27th February 2020

Dear Parents and Carers

**PARENT CONSULTATION EVENINGS –Robin, Woodpecker, Owl, Kestrel and Year 5s in Eagle Class**

Our parent consultation evening for the Spring Term will be held on Monday 23rd and Tuesday 24th March.

I should be grateful if you would select a time on the sheet attached to this letter for a 10 minute appointment with your class teacher. We will try to give you an appointment as close to your choice as possible – the earlier you return your slip the more likely you are to get an appointment at the time you have requested.

The office will notify you using the tear off slip. If you need to change your appointment before the date, please let the office know so that they can offer you an alternative time.

This is a ten minute appointment to share successes and next steps. Teachers will work to keep to the schedule.

If you would like an appointment to discuss any concerns you have with regard to your child’s special needs, please indicate this on the tear off slip and Mrs Gill will make a separate appointment with you.

Yours sincerely

Elaine Mannix

Head Teacher

Please return this whole page to office and fill in the first part.

**PARENT CONSULTATION EVENING –Monday 23rd and Tuesday 24th March**

Child’s name ……………………………………………………………………… Class ………………………………………

Parent/Carer name – PRINT PLEASE…………………………………………………………………

I would like an appointment with my child’s class teacher.

The following days and sections would be most convenient for me.

|  |  |  |  |
| --- | --- | --- | --- |
| **Monday 23rd March** | 3.45 – 6.15approx | **Tuesday 24th March** | 3.45-6.15 approx |
| Please tick  |  | Please tick |  |

Please indicate if you would like to make a separate appointment with Mrs Gill, SENDCo

Yes No

Signed Parent/Carer Date……………………….

……………………………………………………………………………………………………………………………………………

**Filled in by the OFFICE –PLEASE DO NOT FILL IN**

**PARENT CONSULTATION EVENING – Monday 23rd and Tuesday 24th March**

Child’s name ……………………………………………………………………… Class ………………………………………

**Thank you for requesting an appointment. Your appointment is indicated below.**

|  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Monday | 3.45 | 3.55 | 4.05 | 4:15 | 4:25 | 4.35 | 4.45 | 4.55 | 5.05 |
|  |  |  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| Monday | 5:15 | 5:25 | 5:35 | 5.45 | 5.55 | 6.05 | 6.15 |
|  |  |  |  |  |  |  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| Tuesday | 3.45 | 3.55 | 4.05 | 4.15 | 4.25 | 4.35 | 4.45 | 4.55 | 5.05 | 5.15 | 5.25 | 5.35 |
|  |  |  |  |  |  |  |  |  |  |  |  |
| 5.45 | 5.55 | 6.05 | 6.15 |
|  |  |  |  |  |

If you are unable to keep this appointment please contact the office.

Thank you

School Office