963 4451

ABN: 75 278 875 802

Dear parents

Thank you for choosing Mount Magnet District High School for your child's education.

Our school provides access to Department of Education online services. These enhance the contemporary learning opportunities available to students and the range of teaching tools available to staff to deliver the Western Australian Curriculum.

I am writing to seek approval for your child to be given access to these online services.

The Department's online services currently provide students with access to:

- · individual email and calendar accounts;
- the internet, with all reasonable care taken by central office and schools to monitor and control students' access to websites while at school;
- online teaching and learning services such as Connect, web-conferencing and digital resources;
- · online file storage and sharing services; and
- these online services at locations other than school.

If you agree to your child using these online services, please sign the Acceptable Use Agreement form and complete the permission slip attached to this letter. Please explain the content of the *Acceptable Use Agreement* to your child before the permission slip is signed.

Both forms should be returned to school so that an online services account can be created for your child.

Please note that while every reasonable effort is made by schools and the Department to prevent student exposure to inappropriate online content when using Department provided online services, it is not possible to completely eliminate the risk of such exposure.

You should be aware that the Department has the right to review, audit, intercept, access and disclose messages created, received or sent over Department online services. Logs of email transactions and internet access data are kept for administrative, legal and security purposes and may be monitored. Similar to other corporate records, emails and internet access records are discoverable in the event of legal action and are subject to provisions of the <u>Freedom of Information Act 1992</u>. (www.foi.wa.gov.au)

You should also be aware that general internet browsing not conducted via the Department's network is **not** monitored or filtered by the Department. The Department encourages close family supervision of all internet use by children in locations other than school, and strongly recommends the use of appropriate internet filtering software. Advice on managing internet use at home can found on the Office of the E-Safety Commissioner website (www.esafety.gov.au/iparent).



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At your child's enrolment interview we will discuss:

School mobile phone policy
Going home for lunch permission? (Secondary only)
All the permissions we request
Hats
Lunches and dropping lunches off
School newsletter and Facebook page
Any queries, concerns or specific needs your child has.
An ID photo will be taken (not for publication)
Fizzy and energy drinks are not for school; they are unhealthy

Yours sincerely

Ms Mary Duggan

Principal



Student's first name:
Student's last name:
School: Mount Magnet District High School
Class / Form / Room:
Parent
 ☐ I give permission for my child to have an online services account. ☐ I DO NOT give permission for my child to have an online services account. I understand and agree that my child has responsibilities when using the online services provided at school for educational purposes, in accordance with the Acceptable Use Agreement for school students. I also understand that if my child breaks any of the rules in the agreement that the principal may take disciplinary action in accordance with the Department's Student Behaviour Policy and Procedures. Name of parent:
Signature of parent: Date:
Note: While every reasonable effort is made by schools and the Department of Education to prevent student exposure to inappropriate online content when using the Department's Online Services, it is not possible to completely eliminate the risk of such exposure. The Department cannot filter internet content accessed by your child from home or from other locations away from the school. The Department recommends the use of appropriate internet filtering software at home.

Office use only:
Processed on: / / by:

Note: This agreement should be filed by the school.





ONLINE SERVICES ACCEPTABLE USE AGREEMENT (YEARS 7-12)

I agree to follow the rules set out below when I use the Department-provided online services:

- I will only use online services for purposes which support my learning and educational research.
- I understand that I am responsible for all activity in my online services account.
- I will check with the teacher before sharing images or giving information about myself or anyone else when using online services.
- I will keep my password private and not share with other students.
- I will not let other people logon and/or use my online account.
- I will tell the teacher if I think someone is using my online account.
- I understand the school and the Department of Education can monitor my use of online services.
- If I find any information that is inappropriate or makes me feel uncomfortable I will tell a teacher
 about it. Examples of inappropriate content include violent, racist, sexist, or pornographic
 material, or content that is offensive, intimidating or encourages dangerous or illegal activity.
- I will not use the Department's online services for personal gain or illegal activity (e.g. music file sharing), to bully, offend or intimidate others or access or send inappropriate materials including software that may damage computers, data or networks.
- I will acknowledge the creator or author of any material used in my research for school work by using appropriate referencing.
- I will get permission from the copyright owner of any material used in my school work before I
 reuse it in a portfolio for employment, in a competition or any other uses other than for my
 private research and study.
- I will use appropriate language in all internet communications.
- I will not try to access internet sites that have been blocked by the school or the Department of Education.
- I will not damage or disable the computers, computer systems or computer networks of the school, the Department of Education or any other organisation.

