Dear Parent/Caregiver,

**Nationally Consistent Collection of Data on School Students with Disability in 2016**

Our school is required to complete the ‘Nationally Consistent Collection of Data’ (NCCD) on school students with a disability.

The Collection aims to provide all Australian schools, education authorities and the community with a clear picture of the number of students with additional needs in schools and the adjustments they require to enable them to participate in education on the same basis as other students. The Collection is an annual process for schools.

This collection will involve the collection of the following information:

- the number of students receiving adjustments to enable them to participate in education on the same basis as other students;
- the level of adjustment provided to students; and
- where known, the student's type of disability.

The definition of ‘disability’ is broad and includes learning difficulties, health conditions and mental health illnesses.

Once the data has been collated, it will be de-identified and forwarded to DECD. (ie Primary, Secondary and Special School). This ensures anonymity.

The data will be used by our school to inform and improve practice for students with additional needs and by the Department for Education and Child Development to inform statewide reform initiatives.

Your student's involvement in the process is optional.

(continued)
If you do not want our school to provide de-identified data about your child, you can 'opt-out' by completing and returning the opt-out form below to Student Services.

If you have any questions about the 2016 data collection, please contact Isabella Zoanetti isabella.zoanetti228@schools.sa.edu.au. Further information about the Collection can be found at: http://www.education.gov.au/nationally-consistent-collection-data-school-students-disability

Yours sincerely,

Caroline Green
Principal

7th July, 2016

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I have read the letter in relation to the 2016 Nationally Consistent Collection of Data (NCCD) for school students with disability and request that information is not to be collected for:

Student's name: _______________________________________________________________

Year Level/Class:______________________________________________________________

Full name of Parent/Guardian: ________________________________________________

Parent/Guardian signature: ___________________________________________________