

Staff acknowledgement of consent

Family Day Care

Please complete this consent form if you are employed in the management / coordination unit of a Family Day Care service. The form **does not** need to be completed by home-based Family Day Care educators.

The Department of Education (the department), through ECEC Service Census (*Staff Details Census form, Section 1*), collects your personal information, including your name, gender, Aboriginal and Torres Strait Islander status and age group. The purpose of this collection is planning, research, monitoring Early childhood initiatives and support of reporting on performance benchmarks and deliverables under intergovernmental agreements, which determine funding allocations to the State Government and, subsequently, to services. Not providing your personal information may limit the development of tailored policies for the ECEC workforce.

Your personal information will be managed in accordance with the *Information Privacy Act 2009 (Qld)*, may be shared with government agencies such as the Australian Bureau of Statistics for the purpose of implementing Early childhood initiatives like the *Preschool Reform Agreement* and the *Education and Care Services National Law*, and will not be used or disclosed for another purpose without your consent or unless authorised or required by law.

By signing below, you indicate that you agree to the terms of use of your personal information as set out above. (If you disagree, please cross out first line below and tick second)

- I AGREE TO PROVIDE PERSONAL INFORMATION AS INDICATED ABOVE
- I DO NOT AGREE TO PROVIDE PERSONAL INFORMATION AS INDICATED ABOVE

NAME

SIGNATURE **DATE** / /

Note: Completion of this form assists your service to enter accurate data into the Census. Use by service only.

Please complete this form and **return it to the Director** of the service.
You can greatly assist your service to enter accurate data into the Census collection by filling out your personal and other details in the attached form.
Thank you very much for your help.

Staff details Census form

Section 1 of this form collects details defined as 'Personal Information', which are extremely important to the department for planning purposes. However, if you do not wish for this information to be sent to the department by your service, the response "Not stated" will be recorded, as well as your initials instead of your name.

SECTION 1 - PERSONAL INFORMATION	
<p>1.1 Please enter the staff member's name. <i>(For quality assurance purposes only).</i></p>	<p>First Name _____</p> <p>Last Name _____</p>
<p>1.2 Please indicate the gender of the staff member.</p>	<p><input type="checkbox"/> Male</p> <p><input type="checkbox"/> Female</p> <p><input type="checkbox"/> I use a different term</p> <p><input type="checkbox"/> Not stated</p>
<p>1.3 Is this staff member of Aboriginal and/or Torres Strait Islander origin?</p>	<p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Aboriginal</p> <p><input type="checkbox"/> Torres Strait Islander</p> <p><input type="checkbox"/> Aboriginal and Torres Strait Islander</p> <p><input type="checkbox"/> Not stated</p>
<p>1.4 Is this staff member from a non-English speaking background? <i>If a staff member speaks a language other than English at home on a regular basis select yes.</i></p>	<p><input type="checkbox"/> Yes</p> <p><input type="checkbox"/> No</p> <p><input type="checkbox"/> Not stated</p>
<p>1.5 What is the staff member's age group?</p>	<p><input type="checkbox"/> 15-24</p> <p><input type="checkbox"/> 25-34</p> <p><input type="checkbox"/> 35-44</p> <p><input type="checkbox"/> 45-54</p> <p><input type="checkbox"/> 55+</p> <p><input type="checkbox"/> Not stated</p>
<p>1.6 During the week beginning Monday 28 July 2025, what was the main role performed by this staff member? <i>If this person worked in more than one position, please record the position in which they worked the most hours</i></p>	<p><input type="checkbox"/> Administration assistant</p> <p><input type="checkbox"/> Co-ordinator</p> <p><input type="checkbox"/> Manager / Senior co-ordinator</p> <p><input type="checkbox"/> Other worker</p> <p><input type="checkbox"/> Not stated</p>