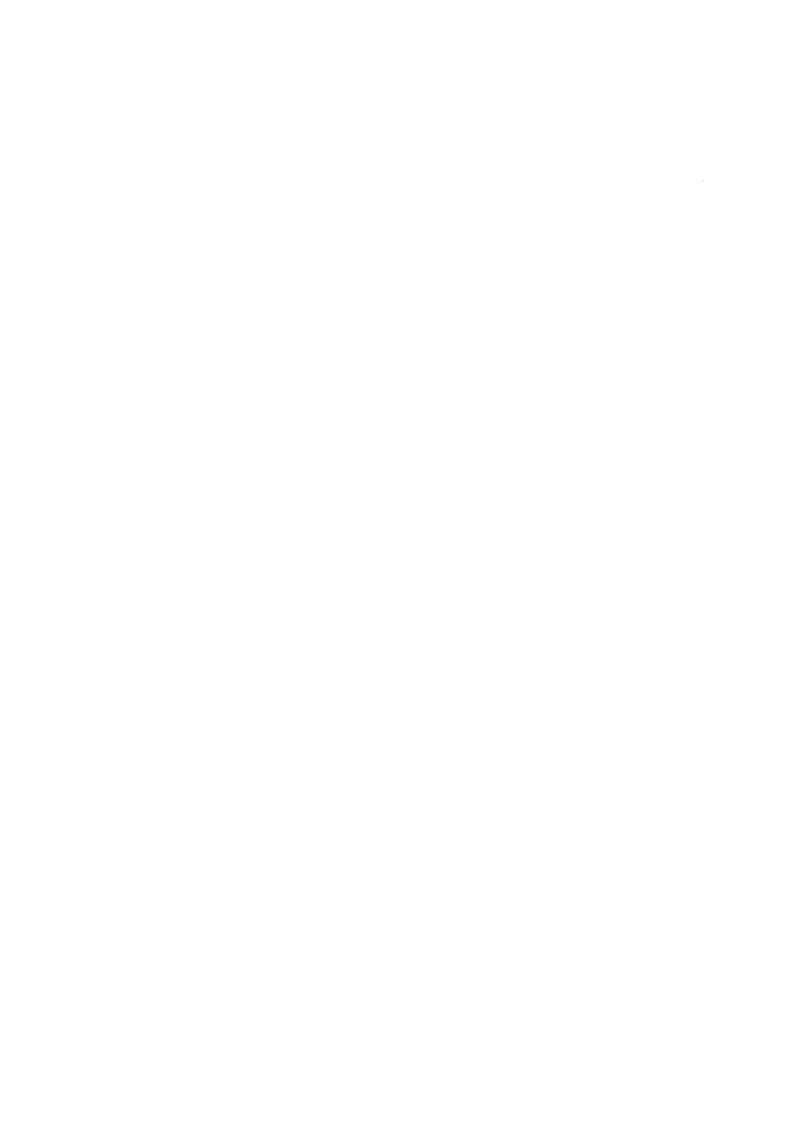
I understand that:

- I will be held responsible for my actions while using online services and for any breaches caused by allowing any other person to use my online services account;
- the misuse of online services may result in disciplinary action, determined by the principal in accordance with the Department's Behaviour Management in Schools policy; and
- I may be held liable for offences committed using online services.

Name of student:	
Signature of parent/student (over 18):	
Date:	

Processed on / / by (initials):

Note: This agreement should be filed by the school and a copy kept by the student.





PERMISSION TO PUBLISH STUDENTS IMAGES AND WORK FOR SCHOOL PURPOSES

Dear parent

Your permission is sought for the school to publish video or photographic images of your child and/or samples of your child's school work to be used by the school and the Department of Education. The purpose of using the images or work will be activities such as promoting the school, school events and student achievements.

Your child's image and/or school work may be published for the above purposes in a range of formats such as hardcopy and digital, including audio and video file formats, and published to a range of media including but not limited to school newsletters, email, school and Department of Education intranet and internet sites including social media websites (e.g. Facebook, YouTube etc.), any third party applications and local newspapers in hardcopy and digital formats, which may enable viewers/readers to identify your child.

The school will endeavour to limit identifying information that accompanies images of your child's work; however, there will be occasions when your child's name, class and school may be published along with images.

