



student2student Buddy Application Form



everyone's family

Before you start this form, please take a moment to discuss with your child/ren why they would like to participate in *student2student*. Both our Buddies and Readers find the program tremendously rewarding, but like all rewards, there may be some challenges along the way!

Common reasons to participate in s2s include: requirements for Duke of Edinburgh and/or community service, a wish to contribute to the wider world, or a love for reading. These are great reasons!

Please also discuss the resilience, commitment and perseverance your child will need to succeed in the program – our younger readers are sometimes a little shy or nervous initially, and it can be challenging to establish and maintain a regular reading schedule.

Despite any challenges, our Buddies **love** their valuable role!

The following comments were captured in our 2018 Buddy survey:

'Knowing that I can do something to help another, even though I'm a child myself, especially when reading is a passion of mine.'

'The best part was hearing my reader improve and making a connection with her.'

'When his dog kept licking the phone and I couldn't understand anything! It wasn't actually reading, but it was absolutely hilarious and a highlight!'

'The best was being able to have some time for myself to relax and read as well, as it is very difficult to find time to do this with school work. I also enjoyed hearing my reader improve each week and how excited she was to read!'



The best part was knowing that my buddy was improving his reading and that it would benefit him for the rest of his life."
Buddy



Still sound good? Please continue. Parents/Guardians: please complete this form to confirm consent for your child to participate as a Buddy in s2s.

Please complete and return this form by <date> to <staff member>. This document is **4 pages long**.

Student Name: Date of Birth: / /

Gender: Male Female Other

Student email:

Parent/Guardian name:

Parent/Guardian Landline: Mobile:

Parent/Guardian email:

Student postal address:



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Suburb: State: Postcode:

School name: Year level in 2019:

Does your child identify as Aboriginal or Torres Strait Islander?

- Prefer not to say
- Yes – Aboriginal
- Yes – Torres Strait Islander
- Yes – Aboriginal and Torres Strait Islander
- No

Program model

When volunteering as an s2s Buddy, your child can contact their Reader using either a phone (mobile or landline) **or** computer/tablet. Your child will be matched with a Buddy participating in the same program model. Please see below regarding contact information for the different models.

Important: From 2019, Buddies will need to provide their own device for all models – BYOD.

Buddies are required to make **first contact with Readers** to introduce themselves and agree reading times.

- For **mobile phone participants**, The Smith Family advises families to **block their caller ID** to ensure confidentiality. Your phone number will not be provided to the Reader family.
- In the **landline model**, parent phone numbers of matched Readers and Buddies are shared as reading happens on the phone.
- In the **digital model (Chatty Kids)**, parent phone numbers of matched Readers and Buddies are shared. Only one, initial phone call is necessary to agree reading times. Once a time has been decided, all reading will occur online via Chatty Kids.

My child will have access to (please tick all that apply):

- Landline
- Mobile
- Tablet/Computer

Please complete the following:

YES, I am happy for my child to use his/her own or my device/phone to contact their reader for all reading

AND

YES, I have unlimited minutes or data in my contract, and am confident I will not incur additional charges,

OR

YES, I am happy to accept there may be charges (for data or call minutes) involved in connecting my child (the Buddy) to their Reader and that these charges will be payable by me.

Alternatively:

If you **do not** have unlimited minutes or data, and/or are **not** happy to incur possible charges, please tick:

NO, my child will be not to participate in s2s BYOD because (please circle):

- we do not have a suitable device/landline available **OR**
- we are not willing to incur costs

If you are unable to participate, due to either of the reasons above, there is no need to complete the remainder of this document. Thank you for your interest in The Smith Family.

student2student Buddy Application Form



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As a Buddy, your child will have to commit to a **minimum of 2 x 20 minutes** reading sessions per week. Please tick all the days that your child would be available for reading. Readers and Buddies will be matched according to similar availability. Actual reading days and times will be agreed on between your child and their Reader once the program commences.

Please ensure you tick **at least** two options below.

Week days:

- Monday 4-7pm Tuesday 4-7pm Wednesday 4-7pm
 Thursday 4-7pm Friday 4-7pm

Weekend:

- Saturday (morning) Saturday (afternoon)
 Sunday (morning) Sunday (afternoon)

In addition to their **availability** and **program model**, Readers and Buddies are matched with at least **two years age difference**, and where possible, of the same gender. This is dependent on the children recruited, and **cannot be guaranteed**.

