

TAKE YOUR SON TO WORK DAY

The following student will be going to work with a parent/family friend to the employer below on **Friday 25th April 2025**

STUDENT NAME:..... FORM:.....

Please ensure that ALL sections are completed

TRAVEL INFORMATION

SIGNATURE OF WHO ARE THEY TRAVELLING WITH:

NAME:.....

RELATIONSHIP:.....

MOBILE (IF APPROPRIATE):.....

EMAIL:.....

ORGANISATION INFORMATION

ORGANISATION NAME:.....

ADDRESS:.....

.....

.....POSTCODE:

TELEPHONE: MOBILE (IF APPROPRIATE):.....

EMAIL:.....

A signature is required from the owner/director, or line manager with responsibility for the terms and conditions (please see bottom of page)

NAME:..... POSTION:.....

SIGNATURE:.....

PARENT PERMISSION

NAME:RELATIONSHIP:.....

SIGNATURE:.....

TERMS & CONDITIONS Student will travel to and from work with parent/relative/family friend. Student will be covered by organisations Insurance. Student will be covered by 'Health & Safety' practises of the organisation. This form should handed into Mrs K Bradley/ at Reception **as soon as possible BUT no later than 18th April 2025** or alternatively email to wex@st-thomasmore.southend.sch.uk .