



Proposed Activity: High School Orientation Day

Dear Parent or Caregiver,

Your child will be attending Wauchope High School on Tuesday December 3 for a High School Orientation Day.

The students will visit the hall for a general introduction and listen to guest speakers from the High School including an overview of Year 7. Students will be introduced to the Peer Support Team and participate in activities.

Students will be given roll classes and participate in taster lessons. Students will be provided with a BBQ lunch but will need to bring their own recess and may wish to use the canteen. Students need to bring their own writing equipment.

This excursion is for students in Year 6 who will be attending Wauchope High School. The aim of the day is for students to become familiar with High School routines and meet relevant staff.

Students must wear full Wauchope PS school uniform including a school hat and show exemplary behaviour on the day. Students who catch the bus will stay at the high school under the supervision of High School staff to experience bus travel arrangements as this is an important part of their transition. Year 6 teachers will escort the remaining students back to school at 2:45pm.

The students will arrive at Wauchope HS by 8:45 am and the day will conclude at 3:30pm. Students are to make their own way to the High School. Those students who are unable to do this will be escorted to the High School by Year 6 teachers at 8:50am.

Wauchope staff will meet students at the High School. Year 6 Staff will be in attendance on the day.

Please Note:

Children who have not been displaying satisfactory behaviour may at the Principal's discretion not be eligible to represent Wauchope Public School in this activity.

Principal

Excursion coordinator

Please sign and detach the permission note on the bottom and it return to your child's class teacher by 29/11/19.

I do / do not consent to _____ of class _____ participating in an excursion to Wauchope High School, on Tuesday December 3, 2019.

I give / do not give permission for my child to receive medical treatment in case of emergency.

Signature: Parent / Caregiver

Date