

Manorfield Road, Driffield, East Yorkshire YO25 5HR

28 February 2022

Dear Parent or Carer,

RE: Key Stage 3 Food & Nutrition

We are delighted to inform you that your child will be taking Food and Nutrition lessons for this half of the school year. Your child will be making a variety of dishes and will therefore be asked to provide food ingredients on some occasions this term. Students will be asked to put the required ingredients in their planners and will also be able to access these on Microsoft Teams. Students will often have the option of customising their flavours. School will provide some ingredients for experiments and skills development tasks as part of the course.

In order for us to accommodate the needs of our students please complete the attached slip and return it by the next Design and Technology lesson. If you have any concerns about providing ingredients please contact me on 01377 253631 extension 151 or by email, using the address at the bottom of this letter.

Students will need to bring a clean apron for all practical lessons. Aprons can be purchased through the online shop on the school website via https://app.parentpay.com/ParentPayShop/Uniform/Default.aspx?shopid=1016 for £3.00, should they not have one at home.

Students should bring ingredients to their food technology room before the start of school to ensure they are stored safely and should bring a suitable container for carrying completed recipes home. Please ensure all boxes and bags are labelled with names to avoid confusion.

If you have any other queries, please do not hesitate to contact the Food and Nutrition department on 01377 253631 extension 154 or 155.

Thank you in anticipation of your support.

Yours faithfully,

EDUCATION

ALLIANCE

THE

Mrs R Knight Head of Design and Technology

The Education Alliance (operating as Driffield School and Sixth Form) is a charitable limited company registered in England and Wales No. 7542211 whose registered office is at East Dale Road, Melton, North Ferriby, HU14 3HS.

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FOOD AND NUTRITION CONSENT SLIP (*Return within 2 weeks to subject teacher*)

Student name: _____ Form group: _____

My child has an intolerance / allergic reaction to the following ingredients:

My child cannot eat the following foods due to our religion/culture/belief:

I understand that in order for my child to fully develop the skills required in the Food and Nutrition rotation, they will need to bring ingredients to school when requested but that I can contact the department should I need support with this.

Signed _			
Date:	 		