

Pound Road, Oldbury, West Midlands, B68 8NE
Telephone: 0121 533 3750 Fax: 0121 533 3799

February 2023

Dear Parent/Carer

University Experience Day

As part of the Forward Thinking Programme we would like to invite your child to a University Experience Day at University of Birmingham on **Tuesday 28th March 2023**. This is an opportunity for participants to find out what it is like to be a university student for the day. They'll watch a theatre performance, try a student society, listen to a student's experience of university and complete a scavenger hunt around the campus.

Students will be accompanied by a member of school staff, and will be taken to the event by minibus at 8.15am and will return to school at 4.30pm depending on traffic. They are not expected to wear school uniform but should wear clothing and footwear suitable for the day's activities which include walking and taking part in a sport, so trainers are required. Lunch is being provided by the University but a drink will be required during the morning. ***If your child has any food allergies, please indicate this on the reply slip.*

As this activity forms part of the Forward Thinking programme, all students are expected to attend (failure to attend may affect your child's chance of being offered mentoring in Year 10).

Please sign and return the consent form below detailing any medical or dietary requirements and **return it to Mrs Kanda (based in N8) on or before Thursday 2nd March**.

Please note, Year 9 pupils are due for vaccinations on that day and the nurses will do a catch up session later in the year. You should consent as normal.

Yours faithfully

Mrs Kanda
Forward Thinking Coordinator

FORWARD THINKING PROGRAMME – UNIVERSITY EXPERIENCE DAY – 28th March 2023

I/We consent to my/our child _____ visiting University of Birmingham as part of the Forward Thinking Programme on Tuesday 28th March.

Please supply a contact telephone number _____

Please let us know of any dietary requirements (including any allergies) _____

Please let us know of any medical issues _____

Signed _____ Date _____