

THOMAS MITCHELL PRIMARY SCHOOL

YEAR 5 ACTIVITY – PROJECT ROCKIT ‘SOCIAL LEADERSHIP’ WORKSHOP

14th September, 2017

Introduction/Links to Curriculum:

The Year 5 students at the beginning of this year were introduced to our new school values, ‘Caring, Connected and Courageous’. Over the duration of the year the students have continually made connections to these values. Students have developed their relationships within the classroom and outside in the wider school community with these values in mind. They have often worked in teams within different settings, including class activities and sports.

The Year 5 students will be able to explore these skills further and also learn new strategies through the ‘Project Rokit’ workshop. Students have the opportunity to connect with other students in different activities throughout the workshop, developing their leadership skills and strategies in different scenarios and exploring social challenges themselves or a friend may face.

Participants/Classes: 5CI, 5JC, 5OB, 5SP and 5TP

Date: Friday 20th October, 2017

Times: 9.10am – 10.40am – 5TP, 5CI and ½ of 5JC
11.10am – 12.40pm – 5OB, 5SP and ½ of 5JC

Venue/Address: Thomas Mitchell Primary School – Room 18/19

Cost: \$12.00
This cost is covered by the ‘Essential Items – Excursion Levy’ payment that all parents were requested to pay at the commencement of their child’s school year. In the event your child does not participate (eg. due to illness) a credit will be placed against your family account.

Uniform: All students must wear school uniform.

Permission form: To be returned by: **Monday 16th October, 2017**

Tara Purdy
Contact/Coordinating Teacher

John Hurley
Principal

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I give permission for my childin class
to participate in the above activity on Friday 20th October, 2017.

- I understand that the cost of \$12.00 is covered by the Excursion Levy payment I have made.
- If I am selected as a parent helper, or attend this activity, I will not take photos of any student, nor will I upload to any form of social media etc.

I hereby authorise the teacher in charge of this event, to consent, where it is impractical to communicate with me, to my child receiving such medical or surgical treatment as may be deemed necessary.

Parent Name: Phone:

Signed: Dated:

Contact for day of activity: Phone for day of activity: