Dear Parents/ Carers,

This term, Kindergarten students will be exploring the Science topic “My Senses”. Students will be using their five senses to explore their surroundings and investigate different types of objects and materials. As part of this unit, students will be participating in a range of experiments involving their five senses. This will include cooking and tasting, smelling and touching various food items. If your child has an allergy, please indicate below and each class teacher will make the necessary accommodations.

As part of the ‘hearing’ component of the unit, students will be making their own musical instruments. Please send in a paper towel roll or an empty, clean plastic bottle (labelled with your child’s name) for your child to use for their instrument. Please do not send toilet rolls.

Please return permission notes and materials by Friday 6th March 2015.

Kind regards,

Mrs Danielle Cusumano                      Mrs Liku Koro               Mrs Anne Hewson
Kindergarten Teacher                   Kindergarten Teacher                Principal

Kindergarten Science Term 1

I give permission for my child _____________________________ of class _______ to participate in Science experiments involving tasting, touching and smelling food.

My child has the following food allergies __________________________________

Please provide details:  ________________________________________________
___________________________________________________________________

Parent/Carer Name: _______________________________________
Parent/Carer Signature: ____________________________________
Date: _________________________________________________