



After School Tutoring Permission Note 2023

Dear Parents/Caregivers,

Leumeah High School's primary aim is to foster an environment that values academic success and achievement. In order to support this, as part of the Covid-19 Intensive Support Program, we will operate free after-school tutoring sessions in the school library at the end of the school day on Mondays, Wednesdays and Thursdays.

Specialised teachers from different Key Learning Areas will be available to tutor students as per the schedule below:

Mondays from 3:00pm – 4:00pm (English, General Support)

Wednesdays from 3:00pm – 4:00pm (Mathematics, General Support)

Thursdays from 3:00pm – 4:00pm (English/Mathematics, General Support)

If your child is interested in attending, please complete the permission note and return it to **the front office or Ms. Leong** in the English Staffroom.

In an aim to provide students with flexibility of attendance, this permission note is valid for all three afternoons the tutoring service is in operation throughout the year. **Your child will need to inform you when they are planning to attend the sessions.** Attendance is closely monitored and the students will be fully supervised in the Library. Parents/caregivers will be able to contact the supervising teachers via the school office number. **You must make arrangements for your child to return home after the sessions.**

As a participant in the after-school tutoring sessions, your child must:

- stay in the library for the entire hour (cannot leave early)
- participate in the tutoring and complete all work set by the tutor
- respect the library as a resource and safe learning environment
- follow teachers' instructions at all times

If you have any queries or require additional information please contact Ms Leong.

Ms. C. Mateus
Principal

Ms. E. Leong
Head Teacher Literacy



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I give permission for my child _____ of Year _____ to attend the after school tutoring sessions on Mondays / Wednesdays and/or Thursdays.

My child would like tutoring in: _____

At the end of the session, my child will return home by: _____

My child has the following health condition: _____

Signature of Parent/Caregiver

Parent mobile number

Date: _____