If you agree to this use of your child's image and school work please corthis whole permission form to the school by (Date)remain effective until such time as you advise the school otherwise.	mplete the consent below and return Once signed, the consent will
Ms Mary Duggan	
Mount Magnet District High School	
PERMISSION(do not detach)	

I agree to the videoing or photographing of my child and my child's school work during school activities for use by the school and the Department of Education in the ways stated above.

IMPORTANT: I understand that while the school and Department of Education will only publish my child's information for the above-stated purposes, the internet is accessible by any person worldwide. I understand that my child's information can be accessed, copied and used by any other person using the internet (e.g. shared through social media such as Facebook, YouTube, etc.). I understand that once my child's information has been published on the internet the school and Department of Education have no control over its subsequent use and disclosure. I understand that I can withdraw this permission at any time by contacting the school or Department in writing; however, this will not affect materials that have already been published and disseminated.

Name of student:	Form / Class:		
Signature of student:	Date:		
Signature of parent:	Date:		

Note: This consent form should be filed by the school and a copy provided to the parent





REQUESTING CONSENT TO DISCLOSE PERSONAL INFORMATION TO THIRD PARTY SERVICES

The following third party services may be used in our school. These services require us to share some personal information about your child and **require you to provide consent for each service** before we do so.

The school can give your information about each of these sites if you wish to keep a copy.

Name of Service

Acer-eWrite

ACER Progress & Achievement Tests

Adobe Creative Cloud K-12

Apple Education Apple iCloud Apple iMovie

Apple Jamf School Apple Keynote Apple Numbers

Apple Pages
Apple School Manager

Apple Voice Memo

Apple Clips clips [Ref-010]

ASDAN

Autism Skills School Edition

Blooket Board Maker 7

Book Creator- library Access and for iPad

BrainPOP

Britannica School

Canva

Canvas (infrastructure)

Class Dojo Clickview

Cloud Stop Motion

code.org

Desmos Maths Tools Education Perfect ePlatform Wheelers

Flocabulary Fusion 360 Gamefroot Geogebra

Google Workspace for Education (G Suite for Education including Grasshopper, Gmail, Calendar, and Classroom) and Additional Services (like

YouTube, Maps, and Blogger)

Grok Learning HOT Maths ImmerseMe Kahoot Mathletics MathsOnline

MathsSpace for Schools
Maths Seeds (3P Education)

meriSTEM

Minecraft for Education

Nearpod

Northstar Digital Literacy

Padlet PBIS Rewards Planbook

Prodigy Prime Timetable Reading Eggs Rivit LT

Seesaw SkillsRoad/Kentico CMS

Sora (OverDrive)

Sphero

Sphero EDU inc Sphero Chromo, Sphero Play

SplashLearn Studyladder

Teach Monster: Number Skills Teach Your Monster to Read

Textivate

Tinkercad (Autodesk)

Trinket Twinkl WeVideo WordFlyers WordWall

Worldbook Online

Zoom

I consent to my child's information being provided, if required, to each of the above service providers until (the conclusion of his or her schooling at a Public School in Western Australia.

Last Update: 11 May 23 Appendix H

Parent/Guardian Name:	Student Name:
Date:	Student Year Level:
Signed:	

