



Beaconhills College

IN ASSOCIATION WITH THE ANGLICAN & UNITING CHURCHES

DATE

Dear parents,

RE: Student Skills Development opportunity in the Berwick Canteen

Your child has shown interest in participating in an informal skills development program in the Pakenham Campus Canteen.

This program is offered as a voluntary opportunity, and open to students over the age of 14. The aim of this program is to assist students gain skills which may give them an advantage when applying for part time employment in the fast food, hospitality or retail industry by providing them with relevant experience whilst also building up their resume.

Our Food Services team will teach retail and hospitality skills such as coffee making, cash handling, customer service, using an EFTPOS machine and a cash register.

This program will operate from 7.30am to 8.45am, and students will be required to wear their full College uniform. An apron will be provided to protect their uniform.

Prior to participation, the students will need to complete a free online Food Safety course, which will give them a certificate for their resume -

<http://dofoodsafely.health.vic.gov.au/index.php/en/> , and they will also need to complete a free Workplace Safety course, via this link - <https://youtu.be/t1a60SeJ9Es>

If a Food Safety course or Workplace Safety Course has already been completed through the College please email a copy to pakcanteen@beaconhills.vic.edu.au

Upon attendance and completion of four participation sessions students will be awarded a "Certificate of Completion" outlining the skills gained, and a written reference from Beaconhills College Food Services to include in their future job applications.

If you agree to your child participating in this skills development program, please complete the attached form, and return it the Food Services Supervisor, to arrange to book-in 4 training sessions.

Regards,

Lyn Garas

Food Services Supervisor

Pakenham Campus

Food Services

T: 1300 002 225 Ext: 3070

E: pakcanteen@beaconhills.vic.edu.au



Parent Permission Form - Food Services Skills Development Participation

Student Name: _____ Year / Class: _____

Parents Name: _____

Consent:

I _____ (parent) give permission for
_____ (student name) to participate in the Food Services skills development program, as detailed in the attached letter.

My child has completed/will complete (cross out which-ever is not applicable):

- Food Safety On line course _____ (expected date /or date of completion)
- Work Place Safety course _____ (expected date /or date of completion)

Signed: _____

Parent Name: _____

Date: _____

Contact Phone Number: _____

Please complete this, and bring along with copies of the two specified training programs, to the Pakenham Canteen, ATT: **Food Services Supervisor - Lyn Garas**

I understand, that my child should not attend if at any time:

They are experiencing any cold or flu like symptoms, which may include any or all of the below:

- fever (high temperature), runny nose, acute respiratory issues, dry cough, shortness of breath, fatigue, body aches, loss of sense of smell or taste.

In addition to these medical symptoms, your child should not attend if;

- they, or a close contact, or household member, are waiting for a COVID-19 test result; or
- they are in 14 days quarantine, as they have been defined as a close contact of a confirmed case of COVID-19.

OFFICE USE ONLY

DATES for participation *(Please send copy of this back with student to inform parents of the dates.)*

1. _____
2. _____
3. _____
4. _____