

Hartismere School

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NSP/GC

Dear parents and carers

DUKE OF EDINBURGH BRONZE AWARD - SUMMARY

The Duke of Edinburgh's Award, at Bronze level, is comprised of four sections. These are the Volunteering, Physical and Skills sections and the Expedition.

The Volunteering, Physical and Skills sections are to be completed outside of school and under the direction and motivation of the participant themselves. It is their responsibility to find and undertake these sections. I am happy to discuss these sections with the participants and a list of ideas can be found at <https://www.dofe.org/do/>

In summary:

Volunteering Carried out for ~1hr per week continuously for 3 months. This section is designed to promote independence in the participant and allow them to help out in the community. Usual volunteering activities include helping out at a Brownies/Cubs group, working in a charity shop, litter picking/beach clean. The work that the participant undertakes must not take the form of a role that would usually be paid, nor can they receive payment themselves.

A list of remote opportunities can be found here: <https://www.dofe.org/dofewithadifference/activities>

Physical Carried out for ~1hr per week continuously for 3 months. Any physical activity, either team based or individual. It can be an existing activity or the participant can start a new one.

Skills Carried out for ~1hr per week continuously for 3 months. The participant can continue to develop an existing skill, such as playing a musical instrument, or learn a new skill. The skill cannot be sport-based, unless it is umpiring/refereeing.

Any one of the above for a further 3 months. One of the above activities must be carried out for 6 months (~1hr per week).

All three activities can run concurrently.

For the three activities, the students will need to complete an activity log, recording what they have completed each session and how long for, and they will need an assessor. The assessor is an adult (over 18) who will be with the participant for most, if not all, sessions and who will write an assessor's report at the end of the section. The assessor should not be a parent or family member.



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If you have any questions about these three sections, please email me dofe@hartismere.com.

Expedition

The fourth section of the Award is the expedition. At Bronze this takes the form of a two day, one night walking expedition, assessed by an external assessor.

We usually carry out training sessions on a Wednesday afternoon after school.

We also run a local walk with full kit from school at the end of April and a practice expedition to help prepare the participants for the Qualifying expedition.

Training programme for Wednesday sessions and the skills day:

- Team-building
- Navigation, Route Planning, Map and Compass Skills
- Camp Craft Equipment
- Food and Cooking, Hygiene
- First Aid and Emergency Procedures
- Risk, Health and Safety
- Countryside, Highway and Water Sports Codes
- Observation Recording and Presentations
- Proficiency in the Mode of Travel

More information can be found at www.dofe.org

Provisional Diary Dates:

Wednesday training sessions will begin Wednesday 13 December.

The camp skills weekend will be held on **Saturday 27 April** in school

The practice weekend will be held **Sat 15 & 16 June** (Aldburgh to Dunwich)

The qualifying weekend will be held **Sat 14 & Sun 15 September** (Cromer to Weybourne to West Runton)

Further details on each expedition will be shared nearer the time.

Costs

The total cost of undertaking the award will be £170.

This fee covers the following:

- Enrolment on to the Award Scheme and registration with the Duke of Edinburgh's Award Charity.
- The Practice and Qualifying expeditions; pitch fees, transport costs and assessor fees.
- A day of team building and navigation exercises at Thorpe Woodlands (details to follow).
- An external First Aid trainer to lead one of the Wednesday sessions.
- An embroidered Regatta microfleece.
- A 15% discount card at Go Outdoors.

This payment can be paid by either cheque or ParentPay. Please make cheques payable to 'Hartismere School' and write the pupil name on the reverse – to be given in to Pupil Services, together with the completed enrolment form, medical information form and fleece order form (attached), by **FRIDAY 3 NOVEMBER**. Please note that the email address given on the enrolment form should be that of the pupil and **not** the parent.

Alternatively, payment can be made in instalments via ParentPay. We suggest the following schedule of payments:

£34 by 3 November
£34 by 1 December
£34 by 5 January
£34 by 2 February
£34 by 1 March

Instalment payments can be made by entering the instalment amount on the ParentPay page. You can pay in differing amounts but please ensure that all payments are made by 1 March

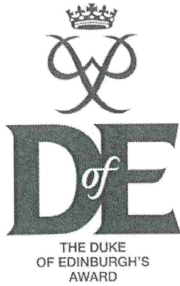
There may also be some further expenditure on personal equipment. I will be loaning out tents and Trangia stoves during the Spring Term. If you would like to buy any items such as walking boots or ruck sacks before the summer term, please don't hesitate to ask for advice – better than buying the wrong thing! I will be offering a kit buying service through the school's kit supplier in the new year. If cost is a problem at any time please feel free to confidentially discuss this with me.

Any problems or questions please contact me, Dr Sparshott or Mrs Leeper (office) on the school number – 01379 870315 or email address dofe@hartismere.com

Yours faithfully



Dr N Sparshott
Duke of Edinburgh Manager



DofE Participant Enrolment Form

Please print clearly in CAPITALS or type your details in. You must complete all of the questions.

