

Raceview State School

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Principal: Raylee Davies

Deputy Principal: Francine Hayler

Head of Inclusion: Bronwyn Watkins



Hearing Check Parent Consent Form

Raceview State School would like to check your child's hearing. The school will be utilising the hearing screening App 'Sound Scouts'. The App has been developed by Sound Scouts in collaboration with Australia's National Acoustic Laboratories, the research arm of Australian Hearing.

Your child will play a game on an iPad/tablet using a set of headphones under the supervision of a responsible adult. A report will be automatically generated following the test and a copy sent home. Hearing assessment is encouraged due to the importance of early intervention with optimal educational outcomes dependent on good hearing.

***Please return this form with your enrolment form, or bring it to your interview in Term 4 2024 if you have questions or concerns.**

Name of Child: _____ Class: _____

Some additional information is needed to conduct the test.

1. What is your child's date of birth? (dd/mm/year) _____
2. Is Australian English your child's first language? (yes/no) _____
3. Has your child had any history of hearing problems? For example, has he or she ever been fitted with grommets? Please circle Yes / No

If yes, please provide details:

4. Has your child had any history of learning or attention disorders? Please circle: Yes / No

If yes, please provide details _____

I have read the above information and agree to my child having their hearing checked using Sound Scouts.

Name of Parent/Guardian: _____ (block letters)

Parent/Guardian's Signature: _____ Date: _____

For more information about Sound Scouts and to view their Privacy Policy please visit www.soundscouts.com

NB: Optimal results from Sound Scouts are dependent on the test being carried out as per the instructions in the App.

