Induction completion declaration

Name:				
	Instructions:	Check off each statement an	nd sign and date this form.	
	I have completed the QRSS induction course and have retained the certificate of completion for my records.			
	I am familiar with the contents of the current regional officials guide.			
	I am familiar with the Sunshine Coast School Sport website and the location of specific documents required in my role as a regional representative school sport team official.			
	I will consult my role's checklist when performing my team official role.			
	I acknowledge my responsibility to report any suspicions of student harm.			
	I know about the risk management procedures for the school sports program. This includes completing online concussion training and having valid first aid certification. I also understand which risk assessment documents need to be completed within specific time-frames.			
	I acknowledge my obligations to follow Department of Eduprocedures.		tment of Education policies and	
	I am aware of my responsibilities to keep and maintain secure records of team members, interactions, and parent communications.			
	I know where to role and respons		ormation regarding my appointed	
Signed:			Date:	

Please save this document as: <Name> regional induction declaration 2024.pdf (e.g. Dan Bandera regional induction declaration 2024.pdf)

Email this signed declaration certificate to sport.scrssb@qed.qld.gov.au when completed.

Credit hours: 2 hours of professional development for a formal short course relevant to teaching context.