DofE Centre and group details (if you know them):

DofE Centre: HARTISMERE SCHOOL	DofE group:
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DofE level:

Bronze <input type="checkbox"/> Silver <input type="checkbox"/> Gold <input type="checkbox"/>
Have you registered for any previous levels of the DofE? No <input type="checkbox"/> Yes <input type="checkbox"/>
If YES – please give the name of the DofE Centre you were registered at:
eDofE ID number (if known) :

Personal details:

First name:	Last name:
Date of birth: / /	Primary language English <input type="checkbox"/> Welsh <input type="checkbox"/> Other <input type="checkbox"/>
Email address:	
Date you wish to start your DofE programme if known (enrolment date): / /	

When you first sign in to eDofE you will be asked to record some personal details such as your contact details, ethnicity and personal circumstances along with details of any medical needs you may have. This data is used to enable your Leaders to support you doing your DofE programme and for the DofE's statistical and reporting purposes. You will always have a 'prefer not to say' option.

Declaration:

I agree to enrol as a participant on a DofE programme. I understand that I will be managing my programme using the online eDofE system. I acknowledge that this system has a set of terms and conditions that I agree to. These terms and conditions are available at www.eDofE.org

Print Name	Signature	Date
		/ /

Consent to enrol from parent or guardian (if applicant is under 18 years old).

I agree to my son / daughter / ward doing a DofE programme. I note that it is my responsibility to check that any activity my son / daughter / ward undertakes for their DofE programme is appropriately managed and insured, unless the activity is directly managed or organised by their DofE group, centre or Licensed Organisation.

Print Name	Signature	Date
		/ /



DofE Participant Enrolment Form

Note:

Data supplied on this form and in eDofE and information about DofE activities recorded in eDofE will be used by the DofE Charity, the Licensed Organisation and DofE centre to monitor and manage DofE participation and progress by young people and manage and support Leaders.

The DofE Charity will use personal data to communicate useful and relevant information to either help participants complete a DofE programme, Leaders/LOs to run DofE programmes more effectively or help the DofE Charity to improve the quality and breadth of its programmes.

We also send emails that contain information about the Charity, DofE negotiated privileged discounts and invites to events and other activities however if you would like to receive these emails you will need to opt in. Once you have opted-in to this you can opt out at any time by visiting www.dofe.org/preferences, or clicking the unsubscribe link that can be found at the bottom of all non-programme related email.

For Licensed Organisation/Centre administration only:

Date registered onto eDofE	/ /
Expected start date	/ /
Participant Fee received	Yes <input type="checkbox"/> No <input type="checkbox"/>
Username	
User ID number	



PARENTAL CONSENT FORM

PC//03

NAME OF CHILD _____ DATE OF BIRTH _____

Hartismere School

SCHOOL _____

VISIT(S) TO Local Walk, Practice Expedition, Qualifier, Thorpe Woodlands

DATE(S) OF VISIT(S) 27/4/24; 15+16/6/23; 14+15/9/24; TBC

I have received and read details of the above visit(s).

I consent to my child taking part in the visit(s) and the activities indicated. I acknowledge that the staff will be liable in the event of any accident only if they have failed to take reasonable care of my child during the visit.

I have read any information provided with regard to the standard of behaviour and/or code of conduct expected during the visit and I undertake to reinforce this information with my child.

I consent to my child receiving medical treatment that, in the opinion of a qualified medical practitioner, may be necessary.

My child's doctor's name and address is _____

I undertake to pay the required sums by whatever date(s) are specified to me and accept that, in respect of any withdrawal from the visit for whatever reasons, there will be no refund of the whole or part of the payment(s) made unless the circumstances are covered by travel insurance or otherwise at the discretion of the school governors.

Signed _____ (Parent/Guardian)

PLEASE COMPLETE THE SECTIONS BELOW

1. Please give your home address and telephone number. If you will be away from home during the visit please give an alternative address where you, or a relative or friend acting for you, can be contacted.

Home Address

Alternative Contact if required

Name: _____
Address: _____

Tel: _____

Tel: _____

I understand that this number may be used as part of a telephone tree, therefore published to other parents

2. In your child's interest, it is important that the organising staff should know whether he or she suffers from any **illness or medical condition**. Please use this space to state, in confidence, any health or other matter concerning your child of which accompanying staff should be aware. Please indicate here also if your child is receiving medication, with details and dosage, and/or has any **specific dietary requirements**.

Medical Conditions

Dietary Requirements

Hartismere School Duke of Edinburgh's Award Fleeces Order Form

Pupil's Name: _____

		Please tick	Please tick
Gender:	Men's* (1/4 Zip, non-fitted)	<input type="checkbox"/>	Women's* (Full zip, fitted) <input type="checkbox"/>
Colour:	Black Dark Navy Seal Grey Bottle Green Classic Red Royal Blue	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	Black Dark Navy Classic Red <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
Size: (chest)	S (36/37) M (39/40) L (41/42) XL (43/44) XXL (46/48)	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	10 (34) 12 (36) 14 (38) 16 (40) 18 (42) <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

*Fleeces are a different fit and zip for each gender, Please chose based on fit and zip.