Monday 20th April 2020

Dear Parents/Carers

Firstly, may I welcome you and your family to Elburton Primary School.  We are pleased that you have selected us and we will endeavour to make your child’s experience at school a happy one. Please ensure you have confirmed your child’s place at Elburton Primary School with the Local Authority.

Prior to your child’s induction into our school we require some further information.  Please can all parents/carers complete slip (A) at the bottom of the page as this section assists us in placing your child in a class with children they are familiar with.  Please return this to us by **Friday 30th April.** This can be returned electronically or by post.  Based on this information, we will allocate teachers and write to you to inform you of this information

I want to reassure you that, despite these unprecedented times, your child’s induction into school is vitally important to us. The school will contact you with further information regarding induction over the forthcoming weeks, when more information is available to us.

The school’s Klub Kidz provides before and after school care.  If you might need a place, please complete the attached slip (B) below.  There are limited places but we do endeavour to meet all requests.  For more information please contact Ms Yabsley on **07871 196137**.

If you have any questions at this stage, please contact the school admin team by phoning **01752 404489** or emailing **admin.elburton@elburton.plymouth.sch.uk**

Welcome again to the school.  We look forward to meeting you and your child soon.

Yours sincerely



Mr K Smithers

Assistant Headteacher

**To: Mr K Smithers - Assistant Headteacher- Elburton Primary School (A)**

Your Child’s Name .................................................................

Nursery or Pre-school attended................................................................................

Close friends that will also start Elburton with your child

*(Your child is unlikely to be placed in the same class with all of these children, please only indicate close friends)*

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My child’s preferred name for use within school on the class register etc. (e.g. Benjamin may be shortened to Ben)

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Parent/Carer’s contact telephone numbers  .......................................................................................

Signed ............................................................ Date ................................................

Parent / Carer

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**To :The Manager – Klub Kidz- Elburton Primary School (B)**

I wish to express an interest for a place from September for the following sessions – (Please circle days and times)

Monday am / pm

Tuesday am / pm

Wednesday am / pm

Thursday am / pm

Friday am / pm

Child’s Name ................................................................................................

Parent/Carer’s contact telephone numbers  ..........................................................................................