

ST JOSEPH'S CATHOLIC HIGH SCHOOL

16 Macquarie St, Albion Park NSW 2527 PO Box 130, Albion Park NSW 2527 Tel: (02) 4230 8500 Fax: (02) 4256 5793 Email: info@sjchsdow.catholic.edu.au

26th June 2018

Dear Parent/Guardian

Future Finder Day at UOW

Year 10 students will be participating in this year's Year 10 Future Finder Day on campus at Wollongong University. The program is designed to provide an opportunity for Year 10 students to find out what university study is really like. The on-campus event is held as close as possible to the student's subject selection decisions for the HSC, to help them to be better informed of further study options, assist them with goal setting and experience a "taster" of subjects at university. Most students should have already registered for the taster courses offered. If you child has not registered they may do so until 27th June 2018 using this link:

http://www.uow.edu.au/in2uni-myway/year10programs/index.html

Details of the day are as follows:

Date: Venue:	Wednesday, 4 th July 2018 University of Wollongong
Time:	8.00am (meet at the Church Street entrance) for travel by bus. Students will
	return to school in time to catch buses home as usual.
Cost:	Nil
Dress:	Full Winter School uniform (including closed in shoes and blazers)
Bring:	Recess, lunch and a drink for the day and a pen.

Please complete the below permission slip and return to the school office.

Final payment is Monday, 2nd July 2018; no notes will be accepted after this date.

If you have any questions regarding this excursion, please do not hesitate to contact the School on 4230 8500.

Yours sincerely,

Mrs Sue Kennedy Careers Advisor

Future Finder Day at UOW (to be returned by Monday, 2nd July 2018)

I give permission for my child of homeroom to attend the Future Finder Day at UOW on Wednesday, 4th July 2018.

I understand students are to travel by bus.

Final payment is Monday, 2nd July 2018; no notes or payments will be accepted after <u>this date.</u>

Please indicate if your child has any allergies we need to be aware of, and any medication that is required:

Emergency Contact Name: _____

Emergency Contact Number:

Parent/Guardian Signature:

Date: _____