

# TAKE YOUR SON TO WORK DAY

The following student will be going to work with a parent/family friend to the employer below on **Thursday 25<sup>th</sup> April 2024**

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/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 19<sup>th</sup> April 2024** or

alternatively email to [wex@st-thomasmore.southend.sch.uk](mailto:wex@st-thomasmore.southend.sch.uk).