

SCHOOL EXCURSION / INCURSION NOTIFICATION

Dear Parent/Caregiver, an excursion/activity has been organised for your child.

Excursion / Incursion	Settling In
Date	Monday 3rd May 2021, Monday 10th May 2021, Monday 17th May 2021, Monday 24th May 2021, Monday 31st May 2021, Monday 7th June 2021
Year / classes involved	Year 7 students.
Location	Greystanes High School - INDOORS
Purpose	Settling In - is a group program for newly arrived refugee and migrant students. This will be delivered to a group selected Year 7 students. During the program students: Have their reactions and feelings normalised. Build emotional literacy and coping strategies. Build trust and familiarity with school support staff. Build respectful relationships with each other. Are supported in their recovery from trauma.
Start time	8:35am
End time	9:55am
Transport	N/A
Cost	Free
Dress requirements	School Uniform
Food	N/A
Equipment	N/A
Organising teacher	Nada Madjar
Teachers attending	Nada Madjar, Lisa Yalda
Additional information	N/A
Emergency Contact Number	02 9631 9144
Consent Form and Payment due to Office by	26th April 2021

General Information Concerning Excursions / Incursions

- 1. Excursions and Incursions form an integral part of the curricula by providing enriching experiences which cannot be provided in the classroom.
- 2. Students must wear full school uniform unless otherwise instructed above. Students who are not in uniform will not be allowed to attend.
- 3. A standard of behaviour is expected of all students representing the school in the greater community.
- 4. Please note the time and place of departure and return, as advised above.



EXCURSION / INCURSION PERMISSION FORM

Please return this permission form to the Office

Settling In

Date	Monday 03/05/2021 8:35am - 9:55am, Monday 10/05/2021 8:35am - 9:55am, Monday 17/05/2021 8:35am - 9:55am, Monday 31/05/2021 8:35am - 9:55am, Monday 07/06/2021 8:35am - 9:55am	
Location	Greystanes High School - INDOORS	
Cost	Free	
Organising Teacher	Nada Madjar	
I give permission for (student name) of year/class to participate in this excursion / incursion. I have noted the start and end times and dress requirements. Additional needs of my child of which you should be aware: eg. allergies or medical conditions		
Medical Assistance: In the ever assistance or treatment for my cheatment signature:		
Parent name:		
Parent phone number:		

- Please return this consent form to the Office
- Tear off and keep previous page for your information

Emergency Contact Name: _____

Emergency Contact Number:

Excursion / Incursion