

**The Marches School**  
part of the Marches Academy Trust  
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**Headteacher:** Sarah Longville BA, MA, NPQH



Ref:AW/WEPC17

January 2017

Dear Parent/Carer,

**Professional Development Week Monday 19<sup>th</sup> June – Friday 23<sup>th</sup> June 2017**

As part of the Year 12 curriculum, students participate in an Enrichment Programme and are out for one week from Monday 19<sup>th</sup> June – Friday 23<sup>th</sup> June on work experience.

Students have been encouraged to find their own placements with an employer, then pass on the company name, address, email and telephone number to their tutor. All placements have to then be approved by Shropshire Education Business Links (EBL) regarding the Employers Public Liability Insurance as well as Health and Safety checks.

Please can you complete the parental consent form and details of any medical condition which might influence the choice of work? You may want to consider personal accident insurance to cover your child for accidents for which no-one can be shown or held negligent during Work Experience.

Yours faithfully,

**Mrs Wyatt**

Sixth Form Work Experience Coordinator  
Tel: 01691 664 476

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**Please return to:** Mrs Wyatt, The Marches Sixth Form by Friday 17<sup>th</sup> February 2017

Name of Student: ..... Tutor Group: .....

I/We give permission for my son/daughter to take part in the Work Experience placement.

Dates: .....(if different)

Signature of Parent/Guardian .....

Has your son/daughter a medical condition which should be taken into account when choosing a work experience placement? YES / NO.

If YES please give details.....

