

Head Teacher Melindar Kaur

Interim Head of School Susan Wass

Deputy Headteacher Jodie Milson

Dear Parent/Carer

In line with our Safeguarding procedures and to ensure your child’s safety upon leaving school each day, please provide us with the names of persons authorised to collect your child.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| I give permission for my child to go home with:- (e.g. mum, dad, grandparents).  Name and relationship to child. | | | | |
| **End of Day Arrangements**  Please indicate below what is to happen at the end of each day.  C = collected (children will only be able to leave with the persons named above).  W = authorised to walk home alone.  S = Shine Club  Any variation should be notified to the door monitors in the morning or by contacting the school office. After School Sports Clubs will be updated on a termly basis. | | | | |
| Monday | Tuesday | Wednesday | Thursday | Friday |
|  |  |  |  |  |

Child’s Name\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Class \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Signed \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_