**SUNSHINE COAST SCHOOL SPORT**

**REGIONAL TEAM RECORDS FINALISATION – ARCHIVING SUMMARY**

|  |  |  |  |
| --- | --- | --- | --- |
| YEAR | 2024 | | |
|  |  | | |
| SPORT TEAM |  | AGE/GENDER |  |
|  |  | | |
| TEAM MANAGER NAME |  | | |

Instructions: Mark each item that you provided to the Sunshine Coast School Sport using an approved record transfer method.

**WE REQUIRE COPIES OF ALL RECORDS IN AN ELECTRONIC FORMAT.**

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| --- | --- |
| **Record / document** | **Provided to sports office** |
| Electronic Manager’s Tool (EMT) |  |
| Student Permission Booklets |  |
| Mouthguard forms (if applicable to your sport) |  |
| QRSS consent forms  Consent forms must be saved electronically using the following format:  **Surname, First name - DOB - Region - Sport – student consent form**  (eg. Brown, Mary - DOB 01/01/2006 - Sun – Golf – student consent form) |  |
| QRSS Team list and consent summary form |  |
| State championship – regional team manager report |  |
| Student principal approval forms from specific schools |  |
| Team training attendance rolls |  |
| Playing time register at state championship |  |
| Accident / incident reports (if applicable) |  |
| Any regional team checklists |  |
| Other documents retained by other regional officials |  |
| Regional trial selection notes |  |
| Emails from parents which may involve an apparel order and / or compliant/concern (we don’t need all parent email correspondence) |  |
| Any other records deemed important by the regional manager |  |
| Any other regional records/documents from the regional trial |  |

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| Signature: |  | Date: |  |