



SCHOOL EXCURSION / INCURSION NOTIFICATION

Dear Parent/Caregiver, an excursion/activity has been organised for your child.

Excursion / Incursion	Cluster D practical assessment task
Date	Wednesday 3rd March 2021
Year / classes involved	8 students from Hospitality Kitchen operations in year 12.
Location	B3 Classroom
Purpose	Students in Hospitality will be preparing and serving a range of sandwiches and appetizers to parents and teachers of year 7 students during our annual (Meet the teachers) evening. This practical task is an essential element of the SIT20416 Cert II Kitchen operations course and will form part of the ongoing assessment program.
Start time	1:30pm
End time	6:00pm
Transport	
Cost	Free
Dress requirements	Full Chefs uniform
Food	Students bring their own recess/lunch
Equipment	
Organising teacher	Mark Crewe
Teachers attending	Mark Crewe
Additional information	
Consent Form and Payment due to Office by	22nd February 2021

General Information Concerning Excursions / Incursions

1. Excursions and Incursions form an integral part of the curricula by providing enriching experiences which cannot be provided in the classroom.
2. This excursion/incursion has the approval of the principal. A risk management plan has been submitted to the principal as part of the excursion planning.
3. Students must wear full school uniform unless otherwise instructed above. Students who are not in uniform will not be allowed to attend.
4. A standard of behaviour is expected of all students representing the school in the greater community.
5. Please note the time and place of departure and return, transport arrangements, uniform requirements and food as advised above.

Mr David Arblaster
Principal



EXCURSION / INCURSION PERMISSION FORM

Please return this permission form to the Office by 22nd February 2021

Excursion / Incursion	Cluster D practical assessment task
Date	Wednesday 03/03/2021 1:30pm - 6:00pm
Location	B3 Classroom
Cost	Free
Organising Teacher	Mark Crewe

I give permission for (student name) _____

of year/class _____ to participate in this excursion / incursion.

I have noted the start and end times, transport arrangements and dress requirements.

Additional needs of my child of which you should be aware: eg. allergies or medical conditions

Medical Assistance: In the event of any accident or illness, I authorise the teacher in charge to seek medical assistance or treatment for my child at my cost.

Parent signature: _____

Parent name: _____

Parent phone number: _____

Emergency Contact Name: _____

Emergency Contact Number: _____

- **Please return this consent form to the Office by 22nd February 2021**
- **Tear off and keep previous page for your information**