

Independent Public School

SUNSHINE BEACH SHS - EXPERIENCE HIGH SCHOOL FOR A DAY

Dear Parent / Guardian.

Your child is entering Junior Secondary. This phase of learning spans traditional primary and secondary schooling and is a time of great physical, social, emotional and intellectual change for young people. At Sunshine Beach SHS our priority is education of the whole child. Our school promotes a positive culture through our academic, cultural and sporting programs. Working together with us, your child will shape their future through developing positive relationships and engaging in challenging curriculum set within a rich and inclusive learning environment.

Your child will have the opportunity to familiarise themselves with the Junior Secondary campus, meet some of our highly skilled teachers and engage in classroom activities. A courtesy bus will collect your child from their Primary school (Noosaville and Tewantin only) after 10am and return them no later than 1:30pm. Sunshine Beach students walk with teachers and students from non-feeder schools are required to be transported by their parents.

Please complete and return the attached permission form and medical details to your Primary School's Year Seven Transition Program Coordinator.

Venue:

Sunshine Beach SHS

Dates:

18 May Noosaville SS (+ PSS/ESS)

19 May Sunshine Beach SS

20 May Tewantin SS (+ St Thom More)

Transport:

Bus (Noosaville/Tewantin); Walk (Sunshine SS); Parents

Time Start:

10:30am

Time Finish:

1pm

Cost:

nil

Bring:

water bottle, snacks or a light lunch, pens/pencils and notepad

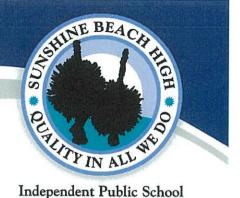
Yours sincerely,

Acting Deputy Principal

Junior Secondary

Grant Williams Principal





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Students are required to bring this for on the day and hand it to their SBSHS teacher for the day

Ias parent/guardian of		
(parent's / guardian's name) (student's name)		
give my student consent to participate in this activity and travel as arranged (primary school) (date of birth)		
(primary concest) (date of pital)		
I agree to delegate my authority to the teachers involved. Such teachers may take disciplinary action to ensure		
the safety, wellbeing and successful conduct of the students as a group, or individually, in the above mentioned		
activity. I also authorise the teachers to obtain medical assistance, which they deem necessary should an		
accident occur, and agree to pay all medical expenses incurred on behalf of the above student. I further authorise		
qualified practitioners to administer anaesthetic if such an eventuality arises. I submit the following medical		
information about the above student and include details of limitations, which he/she has for the activity concerned.		
MEDICARE NO.		
MEDICAL INFORMATION		
MEDICAL INFORMATION		<u>DETAILS</u>
(a) HEART PROBLEMS	VEC/NO.	
The state of the s	YES/NO	
(b) RESPIRATORY PROBLEMS (c) ALLERGIES	YES/NO	
(d) TRAVEL SICKNESS	YES/NO YES/NO	
(e) BLOOD PRESSURE	YES/NO	
(f) OPERATIONS	YES/NO	
TO POST OF THE	YES/NO YES/NO	
(g) EPILEPSY (h) RECENT ILLNESS	YES/NO	
(i) INJECTIONS & WHEN e.g. Tetanus		
(j) DRUGS REQUIRED	YES/NO	
(k) DRUG REACTIONS e.g. Penicillin allergy	YES/NO YES/NO	
(I) OTHER	YES/NO	
(m) PHOBIAS	YES/NO	
(III) PHOBIAS	YES/NO	
Is there any medical or nevertalistical reason to prevent	trous shild from posticio sti	and in any of the anticities of the s
Is there any medical or psychological reason to prevent your child from participating in any of the activities outlined in the information sheet? YES / NO		
If YES, give details		
II 1E3, give details		
In emergency, contact: NAME:		
ADDRESS:		
SIGNED:DATE:		
DAIL.		
(Parent/Guardian)		



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