A close up of a logo

Description automatically generated[INSERT YOUR LOGO HERE]

**[Series name, e.g. host venue] Royal Institution [Year group] [Subject] Masterclasses, [Term] [2024/25]**

Information for students and parents

**Dates:** [dates]

**From [start time] to [finish time]**, registration from [arrival time]

**Online via** **[platform]**

Dear Student and Parents/Carers,

[Host organisation]is delighted to offer [Primary/Secondary] [Mathematics/Computer Science/STEM] Masterclasses in association with the Royal Institution (Ri). Schools are asked to nominate a handful of students to attend the entire series of [six] sessions, free of charge. Your teacher would like to nominate you to take part – they feel you have the interest and motivation required to benefit greatly from these classes.

Ri Masterclasses are series of workshops which are led by [subject]enthusiasts from industry, academia and education, covering a different topic in each workshop. They offer pupils in-depth, fun investigations of topics in [subject]from beyond the normal curriculum. We aim to include and challenge all students: from those who are already well-motivated and curious about [subject]to those who are just beginning that journey. We hope to inspire them to continue their engagement with [subject] for a long time to come.

[*INCLUDE IF APPLICABLE & DELETE AS APPROPRIATE:* This Masterclass series will also include students from Year [year group]/university students who are studying STEM Subjects and who will be supporting the classes/delivering some of the Masterclasses with training from the Ri.]

Ri Masterclasses run across the UK – see more information here: [*rigb.org/learning/ri-masterclasses*](https://www.rigb.org/learning/ri-masterclasses)

**Series format**

The Masterclasses run **online via [platform]** on the above dates, which should be joined using a parent/carer’s account. The workshops will be interactive, but will need minimal equipment; students and parents/carers will be informed in advance of anything required beyond pen, paper and a calculator. [DELETE IF NOT APPLICABLE]: There will be a short break during the workshops.

Students are expected to attend all [six] classes and will receive an attendance certificate at the end of the series, as well as an invitation to attend the Ri’s national Masterclass Celebration event. Please specify on the consent form if you cannot attend some of the dates.

PLEASE NOTE: This invitation does not guarantee you a place on the series.

**How to apply**

If you are interested in this opportunity, please complete **ALL** sections of the attached consent form **legibly** and return it to your nominating teacher ASAP. Please ensure you have given accurate accessibility, medical and allergy information on the form, and have completed the consent statements. You should keep this letter for reference. Teachers/ Parents/carers will be informed whether you have secured a place on this series by [date]. Further instructions will be sent to parents/carers of accepted students before the start date.

We hope that you are able to take up this exciting opportunity.

Best wishes,

[Signature]

[Name], [Contact details]

|  |
| --- |
| **[Series name] Royal Institution [year group] [Subject] Masterclasses****, [term] [2024/25]** |

**Masterclass application & consent form**

TO BE COMPLETED BY A PARENT/CARER FOR STUDENTS AGED 15 OR UNDER, OR STUDENTS AGED 16+

Your/your child’s teacher would like to nominate them to attend a series of Ri [Subject] Masterclasses – please see the accompanying letter for more information. Please return this form to the teacher ASAP so that they can put them forward (any forms returned directly to the Masterclass organisers or the Royal Institution cannot be processed). PLEASE NOTE: Completing this form does not guarantee a place on the Masterclass series; you will be notified [via the nominating teacher] if you have a place.