Last Update: 11 May 23 Appendix H



Mount Magnet District High School

Permission Form

Permission to travel on the school bus

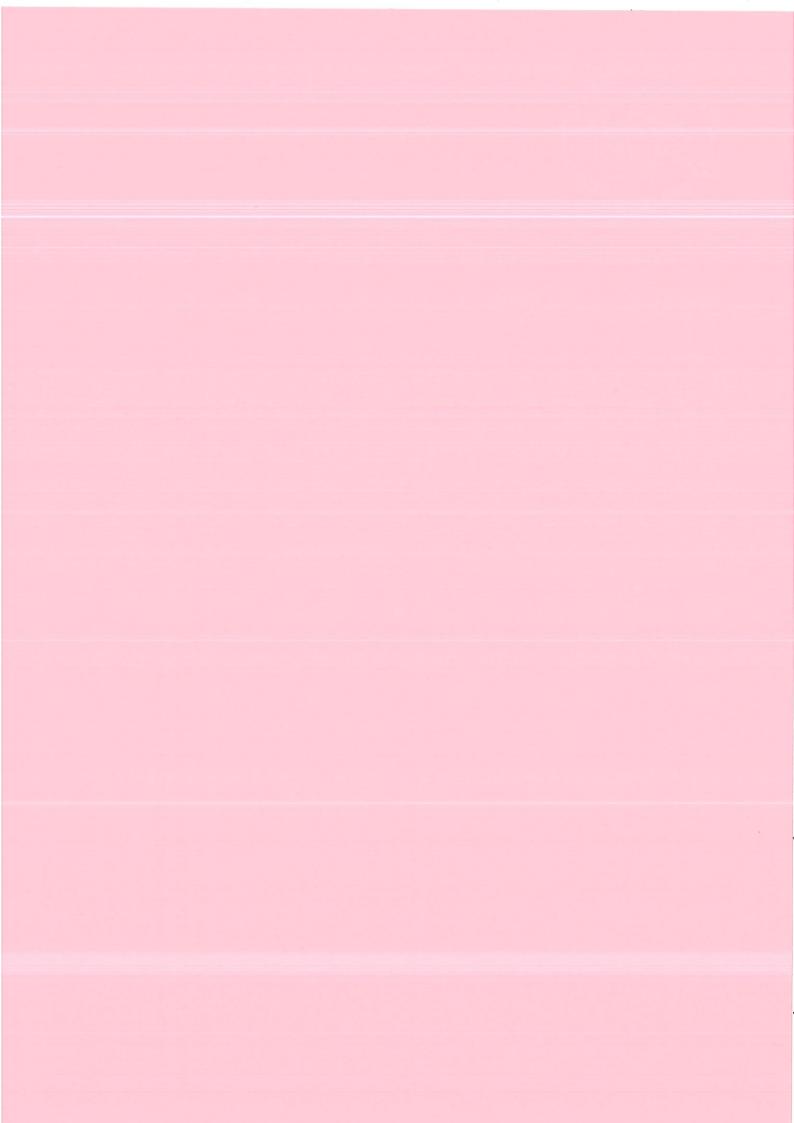
The school bus is driven by a suitably licenced employee or approved person, such as the school chaplain.

Children must be ready when the bus comes past between 8am and 8:30am.

It is a condition of travel that students wear seatbelts and sit in the appropriate seat or booster seat as stipulated in legislation.

In a very urgent situation a student may be transported home, however collecting sick children or children who have been suspended is the responsibility of the family.

I give permission for:		
To travel in the school bus before	school and during th	ne school day if there is an urgent issue.
Name	Signature	Date
For High School students only:		
I give permission forbreak.		to leave the school ground for lunch





Parental viewing consent form

At **Mount Magnet DHS** we aim to offer your child the widest range of learning opportunities.

This form asks you to consent (or otherwise) to your child's access to some audio-visual content as part of the school program. At all times we make the very best efforts to exercise exemplary standards in respect of duty of care.

VIEWING CONSENT FOR 'PG' RATED CONTENT

Students often watch videos, DVDs and television documentaries as part of their learning. Almost always these are 'G' rated and don't require formal parental consent. Very occasionally something with a 'PG' rating is appropriate, for which we are seeking parental permission.

	Yes, I consent to my child viewing items with a 'PG' rating if deemed suitable by the teacher and school administration.
	No, I do not give consent.
[OR]	
VIEV	VING CONSENT FOR 'G' RATED CONTENT
Almo	ents often watch videos, DVDs and television documentaries as part of their learning. ost always these are 'G' rated and don't require formal parental consent. Very sionally something with a 'PG' rating is appropriate, for which we would seek separate ntal permission.
	Yes, I agree that my child may view items with a 'G' rating if deemed suitable by the teacher and school administration.
	No, I do not agree to my child viewing items with a 'G' rating if deemed suitable by the teacher and school administration and prefer to provide agreement (or otherwise) on a case-by-case basis.
Stud	ent name: Student year / class / room:
Nam	e of person signing the consent form:
Rela	tionship to the student (e.g. parent or guardian):
Sign	ature:





Student health care

On enrolment you will be asked to provide your child's health information to help the school meet your child's health needs.

You will be asked to:

- provide your child's Australian Immunisation Register (AIR) immunisation history statement
- complete a Health Care Summary form with details about health care needs and information to use in a medical emergency
- complete Management and Emergency Response Plans where the Health Care Summary indicates your child needs support at school.

If your child's medical needs are complex, you can arrange a meeting with the school.

