

PARENTAL CONSENT FORM – ‘TAKE YOUR CHILD TO WORK’ DAY

Please complete as applicable:

Student Name:

Form:

- ☐ I am sorry I have not been able to arrange a placement for my child to take my child to work
- ☐ I have arranged for a placement for my child for take your child to work and I acknowledge receipt of and understand the information regarding the proposed visit to:

Name of Company

Address of company.....

.....

Telephone number of Company

Contact name at the Company

Relationship to Campion Student.....

I will ensure that my child understands the importance of behaving responsibly at all times, following all instructions given by staff, and taking appropriate care of their own safety and the safety of others.

I confirm that, in relation to safeguarding, I understand that my child may come into contact with adults who are not known to or employed by Campion School during this activity. I understand that the school cannot control or be responsible for the suitability of all adults my child may encounter. I am satisfied that my child understands how to keep themselves safe and who to contact should they have any concerns

I give permission for the employer or staff supervising the visit to arrange appropriate medical treatment for my son/daughter in the event of an emergency. I confirm that I have provided the employer and school with all relevant medical information and requirements relating to my child.

Principal: Mrs Kim Bradley-Smith

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Campion School
Kislingbury Road
Bugbrooke
NN7 3QG
t: 01604 833900

e: csoffice@campion.northants.sch.uk
w: campionschool.org.uk

Student signature Date.....

Parent/Guardian name

Parent/Guardian signature Date

Emergency Contact Telephone Number

Please return to Mrs Capon no later than Friday 6th November 2026

Principal: Mrs Kim Bradley-Smith

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