



## *Beaver Brae Secondary School*

1400 – 9<sup>th</sup> Street North, Kenora, ON P9N 2T7

PHONE (807) 468-6401 FAX (807) 468-3628

Tracey Benoit  
*Principal*

Lisa Achilles-Belanger  
*Vice-Principal*

David Tresoor  
*Vice-Principal*



**"All Stakeholders Create a Culture of Learning so that Students Come First."**

October 2017

Dear Parents/Guardians:

On Wednesday, **November 1, 2017**, all grade nine students of Beaver Brae Secondary School will be taking part in the "Take Our Kids to Work" day. This program is put together by The Learning Partnership, which is a national charitable organization dedicated to championing a strong public education system in Canada through innovative programs, credible research, policy initiatives, leadership training and public engagement. This will be the 23<sup>rd</sup> year that The Learning Partnership will be running this program and on November 1<sup>st</sup>, more than 250,000 grade nine students across Canada will experience a day in the life of an adult – at work.

For students, it's an opportunity to understand the importance of staying in school by learning first-hand what skills are required in today's workplace, develop an appreciation for their parents' careers and roles in supporting their families, and to start exploring career options in a practical way and gain a better understanding of just how many career choices are open to them.

For caregivers, it's an opportunity to demonstrate interest and support for your young adolescent. Young people benefit from seeing their parents and other adults who are contributing to their workplaces, their families and their communities through their daily actions. This opportunity will also help begin a career dialogue based on actual experiences.

Please discuss appropriate behavior and safety expectations (safety on the job, appropriate attire, etc.) with your child before bringing them to your workplace.

If you have a job where your child may not come with you, they have the opportunity to go with another relative or friend of the family. **A permission will be sent home in the next week or so and must be returned to the school before Thursday, October 26, 2017.** Also remember to get permission from your workplace in order for your child to be at work with you for the day. **Please note that students who do not bring in their signed permission form must be in class and may not attend a workplace.**

If you would like more information about the "Take Our Kids to Work" program or The Learning Partnership, please visit their website at [www.thelearningpartnership.ca](http://www.thelearningpartnership.ca)

If you have any questions, or concerns, please do not hesitate to contact me at the school. I am available by email or phone. [janice.England@kpdsb.on.ca](mailto:janice.England@kpdsb.on.ca) or 468-6401 ext 3249.

Sincerely,

Janice England  
Student Success Teacher



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**To the parent/guardian:** your child has the right and responsibility to have a safe and educational workplace visit. Health and Safety education is an important element of this program. Review this form with your child and sign below. If you have additional questions about safety, please contact the school or workplace. **Please sign this form and return it to the school before Thursday, October 26, 2017.**

Student Name: \_\_\_\_\_

Period B Teacher Name: \_\_\_\_\_

- My child has my permission to participate in this program
- My child may be photographed, interviewed or videotaped on this day
- My workplace is aware that I am bringing my child to work on Wednesday, November 1, 2017 between the hours of \_\_\_\_\_ and \_\_\_\_\_. We have discussed lunch arrangements and appropriate clothing/safety attire.

Parent's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Workplace Name: \_\_\_\_\_

Address and Phone Number: \_\_\_\_\_

## OR

My child will accompany a (check one):

- Relative
- Friend
- Community host

To their workplace on Nov. 1, 2017 between the hours of \_\_\_\_\_ and \_\_\_\_\_.

Contact's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Workplace Name: \_\_\_\_\_

- A colleague at my workplace would be willing to host another student in need of a placement

Colleague's Name: \_\_\_\_\_ Telephone: \_\_\_\_\_

OVER



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## Elements of Risk

All experiential learning programs, such as field trips, cooperative education, job shadowing and Take Our Kids to Work participation, involve certain elements of risk. Injuries may occur while participating in this activity without any fault of the student, the school board, or the host employee. By allowing your child to take part in this activity, you are accepting the risk that your child may be injured.

For more information see the recommendations for Workplace Health and Safety at [www.thelearningpartnership.ca](http://www.thelearningpartnership.ca)

- I understand that there are risks associated with my child visiting a workplace and I have reviewed the Elements of risk section above with my child.

Parent/Guardian signature: \_\_\_\_\_

Date: \_\_\_\_\_

Student Signature: \_\_\_\_\_

Date: \_\_\_\_\_