SECTION 2: WORKFORCE DETAILS	
2.1 What is this staff member's employment status?	<input type="checkbox"/> Paid full-time <input type="checkbox"/> Paid part-time <input type="checkbox"/> Paid casual <input type="checkbox"/> Volunteer / unpaid worker
2.2 How many hours did this staff member work during the week beginning Monday 28 July 2025 ?	_____ Hours
2.3 What type of work did the staff member perform during the week beginning Monday 28 July 2025 ?	<input type="checkbox"/> Primary contact with children <input type="checkbox"/> Other child contact <input type="checkbox"/> Management / admin work with no child contact <input type="checkbox"/> Other work with no child contact
2.4 How many years has this staff member worked in the Early Childhood Education and Care sector?	_____ Years
2.5 How many years has this staff member worked at this service?	_____ Years
SECTION 3 – QUALIFICATIONS AND TRAINING	
3.1 Does this staff member hold an Early Childhood Education and Care (ECEC) related qualification?	<input type="checkbox"/> Yes <input type="checkbox"/> No (go to 3.6)
3.2 What is the field of highest ECEC related qualification held by this staff member?	<input type="checkbox"/> Teaching (Early childhood related) <input type="checkbox"/> Teaching (primary) <input type="checkbox"/> Teaching (secondary) <input type="checkbox"/> Teaching (other) <input type="checkbox"/> Other Early childhood related, inc. child care and children's services
3.3 What is this staff member's highest level of completed ECEC related qualification?	<input type="checkbox"/> Postgraduate degree <input type="checkbox"/> Graduate diploma or graduate certificate level <input type="checkbox"/> Bachelor degree (Honours) <input type="checkbox"/> Bachelor degree pass (4 years or equivalent) <input type="checkbox"/> Bachelor degree pass (3 years or equivalent) <input type="checkbox"/> Diploma (3 year equivalent obtained prior to 1995) <input type="checkbox"/> Advanced diploma <input type="checkbox"/> Diploma <input type="checkbox"/> Certificate level 3 or 4 <input type="checkbox"/> Certificate level 1 or 2 <input type="checkbox"/> Other certificate
3.4 Is this staff member currently registered with the Queensland College of Teachers (QCT)?	<input type="checkbox"/> Yes – full QCT registration <input type="checkbox"/> Yes - provisional QCT registration <input type="checkbox"/> No
If the field of highest ECEC related qualification held by this staff member is "Teaching (primary)", "Teaching (secondary)" or "Teaching (other)" → GO TO 3.5 Otherwise GO TO 3.6	
3.5 Does this staff member also hold an ECEC related Certificate III or higher?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Not applicable
3.6 Is this staff member currently studying an Early Childhood Education and Care (ECEC) related qualification?	<input type="checkbox"/> Yes <input type="checkbox"/> No (go to 3.10)

<p>3.7 What field of ECEC is this staff member currently studying? <i>If more than one, please select the field of study closest to the top of the list.</i></p>	<p><input type="checkbox"/> Teaching (Early childhood related) <input type="checkbox"/> Other Early childhood related, inc. child care and children's services</p>
<p>3.8 What level of ECEC qualification is this staff member currently studying to attain?</p>	<p><input type="checkbox"/> Postgraduate degree <input type="checkbox"/> Graduate diploma or graduate certificate level <input type="checkbox"/> Bachelor degree (Honours) <input type="checkbox"/> Bachelor degree pass (4 years or equivalent) <input type="checkbox"/> Bachelor degree pass (3 years or equivalent) <input type="checkbox"/> Advanced diploma <input type="checkbox"/> Diploma <input type="checkbox"/> Certificate level 3 or 4 <input type="checkbox"/> Certificate level 1 or 2 <input type="checkbox"/> Other certificate</p>
<p>3.9 For the qualification this staff member is currently studying, what is the expected year of completion for their final unit of study?</p>	<p>_____</p>
<p>3.10 Has this staff member undertaken any in-service training or professional development within the previous 12 months? <i>Other than any qualifications they may currently be studying.</i></p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>3.11 What was the focus of any in-service training or professional development completed within the previous 12 months? (select multiple focus areas if applicable) Do not include First Aid as part of the in-service training</p>	<p><input type="checkbox"/> National Quality Framework/National Quality Standards <input type="checkbox"/> Educational program and practice <input type="checkbox"/> Children's physical health and safety <input type="checkbox"/> Children's social, emotional development and well-being <input type="checkbox"/> Family and community partnerships <input type="checkbox"/> Leadership/management <input type="checkbox"/> Pedagogical leadership <input type="checkbox"/> Supporting children with disability <input type="checkbox"/> Cultural capability - Aboriginal and Torres Strait Islander families <input type="checkbox"/> Other, please specify _____</p>

Note: this form is for use by the service. Completion of these forms assists accurate data entry into the Census by your service.