



# Ipswich West State School

Cnr Omar and Keogh Streets  
WEST IPSWICH Q 4305

[www.ipswwestss.eq.edu.au](http://www.ipswwestss.eq.edu.au)

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Telephone: 38135222

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Principal: Ms Cartia Balladone

Head of Curriculum: Ms Melissa Van Bael

## STUDENT RECORD UPDATE

To keep our records as up-to-date and accurate as possible, please fill in the form below with your current details which will make it possible for us to reach you, should the need arise. **It is important to keep these records updated with the school any time there are changes.** If you share custody, please contact the school to discuss the details.

Students' Names .....

Student Address .....

<b>PARENT/CARER 1 WILL BE LISTED AS 1<sup>ST</sup> CONTACT</b>
Parent/Carer 1 Name:.....
Live with student/s above?: Yes / No
If no, address: .....
.....
Mobile Phone No: .....
Home Landline No. ....
Work contact: .....
Email address: .....

<b>PARENT/CARER 2 WILL BE LISTED AS 2<sup>ND</sup> CONTACT</b>
Parent/Carer 2 Name:.....
Live with student/s above?: Yes / No
If no, address: .....
.....
Mobile Phone No: .....
Home Landline No. ....
Work contact: .....
Email address: .....

☛ All newsletters will be sent via email, so please ensure that you have at least one EMAIL address.

☛ Any person NOT listed on the emergency contacts will need a phone call to the school from a legal guardian (parent/carer) for permission to collect students and for that person to bring photo identification.

**Other** Emergency contact name (**NOT** parent/carer listed above)

.....

Mobile No: .....Home No .....

Relationship to student/s .....

**Other** Emergency contact name (**NOT** parent/carer listed above)

.....

Mobile No. .... Home No .....

Relationship to student/s .....

<b>Parent/Carer 1 please sign and date.</b>
.....
Date ...../...../.....

**MEDICAL UPDATES**

Student's Name: .....

Date of Birth: .....

**Medical Conditions to add:**

Condition: .....

Symptoms: .....

Management: .....

Condition: .....

Symptoms: .....

Management: .....

**Medical Conditions that no longer apply (will be removed from current status)**

Condition: .....

.....

\_\_\_/\_\_\_/\_\_\_

Parent/Guardian Signature

Date