

Parent/Carer

22<sup>nd</sup> November 2019

Dear Parent/Carer

### **Work Experience and STEM Enrichment Activities**

As you will be aware, Work Experience and STEM Enrichment Activity Week for Year 10 students during Term 1 is taking place on **Monday 16<sup>th</sup> December – Friday 20<sup>th</sup> December 2019**.

All students will participate in at least two weeks of work experience and one week of enrichment activities.

In December, your son/daughter will be participating in the STEM Enrichment Trips as follows:

<b>Monday 16<sup>th</sup> December</b>	Bristol Zoo
<b>Tuesday 17<sup>th</sup> December</b>	Big Pit National Coal Museum, Wales
<b>Wednesday 18<sup>th</sup> December</b>	SS Great Britain and Underfall Yard
<b>Thursday 19<sup>th</sup> December</b>	We the Curious and 3D Planetarium Show
<b>Friday 20<sup>th</sup> December</b>	Activities at IKB Academy

IKB will be heavily subsidising the activities for each enrichment week but are asking for a contribution of £25.00 per student for the week that Phoebe will be attending.

All students must be in school by 8:30am every morning ready to depart at 9:05am by minibus. Students will be back at IKB by 3.05pm, therefore school transport should be unaffected.

Please can all students wear school uniform and bring a packed lunch for each day of activities. There will be an opportunity to visit the gift shop at certain locations so students may want to bring some spending money with them.

Please note it is a ruling by the Governing Body, under Health and Safety, that any student who requires an inhaler must have it in his/her possession for the duration of the visit. A student who needs but does not have an inhaler will not be allowed to attend.

Yours sincerely



Mr Wilkinson  
Principal

**PERMISSION FORM – STEM ENRICHMENT WEEK**

Due to health and safety legislation, if this form has not been completed, returned and logged, your son/daughter will not be able to take part in this visit.

<b>Student Name</b>	
<b>Name of Emergency Contact 1</b>	
<b>Relationship to Student</b>	
<b>Contact Number</b>	
<b>Name of Emergency Contact 2</b>	
<b>Relationship to Student</b>	
<b>Contact Number</b>	
<b>GP Surgery</b>	
<b>GP Contact Number</b>	
<b>Important : Please advise us of any health issues that the Visit Leader should be aware of (e.g. physical, medication carried, allergies to food or medicine)</b>	
<b>My son/daughter carries an asthma inhaler</b>	Yes / No
<b>My son/daughter carries an epi-pen</b>	Yes / No

**Declaration**

I give permission for my son/daughter to attend STEM Enrichment Week in December 2019

I have made an online payment of £25

**My child is entitled to Free School Meals and will require a packed lunch**

**My child is Pupil Premium**

I give permission for my son/daughter’s image/photograph to be used in promotional literature for IKB Academy.

As parent/carer of the above named student I have read, understood and am satisfied with the details supplied about the above mentioned activities and assessed risks associated with them and I agree to him/her taking part. I agree that:-

- My son/daughter is fit to participate in the activities described
- He/she will comply with any special conditions applicable and that any unacceptable or bad behaviour which exists or reoccurs during the visit/activity may lead to him or her being excluded and mechanisms put in place to return persistent offenders home with associated costs borne by the parents/carers of that student
- If I cannot be contacted, I give permission for any emergency dental or medical treatment that is considered necessary by the medical authorities present, to be authorised by the party leader whilst the group is away from home

**Name of Parent/Carer (IN BLOCK CAPITALS)** .....

**Signature** ..... **Date** .....