



Sydney Full Gospel Church Korean Language School
Greenacre() Ryde() Blacktown() Castle Hill() Ryde Afternoon()
**Please tick in one of the above 5 locations.*

등록 번호	
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Parent/Carer/Self Certification Form

2020 Use of Personal Information

**NSW Community Languages Program
 Department of Education and Training**

I have been advised by

.....
 (name of organisation/school)

that the information about
 (student's name)

provided on the *NSW Community Languages Program (CLP) Funding Application* is used for the purpose of applying for and monitoring funding under the CLP. It will be used by the Department of Education and Training (DET) for assessment of eligibility and monitoring of program implementation. I have been advised that DET will be granted access to the information, that provision of this information is voluntary and that it will be stored securely.

I am aware that if I do not provide all or any of this information my child will not be funded.

(You may correct any personal information provided at any time by contacting the organisation/school.)

Signed: _____
 (Parent/Carer/Self)

Date: _____