



# Child Safe Agreement

This agreement confirms that teachers, staff members, and volunteers understand their responsibilities to maintain a **safe and respectful environment for children** participating in Sydney Saturday School of Japanese's programs.

## 1. Personal Details

Name:

Role:

- Teacher
- Staff Member
- Volunteer
- Committee Member
- Other: \_\_\_\_\_

Phone Number:

Email Address:

## 2. Commitment to Child Safety

I acknowledge that the organisation is committed to protecting the **safety, wellbeing, and rights of all children**.

I agree to support and follow the organisation's **Child Safe policies and procedures**.

## 3. Understanding of Policies

I confirm that I have read and understood the following documents:

- Child Safe Policy
- Child Safe Code of Conduct
- Child Safe Reporting Policy
- Child Safe Risk Management Plan

I understand my responsibility to follow these policies at all times when working with children.

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## 4. Behaviour Expectations

I agree to:

- Treat all children **with respect, dignity, and fairness**
- Maintain **appropriate professional boundaries** with children
- Follow all **child safety procedures** of the organisation
- Ensure children are **properly supervised** during activities
- Use appropriate language and behaviour at all times

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## 5. Prohibited Conduct

I understand that I must **not**:

- Engage in inappropriate physical or emotional behaviour with children
- Develop personal or private relationships with students
- Communicate with students through personal social media accounts
- Place a child at risk of harm or neglect

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## 6. Reporting Obligations

I understand that I must report any **child safety concerns, incidents, or allegations** as soon as possible.

Reports should be made to the **Child Safety Officer** or school leadership.

Where required, reports may be referred to external authorities including:

- NSW Police
- Department of Communities and Justice (DCJ)

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## 7. Working With Children Check

I confirm that I hold a valid **Working With Children Check (WWCC)** if required for my role and will inform the organisation if my status changes.

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## 8. Declaration

I confirm that:

- I have read and understood this agreement
- I agree to comply with all child safety policies and procedures
- I understand my responsibility to protect children from harm

Name:

Signature:

Date:

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## For Office Use Only

WWCC Number:

Expiry Date:

Verified by:

Date Verified: