

Thursday, 25th September 2025

Dear Parent/Carer,

### **Workplace Visit to CBS at Coventry House – Wednesday 22<sup>nd</sup> October**

As part of our ongoing commitment to helping your child explore their Limitless Potential, we are delighted to offer them the opportunity to take part in a workplace visit to Coventry Building Society at Coventry House, located on their Binley campus, on Wednesday 22<sup>nd</sup> October.

This enriching visit will last approximately 2.5 hours, and students will attend either the morning session (9:30am – 12:00pm) or the afternoon session (12:30pm – 3:00pm). You will be notified of your child's allocated time slot in due course.

During the visit, students will:

- Learn about CBS – who we are and what we do
- Gain insight into employer expectations in the workplace
- Take part in a careers speed networking session with colleagues from across the business
- Participate in an interactive money management workshop
- Enjoy a guided tour of Coventry House

This is a fantastic opportunity for your child to gain real-world insights and build important employability skills in a fun and engaging way.

Please complete and return the attached consent form **no later than Friday 17th October** to confirm your child's attendance.

If you have any questions or would like more information, please do not hesitate to contact either:

- Miss Ellie Harvey – [ellieharvey@graceacademy.org.uk](mailto:ellieharvey@graceacademy.org.uk) or
- Mrs Emily Williams – [emilywilliams@graceacademy.org.uk](mailto:emilywilliams@graceacademy.org.uk)

We look forward to your child taking part in this exciting experience.

Yours sincerely,



Miss E Harvey  
**Ethos and Personal Development Lead**



Mrs E Williams  
**Assistant Principal for Ethos and Personal Development**



*Executive Principal:*  
Mrs N Whiles

*Associate Principal:*  
Mrs E Wheller



**Workplace Visit to CBS at Coventry House – Wednesday 22<sup>nd</sup> October, 2025**

Please ensure both sides of this form are completed and return to Reception by Friday 17<sup>th</sup> October, 2025.

Name of Student \_\_\_\_\_

I give my permission for the above-named student to attend the above trip

I do NOT give my permission for the above-named student to attend the above trip

Signed: \_\_\_\_\_ (parent/carer)

Print: \_\_\_\_\_

Date: \_\_\_\_\_

**PARENTAL /CARER CONSENT FORM**

I agree to my child taking part in the following visit/off-site activity:

**Workplace Visit to CBS at Coventry House – Wednesday 22<sup>nd</sup> October, 2025**

Please state any medical history which would be helpful for the visit should the student require treatment:

e.g. diabetes, asthma

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What medication does the student take: name, dose, frequency and times:

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Note - any medication must be clearly marked with medication name, dose and frequency and sufficient for the trip - it must be handed to the Trip Leader prior to leaving on the visit. The chemist can make up a medication foil for the visit or they can be placed in a dose-box with an information sheet about the medication.

Is the student allergic to any medication, if YES please state:

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When was the student's last tetanus injection: please state date \_\_\_\_\_

State pain/common cold relief medication the student may be given if necessary:

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Outline any special dietary requirements of the student:

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<b>Main contact details:</b>	<b>Emergency Contact details:</b>
Name:	Name:
Home address:	Home address:
<u>Contact Numbers</u>	<u>Contact Numbers</u>
Home:	Home:
Mobile:	Mobile:

Family GP Name: \_\_\_\_\_  
GP Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
GP Telephone No: \_\_\_\_\_

**Parent/Carer declaration**

I will inform the Trip Leader as soon as possible of any changes in medication, student's health condition or other circumstances not listed above before the start of the journey.

I agree to my son/daughter receiving medication as instructed and any emergency dental or surgical treatment, including anaesthetic or blood transfusion, as considered necessary by the medical authorities present.

Full name of parent/carers: \_\_\_\_\_

Signed: \_\_\_\_\_

Date: \_\_\_\_\_

## Photo Consent Form

During the course of the event we may wish to take photographs, either for our own records, for use as part of our learning curriculum or for inclusion in our promotional material, such as the school prospectus and our website.

To comply with General Data Protection Regulation, we must ask for your consent before the school records any images of your child. The table below sets out the various reasons for taking, and making use of, images of your child and we should be grateful if you would indicate whether or not you give consent for use in these circumstances. Your child's name will not be attached to these images.

By indicating 'YES', you are confirming that you consent to your child's personal data being shared for the purposes stated below:

1.	For use on internal school displays	YES/NO
2.	For use as part of projects of work by students	YES/NO
3.	For use on the school's website	YES/NO
4.	For use on the school's Twitter page	YES/NO
5.	For use on the school's Instagram page	YES/NO
6.	For use in the school's Prospectus	YES/NO

**Signed** \_\_\_\_\_ **Date** \_\_\_\_\_

**Print:** \_\_\_\_\_