

27 September 2016

Dear Parent

I am writing to inform you about a number of weekend workshops at Brunel University on the following days: 8<sup>th</sup> October 2016, 12<sup>th</sup> November 2016, 3<sup>rd</sup> December 2016, 14<sup>th</sup> January 2017, 25<sup>th</sup> February 2017, 25<sup>th</sup> March 2017 and 17<sup>th</sup> June 2017.

The aim of this visit is for Year 12 students to attend the Urban Scholars' scheme.

Students will be given a timetable confirming the time of departure and return. They will need to make their own way to Brunel University and their own way home.

Students are required to wear smart clothes, no trainers or jeans to be worn. Students will be provided with refreshments.

Please complete and return the attached permission/emergency contact form by Monday 3<sup>rd</sup> October 2016.

Yours sincerely

**S Girvan**  
**Business Studies Teacher**

Principal: Nigel Clemens BSc, MA

The Greenway, Uxbridge, Middlesex UB8 2PR t: 01895 234060 f: 01895 256738 e: [office@uhs.org.uk](mailto:office@uhs.org.uk) w: [www.uhs.org.uk](http://www.uhs.org.uk)

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**Return to: S Girvan**

I give my permission for (NAME) \_\_\_\_\_ of (Form Group) \_\_\_\_\_ to attend the weekend workshops at Brunel University on the days provided in the letter.

I give my permission for my child to be given first aid or urgent medical treatment during any school trip or activity.

**ANY SPECIAL MEDICAL OR DIETARY REQUIREMENTS:**

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If your child suffers from Asthma please ensure that the appropriate medication is provided. **If there are any medical reasons why your child may not participate in any of the planned activities please inform the trip co-ordinator.**

***EMERGENCY CONTACT DETAILS:***

NAME: \_\_\_\_\_

HOME NUMBER: \_\_\_\_\_

MOBILE NUMBER: \_\_\_\_\_

**PARENT SIGNATURE:** \_\_\_\_\_

**Dated:** \_\_\_\_\_

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