



**COMMUNITY ACCESS EXCURSION NOTIFICATION and PERMISSION LETTER  
TERM 2, 2019**

<b>Student:</b>							
<b>Teachers in charge: Sophie Georgiou, Michelle Athinoitis</b>							
Program	Dates of excursion	Departure time	Return time	Location	Mode of transport	Staff #:	Cost
Week 4	Wednesday 15 <sup>th</sup> May			<b>Citizenship Week Activities</b> Stay at school			
Week 5	Wednesday 22nd May	1:30pm	2:50pm	<b>Karingal Hub</b> <b>Woolworths supermarket</b> Parents / Carers to organise a shopping list of 2 food or grocery items for students to purchase and take home.	bus	4	N/A
Week 6	Wednesday 29th May	1:00pm	2:50pm	<b>Frankston Public Library</b> 60 Playne st Frankston	bus	4	N/A
Week 7	Wednesday 5 June	1:30pm	2:50pm	<b>George Pentland Botanic Gardens</b> 41N Williams st Frankston	bus	4	N/A
Week 8	Wednesday 12th June	1:30pm	2:50pm	<b>Karingal Hub</b> <b>Woolworths supermarket</b> Students to locate and purchase a food or grocery item (winter staple e.g. soup.) to take home.	bus	4	\$5
Week 9	Wednesday 19th June	1.30pm	2.50pm	<b>Ballam Park/Playground</b> 260 Cranbourne Road Frankston	Walk or bus	4	N/A

**\*In the event of unsuitable weather or other unforeseen circumstances, the students will stay at school.**

<b>Students need to bring:</b>	shopping list for 15/5 and 12/6, warm jacket / coat
<b>Total cost: \$10 cash</b>	<b>Payment due: 15/5/19 and 12/6/19 in named zip lock bag with shopping list.</b>
If applicable I authorise the school to use my CSEF – Camps, Sports and Excursions Fund    Yes <input checked="" type="radio"/> No <input type="radio"/>	
<b>Learning Intentions:</b> To develop children’s social, emotional, language and maths skills and knowledge; to explore the local environment and develop an awareness of conservation and sustainability; to develop an awareness the local community; to practice safe bus behaviour and to provide opportunities to transfer skills from the school setting to a variety of public settings.	

**Student accident insurance**

The Department of Education does not provide student accident cover. Parents may wish to obtain student accident insurance cover from a commercial insurer, depending on their health insurance arrangements and any other personal considerations.

## **Parent Consent**

### **Student behaviour**

I understand that in the event of my son's/daughter's misbehaviour or behaviour that poses a danger to himself/herself or others during the excursion, he/she may be sent home. I further understand that in such circumstances I will be informed and that any costs associated with his/her return will be my responsibility.

### **Consent for emergency transportation**

In the event of an emergency I consent to my child being transported in a privately owned vehicle driven by a member of the supervisory staff.

### **Change to Medical Condition**

Has there been any change to your child's medical condition?  Yes  No

If yes, please provide relevant details.

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### **Medication**

Is your child taking any medicine(s)?  Yes  No

If yes, provide the name of the medication, dose and describe when and how it is to be taken.

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### **Medical consent**

Where the teacher-in-charge of the excursion is unable to contact me, or it is otherwise impracticable to contact me, I authorise the teacher-in-charge to:

- Consent to my child receiving any medical or surgical attention deemed necessary by a medical practitioner.
- Administer such first aid as the teacher-in-charge judges to be reasonably necessary.

### **If my contact details change, I will notify the school office.**

I have read all of the above information provided by the school in relation to the excursion/s.

I give/do not give permission for: \_\_\_\_\_ (full name) to attend.

(Please circle)

Parent/guardian: \_\_\_\_\_ (full name)

\_\_\_\_\_(signature) \_\_\_\_\_(date)

In case of emergency I can be contacted on:

\_\_\_\_\_ OR: \_\_\_\_\_