



Evelyn
Scott
School

2 Bielski Street, Denman Prospect, ACT 2611

Phone: 02 6142 3491

Email: evelynscottschool.information@ed.act.edu.au

Canberra College Career Market Day

DESCRIPTION:

At the commencement of Career Week at Evelyn Scott School, Year 10 students are invited to attend the Canberra College Career Market Day. This event provides a valuable networking opportunity for students to engage with a diverse range of employers and business professionals from the Canberra area. The Career Market Day is an enhancement to the annual Careers Expo held in August at EPIC Showgrounds, as part of the Year 10 Transition Program.

DATE:	Monday 13 May 2024 (Term 2, Week 3)
VENUE:	Canberra College, 2 Launceston Street, Phillip ACT 2606
TRAVEL ARRANGEMENTS:	Canberra College School Bus
DEPARTURE & RETURN TIMES:	Depart 11:45am, Return 2:15pm
COST:	Nil
CLASSES ATTENDING:	Year 10
STAFF ATTENDING:	Marnie Lotts, Jane Phippen, Anthony Wood
WHAT TO BRING:	Water bottle
NOTE & PAYMENT DUE BY:	Please return all notes by Friday 3 May 2024 (Term 2, Week 1) <i>Please note, students will be unable to attend the excursion without signed parent/carer permission.</i>

Code of Conduct and Parental Agreements:

Staff accompanying students on excursions will take all reasonable care while the students are in their charge to protect them from injury and to control and supervise their behaviour and activities. Unacceptable behaviour will be treated as it is normally treated at school, (reminders, time out in a designated spot, and exclusion from an activity) but with the additional factor that the student may be returned to school should the behaviour be extreme or overly persistent.

Parents should be aware that staff members are not responsible for injuries or damage to property which may occur on an excursion where, in all circumstances, staff have not been negligent. Parents should warn children of the risk to themselves, to others and to property, of impulsive, wilful or disobedient behaviour.

Kind regards,

Marnie Lotts

marnie.lotts@ed.act.edu.au



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STUDENT NAME: _____ CLASS: _____

I hereby consent to my child attending the above Evelyn Scott School excursion.

Please check the appropriate boxes:

- I have read and understand the attached information page for the event/excursion and I consent to the travel arrangements.
- I agree to my child participating in the activities associated with this excursion mentioned previously. I have discussed with my child the need for expected behaviour on this excursion. I authorise the school to make arrangements for the welfare of my child (including medical or surgical treatment) in an emergency and I agree to meet the associated costs. I have provided to the school all medical information relevant to my child attending this excursion

The [Medical Information and consent form](#) only needs to be completed once/year prior to the first excursion unless there are changes to the details on this form. Are there any changes to this form? Yes No

If yes, an updated Medical Information and Consent Form is required to be completed (available through the front office).

Will your child require medication to be administered during the excursion (e.g. allergy medication, pain relief)?
Yes No

If yes, please complete a [Medication Authorisation and Administration Record](#) (available through the front office).

Is there any additional information you need to provide to support your child's participation in this excursion?
Yes No

PARENT NAME: _____ SIGNATURE: _____

DATE: _____ CONTACT PHONE NUMBER: _____

Office Staff to complete:

Received by: _____

Date: _____

Entered on SAS: