



Coral Primary School

Parental Reply/Acknowledgement Form (To be submitted to Form Teacher by **Friday, 4 July**)

Name of Student: _____

Class: P __ / ____

Name of Parent/Guardian: _____

Contact Number: _____

Please tick (✓) the relevant boxes.

A. P1-P6 Chinese Language Fortnight – Monday, 30 June to Friday, 11 July

- I acknowledge that I have received notification of the various activities and workshops conducted during the Chinese Fortnight Week.

B. P1 Annual School Health Screening

- I have been informed of the Health Visit and will submit the Health Booklet (and other health documents such as immunization certificates), the completed Medical Information Form and Consent Form for Immunisation to the Form Teacher.
- For P1 Muslim students (during Ramadan), I have also submitted the Consent Form for immunization to the Form Teacher.

C. ODT Pre-exercise check and Temperature Taking Exercise on Wednesday, 2 and Thursday, 3 July

- I have noted that my child/ward has to bring his/her ODT on these days.

Name & signature of parent/guardian

Date