

## ROBERT TOWNSON HIGH SCHOOL

THUNDERBOLT DRIVE, RABY 2566 PHONE: 9824-7777 FAX: 9820-2921 EMAIL: roberttown-h.school@det.nsw.edu.au WEBSITE: www.roberttown-h.schools.nsw.edu.au

## Dear Parent/ caregiver,

Parents/caregivers in public schools have the right to have their children receive instruction in their preferred religious persuasion, where authorised teachers of that persuasion are available.

A special religious education program is available at our school and is run by authorised volunteers of approved religious persuasions.

Students whose enrollment records indicate their religious persuasion will be enrolled into the special religious education programs provided at our school. Additional details of SRE programs on offer at the school can be obtained from SRE providers. Contact details of SRE program coordinators can be provided by the school if required.

## OPTION

Anglican Scripture – Simon Owen, Eagle Vale Anglican Church

Inter-denominational Christian classes are taught by Simon Owen, Youth Pastor at Eagle Vale Anglican Church. Simon is authorised by CAHSM (Campbelltown High Schools Ministry Board) and uses only material approved by this board. For more information about CAHSM please email CAHSM Board chairman Rev. Brett Hall at <u>oursrecampbelltown@generate.org.au</u>.

If your child has no listed religious persuations on their enrolment for or you would like your child to attend one of the options please nominate the special religious education program you wish your child to attend, or indicate that you wish to withdraw your child from special religious education, by completing and returning the tear-off form below.

Students continue in the same arrangement each year, unless a parent/caregiver has requested a change in writing. At any time, you have the right to change your SRE nomination or to withdraw your child from the nominated lessons. A note to the Principal will affect this change.

Regards,

Luke Farthing Deputy Principal  I wish my child to attend the following special religious education program	
Special religious education program:	
Signature of Parent:	Date:
- OR	
I wish to withdraw my child from special	religious education
Student Name:	Year:
	school's SRE programs provided by approved
providers of SRE.	
Signature of Parent:	Date: