E enquiries@huxlow.northants.sch.uk W www.huxlow.northants.sch.uk Headteacher Mrs K Isaksen



Huxlow Academy Ambition • Respect • Pride

Date:29th January 2024 OurRef: ZCO/RNE/TYCTWDLetter

Dear Parents/Carers,

TAKE YOUR CHILD TO WORK DAY 24th April 2025

At Huxlow Academy we are continually looking for different ways to support your child in preparation for their future career. As part of our careers provision, throughout term 3, students began looking at their careers journey by investigating personal skills and potential interests. Experience of workplaces is a vital part of this learning journey, and we are therefore delighted to announce a very special day which is to take place on 24^{*} April 2025: 'Take Your Child to Work Day'. This will be an opportunity for your child to accompany a parent/carer, relative or family friend to work and gain a full day of valuable work experience. The idea is to give Year 7 pupils a 'taste' of the real world of work, and, to enable them to recognise the relevance of the school curriculum to the workplace.

Pupils will gain first-hand experience of the workplace and learn new skills that can help prepare them for their future. These kinds of experiences have enabled pupils to gain a new appreciation for the hard work their parents do every day, and many pupils have gained valuable new skills, such as confidence and teamwork. Pupils will also need to complete a journal both pre and post experience, which will be completed in their UNIFROG account and form part of their career journey.

It is our aim for 100% of the cohort to take part in this day, and it is imperative that appropriate steps are taken regarding your child's safety during their placement. If you are able to support your child with a placement, I would be most grateful if you could complete the attached form and ask your child to return it to reception by 28th February 2025. It is essential that the employer has the required insurances in place to cover work experience pupils and that appropriate arrangements are in place to manage the placement.

Although 'Take Your Child Work Day' is a very popular event, we are also aware that not everyone will find it easy to arrange a placement. To that end, we will be running a virtual workplace experience in school, for anybody who is unable to secure a work placement on this day and/or an enterprise activity. Any pupil who does not take part in the 'Take Your Child to Work Day' will be expected to attend school as normal in full school uniform.

Please ensure you complete and return the attached form, even if your child is not taking part in the work placement. I do hope that you will want to give this opportunity your full support. If you have any queries, please do not hesitate to contact me.

Yours sincerely

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Mrs Correa, Assistant Headteacher i/c Character and Personal Development.



Tove Learning Trust, Sponne School, Brackley Road, Towcester, Northants, NN12 6DJ Reg No 07525820 www.tovelearning.org.uk Thriving Through Excellence

Huxlow Academy

Take Your Child to Work Day

Thursday 25th April 2024

Parents/Carers: Please complete this from with the support of the employer and (if not you) the family member or friend who will be taking care of your child during their work placement. Please return the completed form to school reception, along with copies of the employer's Public and Employers' Liability Insurance documentation.

Employers: Thank you for supporting our pupil with this work experience day. Please complete Section 2 of the form below.

| Pupil Name | | Tutor Group | |
|------------|---------------------------|--------------------------------|--|
| | Date of placement: Thursd | ay 25 th April 2025 | |

| Section 1: To be completed by parents/carers | | | |
|--|---|--|--|
| Full name of person your child is going to work with | C | | |
| Relationship to pupil | | | |
| Position/job title | | | |
| Contact number | | | |
| | son named in section 1 on Thursday 25 th April 2024 and I give | | |

my permission. I have checked that the employer supports this placement and confirmed that they have public and employer's liability insurance. I have included copies of these documents.

| Signed (parent/carer) | Date | |
|--|----------|--|
| Signed (person taking child to work if not parent/carer) | Date | |

| If you have been unable to secure a placement, please sign below to confirm that your child will be attending school on Thursday 25 th April 2024. | | |
|---|------|--|
| Signed (parent/carer) | Date | |

| Section 2: To be com | oleted by the employer | | |
|---|------------------------|-----|----|
| Working hours | From | То | |
| Company name | | | |
| Type of company/industry | | | |
| Contact name at company | | | |
| Address | | | |
| | | | |
| Postcode | | | |
| Email | | | |
| Telephone number | | | |
| Do you have a Health and Safety Risk Assessment in place? Yes No | | No | |
| Do you have Public Liability and Employers' Liability insurance that will cover our pupil during their work experience day? Please include copies of these. | | Yes | No |
| Will the pupil be given an induction at the start of their placement, outlining Yes No relevant health and safety considerations? | | | |

Health and Safety- Parent/Carer checklist to be signed by employer.

The parent/carer/guardian has confirmed with the employer that the areas described below will be covered during the work experience placement. The following comments sections will include details about any discussions or meetings they had with the employer regarding their health and safety measures.

| The employer has provided records of their risk assessment(s) or confirmation of the health and safety measures in place in their organisation. | YONO | |
|---|------|--|
| Comments: | | |

| The parent/carer/guardian has discussed with the employer any medical conditions, learning | |
|--|--|
| differences, or vulnerabilities that may affect the student's health and safety during their | |
| placement. | |

Y D N D

Comments:

| The employer has confirmed that the student w training, supervision, and PPE (where necessary and can fulfil their role safely. | vill receive sufficient information, induction, v) so they understand the risks in the workplace | YONO |
|---|---|------|
| Comments: | | |
| The employer has confirmed that they have suit cover the student for the duration of their work | able Employer's Liability Insurance. This will experience placement. | YONO |
| Comments: | | |
| Name: | Date: | |
| Signature: Employer | | |

Parent/Carers: Please return the completed form to school reception along with copies of the employer's Public and Employers' Liability Insurance documentation.

Thank you for your support.