Management and Emergency Response Plan

A Management and Emergency Response Plan provides your child's school with information they need to respond to specific medical needs. The plan outlines:

- a daily management plan
- an emergency response plan
- staff training requirements
- medication instructions such as dosage, storage and when it needs to be taken
- your authority to act.

Management and Emergency Response Plans may need to have a signature from your child's medical practitioner.

It is important to ensure the plan is in place as soon as possible. You should also review the plan each year or as your child's needs change.

Types of plans

Management and Emergency Response Plan templates are available from your school for common conditions such as:

- · severe allergy or anaphylaxis
- mild and moderate allergies
- seizure
- asthma
- · activities of daily living
- emergency response plan for students with special needs
- generic health care (for all other conditions).

Plans for students with diabetes are developed using the Diabetes WA templates.

Medication and equipment

If your child needs to be given medication during school hours, you need to provide:

- medication that is labelled with your child's name, in its original packaging and is within expiry
- written authorisation for the school to administer the medication using a standard form from the school.

This applies to medication for long-term and short-term use.

If your child needs medical equipment at school, it is important to ensure you supply the equipment in good working order.

It is important that you maintain communication with your child's school, and advise of any changes or concerns you may have.







STUDENT ENROLMENT FORM

The Student Enrolment Form should be completed if you wish to accept an offer of a place at our school. The student's enrolment is complete once this form is submitted to the school with the necessary documentation.

Family details should include the details of the parent/carer residing at the same address as the student. Details relating to parents or other carers not residing with the student may be included in other contact details. You will also need to complete a Student Health Care Summary. Please complete the forms in English. Please contact the school if you require assistance with translation.

Older devices and some smart devices may need Adobe Reader to use this form. A free version of Adobe Reader is available to download via https://get.adobe.com/reader/.

SCHOOL NAME			
School name	Mount Magnet District High School	Year	Level entering
STUDENT DETAILS			
Student surname			
Legal surname (if different)			
Previous Surname (if applicable)			
1st Name	2nd Name	3rd N	lame
Preferred Name			
Date of birth (dd/mm/yy)	/ / Gender	Male Female	Other
Residential Address			
		Po	stcode
Telephone (Home)	Car R	egistration (if applicable)	
Student's Religion (if applicable)			
Is the student to be withdra	wn from religious instruction or activities?	○YES ○ NO	



STUDENT DETAILS (Con-	tinued)		
Is the student of Aboriginal or Torres Strait Islander origin? No Yes, Aboriginal Yes, Torres Strait Islander (TSI) Yes, both Aboriginal and TSI Does the student speak a language other than English at home? No, English only Yes, Aboriginal English Yes, other language - please specify (If more than one language, including an Aboriginal language, indicate the one that is spoken most often) What was the first language spoken at home? Does the student mainly speak English at home? YES NO EVIDENCE OF IMMUNISATION STATUS The student's Australian Immunisation Register (AIR) Immunisation History Statement shows the immunisation status is: Up to date Not up to date The student has an Immunisation Certificate issued by the Chief Health Officer			
SIBLING DETAILS			
Full Name/s of siblings atte	nding this cahool		
an rume, o or oldnings are			
Student lives with:			
Both Parents			
Parent/Carer 1	Name	Relationship to student	
Parent/Carer 2	Name	Relationship to student	
Independent minor	Name	Relationship to student	
Adult Student	Name	Relationship to student	
Other, please specify	Name	Relationship to student	
RESIDENCY STATUS			
Nationality (optional)		Country of Birth	
Is the student an Australian	citizen?	YES NO	
If No, Is the student a perm	anent resident of Australia? ON	O YES - If Yes, Visa Sub Class Number	
Is the student a temporary	resident of Australia?	○YES ○NO	
If Yes, Date of Arrival in Aust	tralia / /	Visa Sub Class Number	
Visa Expiry Date (if applicable)	1 1		



PREVIOUS SCHOOL	
Previous School	
If previously enrolled in Home Education, specify the Education	1 Region
DIOSDILITY	
DISABILITY	
Does the student have a disability?	○ YES ○ NO
If Yes, please specify	
Please tick if you can provide documentation about (The school	l will request copies of this information)
Autism	Physical Disability
Deaf or Hard of Hearing	Severe Mental Disorder
Global Developmental Delay (prior to age 6)	Specific Speech and/or Language Impairment
Intellectual Disability	Vision Impairment
Other, please specify	
CONFIDENTIAL INFORMATION	
Is this student subject to any court orders in respect of their c	are, welfare and development or access restrictions?
○ YES ○ NO	
If YES, please specify and attach supporting documentation.	
Does the family or student have a Health Care Card?	○ YES ○ NO
If Yes, please provide card number	Expiry Date / /
Is this student in the care of Director General of the Department	of Communities - Child Protection and Family Support (CPFS)?
	ase Manager, their CPFS District and their contact phone number.
District	
Name	Contact Number
Does the student receive any of the following allowances? (Che	eck the boxes that apply)
Secondary Assistance Youth Allowance Assistance f	or Isolated Children (AIC) Abstudy