**Please make sure you have completed all sections of this form (two pages)**.

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Student Details** | | | | | | | | | | | | | | | | | | |
| **Student forename:** | | |  | | | | **Student Surname:** | | | |  | | | | | | | |
| *Please give their preferred name, if different:* | | | | | | |  | | | | | | | | | | | |
| **Home postcode:** |  | | | | **Gender** (optional)**:** |  | | | | **Date of Birth:** | | **D** | | **D** | **M** | **M** | **Y** | **Y** |
| **School name:** | |  | | | | | | | **School postcode:** | | | | |  | | | | |
| Does the student have any allergies, medical conditions, accessibility requirements or do they ordinarily require any additional support that would impact their ability to fully participate in an online workshop? **Yes/No**  **Details:** | | | | | | | | | | | | | | | | | | |
| **Parent/carer forename:** | | | |  | | | **Parent/carer surname:** | | | | | |  | | | | | |
| **Contact details** – our main method of communication will be via a parent/carer email address; please ensure the address provided is checked regularly. If you do not use email, write ‘not used’. | | | | | | | | | | | | | | | | | | |
| **Parent/carer email address** (BLOCK CAPITALS)**:** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **REPEAT Parent/carer email address** (lower case)**:** | | | | | | | | | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Parent/carer contact telephone number**(s)**:** | | | | | | | |  | | | | | | | | | | |
|  | | | | | | | | | | | | | | | | | | |
| **Is there anything else we need to know?** You can also use this space if you need to add a second parent/carer's details. | | | | | | | | | | | | | | | | | | |

Page 1 of 2. **PLEASE TURN OVER**: WE CANNOT PROCESS YOUR APPLICATION WITHOUT CONSENT

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **GENERAL CONSENT:** We need your consent to process this application further  **Student name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ (please print)  **Who is completing this form?** (please tick) *[ORGANISERS CAN DELETE THIS QU IF NOT NEEDED; IF SO, ENSURE SIGNATRE BELOW IS LABELED ‘PARENT/CARER’]*  I am the parent/carer of the student named above.  I am the student named above; I am aged 16 or over, and I have consent from my parent/carer to complete this form and agree to the statements below.  **I confirm that** if the student named on this form is invited to attend the Masterclass series:   * I consent for the student to join the online Masterclass session(s). * The student agrees to abide by the Masterclass code of conduct: <https://www.rigb.org/ri-masterclasses-code-conduct>. I understand that students may need to be removed from the Masterclass session/series if they do not abide by the code of conduct (all sessions will be monitored by an appropriately checked adult Supervisor to ensure the safety of everyone present). * I understand that this data will be shared with the Ri who own the Masterclass programme and as such they may contact me about events and activities related to Ri Masterclasses. * **[DELETE THIS STATEMENT IF IT DOES NOT APPLY TO YOUR SERIES - IF IT DOES, A JOINT DATA CONTROLLER AGREEMENT MUST BE IN PLACE PRIOR TO STUDENT RECRUITMENT:]** I understand that a video recording of each session will be archived for the protection of both students and adults attending Masterclasses, and that the videos will not be stored beyond short-term [or DATE].   During the Online Masterclasses, I will:   * Ensure that the student is in a safe environment to take part in the online session and that an appropriate adult will be nearby throughout in case of any problems. If possible, the student will remain in a communal living space throughout the event * Ensure that the student will use a parent/carer account to join the online sessions (if under age 16), and that **the display name will be set to the student's name** * Ensure that all members of the household are aware that the online session is taking place and make sure they use appropriate language, behaviour and dress when nearby or in the background. | | | | | | | | |
| **Signed:** |  | **Date:** | **D** | **D** | **M** | **M** | **Y** | **Y** |
| **Print name:** |  | | | | | | | |

*[****DELETE BEFORE SENDING:*** *Universities can add an additional question regarding consent for data to be stored on the HEAT database, provided they have a Joint Data Controller Agreement with the Ri and that the consent statement has been approved by the Ri Masterclass team. This should be separate from the general Masterclass consent statements]*

**Ri Privacy notice**: The Royal Institution and organisers of this Masterclass series process the personal details provided above for the purpose of running the Ri Masterclass programme. All personal data entered in this form will be held securely by the Masterclass organisers for the duration of the Masterclass series. This information will also be passed to the Royal Institution and recorded in their database. The personal details you have entered onto this form will always be stored securely and they will never be passed on to third party organisations to use for their own purposes. We will use your personal data to communicate with you only in the way(s) that you have agreed to. You may amend the personal details you have entered onto this form anytime by emailing ri@ri.ac.uk. For further details please see the Ri privacy policy (available on [www.rigb.org](http://www.rigb.org)).

**[Masterclass venue/organiser name] privacy statement:** ADD YOUR STATEMENT HERE IF YOU HAVE COMPLETED A JOINT DATA CONTROLLER AGREEMENT (mainly universities), otherwise delete this red section.

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