

PARENTS' EVENING REPLY

Name(s) of child/children.....

We/I will attend Parents' Evening on Tuesday October 25th 3.30-6pm.

There will be approx 5 minute slots with your child's classteacher. If there are topics requiring longer discussion on the night, appointments may be made at other times.

Please circle choices for time slots(please give at least 2 choices if possible).

3.30-4pm

4-4.30pm

4.30-5pm

5-5.30pm

5.30—6pm

PARENTS' EVENING REPLY

Name(s) of child/children.....

We/I will attend Parents' Evening on Tuesday October 25th 3.30-6pm.

There will be approx 5 minute slots with your child's classteacher. If there are topics requiring longer discussion on the night, appointments may be made at other times.

Please circle choices for time slots(please give at least 2 choices if possible).

3.30-4pm

4-4.30pm

4.30-5pm

5-5.30pm

5.30—6pm