PARENT / CARER 1 DETA	LS	
Title	First Name	
Surname		
Relationship to the student		
Date of birth (dd/mm/yy)	/ Gender Male Female Other	
Postal Address (if different from student residential address)		
	Postcode	
Telephone	Mobile Number	
Email Address		
background. Providing this all students are being well s Does Parent/Carer 1 speak a	no matter which school their child attends, are asked to provide information about their information is voluntary but your information will help the Department of Education ensure that erved by our public schools. I language other than English at home? , other - please specify	
	dicate the one that is spoken most often)	
(ii more than one language, inc	neate the one that is spoken most often,	
What is the highest year of s	chool Parent/Carer 1 has completed?	
Year 12 or equivalent	Year 11 or equivalent	
Year 10 or equivalent		
(If you did not attend school, mark 'Year 9 or equivalent or below')		
What is the level of the high	est qualification Parent/Carer 1 has completed?	
Bachelor degree or above	Advanced diploma/Diploma	
Certificate I to IV (including	trade certificate) No non-school qualification	
What is the occupation group for Parent/Carer 1? (Refer to Attachment 'Parent Occupation Groupings' for more information regarding the categories)		
1. Senior Management in large business organisation, government administration & defence, and qualified professionals		
2. Other business managers, arts/media/sportspersons & associate professionals		
3. Tradesmen/women, clerks and skilled office, sales & service staff		
4. Machine operators, hospitality staff, assistants, labourers and related workers		
8. Unemployed, Retired, St	udent	
	work, but have had a job in the last 12 months, please use your last occupation. ork in the last 12 month, enter '8'.)	

PARENT / CARER 2 DETA	ILS			
Title	First Name			
Surname				
Relationship to the student				
Date of birth (dd/mm/yy)	/ Gender Male Female Other			
Postal Address (if different from student residential address)				
	Postcode			
Telephone	Mobile Number			
Email Address				
All parents across Australia, no matter which school their child attends, are asked to provide information about their background. Providing this information is voluntary but your information will help the Department of Education ensure that all students are being well served by our public schools. Does Parent/Carer 2 speak a language other than English at home?				
NO, English only YES				
(If more than one language, Inc	licate the one that is spoken most often)			
What is the highest year of s	chool Parent/Carer 2 has completed?			
Year 12 or equivalent	() Year 11 or equivalent			
Year 10 or equivalent	Year 9 or equivalent or below			
(If you did not attend school, mark 'Year 9 or equivalent or below')				
What is the level of the highe	est qualification Parent/Carer 2 has completed?			
Bachelor degree or above Advanced diploma/Diploma				
Certificate I to IV (including	trade certificate) No non-school qualification			
What is the occupation group for Parent/Carer 2? (Refer to Attachment 'Parent Occupation Groupings' for more information regarding the categories)				
1. Senior Management in large business organisation, government administration & defence, and qualified professionals				
2. Other business managers, arts/media/sportspersons & associate professionals				
3. Tradesmen/women, clerks and skilled office, sales & service staff				
4. Machine operators, hospitality staff, assistants, labourers and related workers				
8. Unemployed, Retired, Student				
(If you are not currently in paid work, but have had a job in the last 12 months, please use your last occupation. If you have not been in paid work in the last 12 month, enter '8'.)				



OTHER FAMILY DETAILS

If applicable, please talk to your school about:

- · arrangements for the payment of contributions or charges;
- distribution of information, including student reports and newsletters

OTHER CONTACT DETAILS (People other than Parent/Carer 1 and Parent/Carer 2 who may be contacted in an emergency.)

