

VCAL Unsupervised Series Excursion Consent Form

To obtain informed consent, schools need to provide sufficient information to parents about the nature of and risks associated with the excursion. Parents must be able to give informed consent to their child's participation in the excursion after considering the risks. Specific information about the excursion should be included here or provided as an attachment. There must be full disclosure. Parents should also be given the opportunity to ask questions.

For approved camps or excursions, a risk assessment of all adventure activities must be completed and submitted to the Training Manager or VCAL Coordinator as part of the approval process.

Name:
Skillinvest

Title of excursion:

Educational purpose of the program:

What do you hope the students will learn from the experience?

Unsupervised Activity:

In order to meet the outcomes required for the Personal Development skills strand of the VCAL program students need to plan, organise and complete a complex task that involves meeting with external stakeholders, organisations and charities. They are also required to display independent skills and as such they will be attending these organisations in the local area unsupervised.

Students will complete documentation to provide evidence of having met these requirements.

Provide the following specifics relating to any and all unsupervised activity expected to be undertaken during this excursion:

Location/s where the excursion or activity will be taking place:

Include all locations to be visited during this excursion.

Details of which organisations and/or people the student will come into contact with during the excursion or activity (if applicable) and when:

Include all details relating to organisations or specific people the student will come into contact with and when.

Costs:

Include all foreseeable program and incidental costs as well as the refund policy.

Name and contact details of the 24-hour emergency contact:

This is for parents who need to contact students during the program. You can list more than one contact.

Departure details

Include the time, date and place where students depart for the excursion.

Return details

Include the time, date and place where students return from the excursion.

Distance from expert medical care:

How far the students will be away from expert medical care (eg. hospital or ambulance)?

Travel arrangements:

How will students be transported to, during and from the program?

A risk management plan for this program has been developed by staff and is available for parents to review on request.

Attachments

- Daily itinerary
 - Group equipment list (if relevant)
 - Clothing list
 - Medical form
 - Further location descriptions (if applicable)
-

*all students under the age of 18 require written consent from a parent/guardian

Parent/Guardian consent

I have read all of the above information provided by Skillinvest in relation to the Unsupervised Excursions above, including any attached material.

I give permission for my daughter/son _____ (full name) to attend.

Medical Consent form provided to Skillinvest is current. (if not please update attached Medical Consent form)

Parent/guardian: _____ (full name)

_____ (signature) _____ (date)

In case of emergency I can be contacted on:

_____ OR:

Note: Parents/guardians should also complete the Confidential Medical Information Disclosure Form if they have not already provided one or changes have occurred since last completion.