



Barr Beacon School

Old Hall Lane

Aldridge

Walsall

WS9 0RF

0121 366 6600

postbox@barrbeaconschool.co.uk

www.barrbeaconschool.co.uk

Our Ref: LD/CS/cc/Stafford Uni visit

17th December 2018

Dear Parents/Carers

School of Health and Social Care, Stafford University
Friday 25th January 2019

I would like to invite your child to the School of Health and Social Care taster day at Stafford University that is being held on Friday 25th January 2019.

The School of Health and Social Care will be running a taster day looking at the following areas: Nursing (adult, child and mental health), Midwifery, Paramedic and ODP at the Stafford Campus. The day is primarily aimed at Year 12 students interested in a healthcare-based career.

We will leave Barr Beacon School at 8.30 am and return at approximately 3.30 pm therefore can I ask that you make alternative travel arrangements for your child's journey home from school.

A programme for the day can be found below:

| | |
|---------|---|
| 10am | Welcome and introductions |
| 10.10am | Skills sessions (carousel of workshops) |
| 11.00am | Break |
| 11.10am | Skills sessions (carousel of workshops) |
| 12.00pm | Lunch (Staff and students to bring their own) |
| 12.30pm | Skills sessions (carousel of workshops) |
| 1.10pm | Skills sessions (carousel of workshops) |
| 2pm | Break |
| 2.10pm | UCAS advice |
| 2.30pm | Close |

There is no charge for this trip but students will need to bring a packed lunch with them for the day. If your child is in receipt of free school meals, a packed lunch will be provided for them.

Please complete the attached reply slip and return to Miss Smith (Head of Technology) by Monday 14th January 2019.

Yours sincerely

Ms L Draycott
Headteacher





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School of Health and Social Care, Stafford University

Friday 25th January 2019

Pupil Name: _____ Form: _____

I give permission for my child to attend the School of Health and Social Care at Stafford University on Friday 25th January 2019.

I have noted the date, the offsite venue and the estimated time of return to Barr Beacon School. I will make alternative travel arrangements home for my child.

Signed: _____ Date: _____

