

WEST NORFOLK ACADEMY TRUST

AGREEMENT FORMS

DUKE OF EDINBURGH AWARD

SILVER

PARENT /CARER Please complete , sign and return with participant form and medical form.

Duke of Edinburgh Award

As the parent/carer of _____ I understand that

- I should help and encourage my son/daughter in completing their award.
- My son/daughter must complete all sections and upload evidence to edofe system by 1st September 2019
- My son/daughter must have completed one of the sections of their D of E by April 1st to enable them to take part in the expedition.
- Any problems with any section should be reported in the first instance to the D of E Leader
- Payments must be made before any award can be gained

Relative to expedition

- Boots need to be worn in before the expedition
- Participants must be collected promptly at the end of the expedition
- Mobile phone use is not allowed for the duration of the expedition except for the last day to contact parents for collection
- Participants must follow the rules of the D of E award. The Countryside Code and any instructions given by staff. Failure to do this will result in them not continuing with the award and monies spent will be forfeited

Relative to other sections

- It s the participants responsibility to arrange the other sections of the award including establishing a suitable assessor, and agreeing this with the leader before beginning the section.
- Assessors must be independent and cannot be a friend or family member.
- Participants must collect appropriate evidence including photographs, assessor reports and upload as soon as possible. Help with this is available

Signed _____ Parent/Carer

WEST NORFOLK ACADEMY TRUST

AGREEMENT FORMS
STUDENT

DUKE OF EDINBURGH AWARD

SILVER

I would like to enrol on the Duke of Edinburgh award at Springwood and I accept that for it to run smoothly

I need to be

- Resonsible
- Trustworthy
- Cooperative
- Reliable
- Sensible
- Considerate

Whilst on expedition , mobile phones will be placed in a sealed bag and can only be used in emergencies. Should I fail to act accordingly the leaders have the right to withdraw me from the award. If my behaviour hinders or endangers others whilst on expedition or if I am unable to continue, then my parents will be asked to collect me from the expedition area.

Signed _____ Student

Name _____ Tutor Group _____ Date _____

PARENT/CARER

I will aim to support my child in all sections of the award.

Enclosed (please tick)

Payment of £200 full Silver Fee by Oct 30th 2017

Payment of Deposit £50 By Oct 30th then 3 monthly instalments of £50

Please note if there is an exceptional number of students wishing to take part in the Duke of Edinburgh it may be necessary for a draw to take place to determine who will take place as the safety of the students is paramount. Due to staffing, qualifications and school demands, places and dates cannot always be guaranteed

Signed _____ Parent/Carer

Name _____ Date _____

Please supply two contact details that can be used when on expeditions

Emergency Contact

NameNumber.....Number.....

Emergency Contact

NameNumber.....Number.....

ALL FORMS MUST BE SIGNED AND RETURNED TO THE DUKE OF EDINBURGH AWARD LEADER OR MANAGER AND HANDED IN WITH THE BITESIZE PLANNER