The Control of the Co	,
CONTACT 1:	
Title	First Name
Surname	
Relationship to the student	
Postal Address (if different from student residential address)	Postcode
Telephone (Home)	Mobile Number
Email Address	
CONTACT 2:	
Title	First Name
Surname	
Relationship to the student	
Postal Address (if different from student residential address)	Postcode
Telephone (Home)	Mobile Number
Email Address	



Education's record uirements to other nmunisation status change. or cancelled.				
1 1				
(Independent minors and those aged 18 years or older may sign on their own behalf) If you are completing this form online and are unable to sign this form please check this box to confirm the above information is true and correct. Note: In the event that statements made in this application later prove to be false or misleading this application may be declined. Information supplied may need to be checked by the school.				



OFFICE USE ONLY	
Student's official documentation all sighted Date	/ / C YES C NO
○ Birth certificate ○ Passport	O Visa document/s
Other, please specify	
Year/Form/Class	House Faction
Student's Residency status Australian citizen	Permanent resident Temporary resident
International Fee Paying	○ YES ○ NO
Entry Date / /	Previous School
LOTE Stage	Records received YES NO
Contributions/Charges Billing PG1 (%)	PG2 (%) Other (%)
School records (including reports, to be sent to)	Other
AIR Immunisation History Statement provided	○ YES ○ NO
Date of issue / /	Immunisation status is Up to date Not up to date
Date AIR sighted / /	
If not up to date, additional request/s for documentation on date/s:	
Immunisation Certificate issued by the Chief Health Officer	○ YES ○ NO
Kindergarten eligibility for immunisation exemption:	Code
	/ / No
Entered on School Information system by	Date / /
Student leaves school (Date) / /	Advice of Transfer (Date) / /
Destination	
Records received from transferring school YES NO	Date / /



Relates to questions in Parent/Carer 1 and Parent/Carer 2 sections in this form

GROUP 1	GROUP 2	GROUP 3	GROUP 4
Senior management in large business organisation government administration & defence, and qualified professionals	Other business managers, arts/media/sportspersons and associate professionals	Tradesmen/women, clerks and skilled office, sales and service staff	Machine operators, hospitality staff, assistants labourers and related workers
Senior executive/ manager / department head in industry, commerce, media or other large organisation. Public service manager (section head or above), regional director, health/ education/police/ fire services administrator. Other administrator [school Principal, faculty head/dean, ibrary/museum/gallery director, research facility director]. Defence Forces Commissioned Officer. Professionals generally have degree or higher qualifications and experience in applying this knowledge to design, develop or operate complex systems; dentify, treat and advise on problems; and teach others. Health, Education, Law, Social Welfare, Engineering, Science, Computing professional. Business [management consultant, business analyst, accountant, auditor, policy analyst, actuary, valuer]. Air/sea transport faircraft/ships captain/officer/ bilot, flight officer, flying instructor, air traffic controller].	Owner/manager of farm, construction, import/export, wholesale, manufacturing, transport, real estate business. Specialist manager [finance/engineering/production/personnel/ industrial relations/sales/marketing]. Financial services manager [bank branch manager, finance/investment/insurance broker, credit/loans officer]. Retail sales/services manager [shop, petrol station, restaurant, club, hotel/motel, cinema, theatre, agency]. Arts/media/sports [musician, actor, dancer, painter, potter, sculptor, journalist, author]. or media presenter, photographer, designer, illustrator, proof reader, sportsman/ woman, coach, trainer, sports official]. Associate professionals generally have diploma/technical qualifications and support managers and professionals. Health, Education, Law, Social Welfare, Engineering, Science, Computing technician/associate professional. Business/administration [recruitment/employment/industrial relations/training officer, marketing/advertising specialist, market research analyst, technical sales representative, retail buyer, office/project manager]. Defence Forces senior Non-Commissioned Officer.	Tradesmen/women generally have completed a 4 year Trade Certificate, usually by apprenticeship. All tradesmen/ women are included in this group. Clerks [bookkeeper, bank/PO clerk, statistical/actuarial clerk, accounting/claims/audit clerk, payroll clerk, recording/registry/filing clerk, betting clerk, stores/ inventory clerk, purchasing/order clerk, freight/transport/shipping clerk, bond clerk, customs agent/customer services clerk, admissions clerk]. Skilled office, sales and service staff Office [secretary, personal assistant, desktop publishing operator, switchboard operator]. Sales [company sales representative, auctioneer, insurance agent/ assessor/loss adjuster, market researcher]. Service [aged/disabled/refuge/child care worker, nanny, meter reader, parking inspector, postal worker, courier, travel agent, tour guide, flight attendant, fitness instructor, casino dealer/ supervisor].	Drivers, mobile plant, production/ processing machinery and other machinery operators Hospitality staff [hotel service supervisor, receptionist, waiter, bar attendant, kitchenhand, porter, housekeeper]. Office assistants, sales assistants and other assistant office [typist, word processing/data entry/business machine operator, receptionist, office assistant]. Sales [sales assistant, motor vehicle/caravan/parts salesperson, checkout operator cashier, bus/train conductor, ticket seller, service station attendant, car rental desk staff street vendor, telemarketer, shelf stacker]. Assistant/aide [trades' assistant, school/teacher's aidedental assistant, veterinary nurse, nursing assistant, museum/gallery attendant, usher, home helper, salon assistant, animal attendant]. Labourers and related worker Defence Forces ranks below senior NCO not included in other groups. Agriculture, horticulture, forestry, fishing, mining worker [farm overseer, shearer wool/hide classer, farmhand, horse trainer, nurseryman, greenkeeper, gardener, tree surgeon, forestry/logging worker more, seafarer/fishing hand]. Other worker [labourer, factor, hand, storeman, guard, cleane caretaker, laundry worker, trollector, car park attendant, crossing supervisor].