Parent/Guardian to complete: *I have read the program fact sheet and understand the role and responsibilities of my child volunteering as a Buddy in the s2s program.*

By signing this document:

- I declare that my child fulfils the qualities of a Buddy as outlined in the program fact sheet and I give them permission to participate in the s2s program.
- I declare that my child wants to be a Buddy and understands his/her role and responsibilities in the program.
- I give permission for my child to attend s2s pre-program training session conducted by a Smith Family staff member.
- I will ensure, to the best of my ability, that my child will not make any attempt to contact his/her Reader outside of the s2s program.
- I will encourage and support my child to participate fully in the program.
- I understand that The Smith Family will use SMS to periodically send important reminders during the program.
- I understand that for landline and digital models, my phone number will be shared with the Reader family in order for contact to be made and reading to occur.
- I understand that The Smith Family will not reimburse any costs I incur as a result of my child participating in the program.
- **If participating in the Digital model, using a tablet/computer:**
 - I give The Smith Family permission to give my child access to the *Chatty Kids* website.
 - I confirm that my child has access to reliable high-speed internet and a suitable device that can be used for the program.
 - I understand that the Digital model requires internet data to access books and contact the Reader and this will come out of my monthly data allowance. As a guide:
 - It takes 4-6MB per book download
 - It takes 30MB per 20-minute voice call
- **If participating in the Phone model, using a mobile/landline:**
 - I understand that I will need to ensure my child has access to a mobile phone/landline for the duration of the program, and that I will be liable for any costs incurred in connecting my child with their Reader.



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student2student Buddy Application Form



- I understand that to ensure confidentiality, it is highly recommended for mobile phone caller ID to be blocked.

Child protection

I understand that The Smith Family has Policies and Procedures that help them to comply with privacy and child protection laws. I understand that if either my child or I do anything that breaks these laws or prevents The Smith Family from complying with these laws, my child will not be able to continue as a participant in the program. In this situation The Smith Family will also consider what further legal actions will be taken.

Confidentiality agreement

I have explained to my child the principle of confidentiality as explained by The Smith Family staff, and my child will not tell anyone else any information which comes to him/her about a Reader, Buddy or staff member. I also understand that any information that either my child or myself gives to the Reader or staff member is also confidential and will not be given to anyone else unless it is needed to manage the program, or if the law requires them to do so.

Privacy policy

I understand that The Smith Family collects my child's personal information (which may include sensitive information) to assess their eligibility to participate in programs and activities and to help provide my child with assistance tailored to their needs. The Smith Family may also use my child's information for research, to assess the effectiveness of its programs and to plan for future activities.

I understand that my child's personal information will be collected, used and disclosed by The Smith Family for these purposes in accordance with its Privacy Policy, a copy of which has been provided to me, and that The Smith Family will not otherwise use or disclose my child's personal information without my consent, unless it is required or authorised under law to do so.

I consent to my child's sensitive information (such as information about health or ethnic origin) being collected, used and disclosed for the purposes outlined above, and to their personal information being used for research purposes, provided they are not identified in any way in any research publication. I also understand that The Smith Family may contact me about my child's interest and willingness to participate in publicity or marketing activities or in research projects. These may involve the collection of additional personal information or my child or family being identified in a publication. I understand that I have the right to say 'No' to these requests without affecting my child's participation in the program or activity.

Exclusion of Liability

Whilst The Smith Family has taken and will take all reasonable care to avoid injury to persons whilst participating in the student2student program, The Smith Family shall not be liable for personal injury or property loss or damage of any kind whatsoever, other than injury, loss or damage directly attributable to failure to take reasonable care on the part of The Smith Family. I confirm that I have read the above and by signing this letter I accept these terms of exclusion.

I am over 18 years of age and a Parent, Guardian or Primary Carer of the child listed. I have read the above and consent to the terms listed on this application form.

Parent/Guardian's signature

 / /

Date of consent

Additional Permission

We love to learn from our programs and to pass on positive program experiences to our partners and schools. Even though we always keep your details confidential, we need your permission to do this. I give permission for my/my child's feedback to be included in any of The Smith Family's promotional material. Yes No