These categories have been determined nationally and are designed as broad occupational groupings. All Australian states and territories use the same categories.





Mount Magnet District High School
Laurie Street (PO Box 60)
MOUNT MAGNET, WA 6638

MountMagnet.DHS@education.wa.edu.au TEL: 08 9963 3800

Mobile: 0436859469

ABN: 75 278 875 802

Parents / Carers can pay and arrange for lunch to be delivered to the school through the Murchison Hardware Store located on the main street. 67 Hepburn Street
Mount Magnet
WA 6638
(08) 9963 4207

School Lunches Menu (<u>Flease Note — Orders Must Be in by 11.00 am</u>)

Ireshly Baked Rolls Ireshly Made Sandwiches \$7 Each

Chicken & Mayo
Chicken, Lettuce & Mayo
Beef, Cheese & Pickle
Beef, Cheese & Chutney
Egg & Mayo
Egg, Lettuce & Mayo
Curried Egg
Curried Egg & Lettuce
Ham & Cheese
Ham, Cheese & Tomato
Beef, Cheese & Salad Roll
Ham, Cheese & Salad Roll
Chicken, Cheese & Salad Roll

Hot Foods

Pie \$5.70
Sausage Roll \$4.70
Mini Pizza \$4.00
Ham & Cheese Croissant \$7.00
Hot Chicken Roll Cheese & Mayo \$7.00

Drinks | Sweets | Fruits

Bottled Water \$2.00 Orange Fruit Drink \$2.00 Choc Muffin \$3.50 Banana \$1.50

Mount Magnet District High School

Laurie Street (PO Box 60) **MOUNT MAGNET WA 6638**

Phone: (08) 9963 3800

School Mobile: 0436 859 469

Fax: (08) 9963 4451

MountMagnet.DHS@education.wa.edu.au

ABN: 75 278 875 802 School Code 4142

SIDE Ph: 99634024 Satellite Ph: 0420 105199

SCHOOL TIMES

(Siren Times in Red)

8.30 am Students arrive in Classroom 8.15 am 8.30 am - 9.35 am Period 1 (65 minutes) 9.35 am - 10.35 am Period 2 (70 minutes) 10.35am - 10.50 am Recess 10.50 am - 11.50am Period 3 (55 minutes) 11.50 am - 12.50 pm Period 4 (55 minutes)

12.50 pm - 1.25 pm LUNCH

1.23 pm 1.25 pm -2.30pm 2.30pm

Warning Bell to End of Lunch Period 5 (65 minutes) **School finishes**

KINDERGARTEN TIMES

Tuesday / Wednesday / Thursday 8.30am to 2.30pm Monday / Friday — No Kindy

PHOTOCOPYING PRICES

Personal (GST Inc)

Black A4 - 40¢ Colour - 80¢ Black A3 - 80¢ Colour - \$1.60

Cost Centre & Staff (ex GST)

Black A4 - 10c Colour - 30c Black A3 - 20c Colour - 50¢

LAMINATING PRICES

Personal (GST Inc)

A4 - \$1.00 A3 - \$2.00

Per metre - \$3.00

Cost Centre & Staff (ex GST)

A4 - 15¢ A3 - 30¢

Per metre - \$3.00

