



Coral Primary School

Parental Reply/Acknowledgement Form (To be submitted to Form Teacher by **Tuesday, 5 July**)

Name of Student: _____

Class: P __/ ____

Name of Parent/Guardian: _____

Contact Number: _____

Please tick (✓) the relevant boxes.

D. Science Practical Test for P3 to P5 Students

- I acknowledge that I have received notification on the Science Practical Test.

Date	Levels
Monday, 18 July	P3 Science Practical Test
Tuesday, 19 July	P4 Science Practical Test
Wednesday, 20 July	P5 Science Practical Test

E. P1-P6 Chinese Language Fortnight – Monday, 27 June to Friday, 8 July

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

Name & signature of parent/guardian

Date



CORAL PRIMARY SCHOOL

20 Pasir Ris St 51, Singapore 518902, Tel: 65854491 Fax: 65854493

29 June 2016

Through the Principal

Dear Parents,

2016 P3 SWIMSAFER PROGRAMME

The P3 SwimSafer Programme comprises 8 sessions to be conducted in Terms 3 and 4.

The details are as follows:

Dates and Time	Session 1: 20 July Session 2: 27 July Session 3: 3 August Session 4: 17 August Session 5: 24 August Session 6: 31 August Session 7: 14 September Session 8: 21 September	8.00 am to 9.30 am <ul style="list-style-type: none">• Students will report to school as usual for lessons at 7.30 am.• Students will board the buses headed for Tampines Swimming Complex at 7.40 am.• Swimming Lessons will be from 8.00 am to 9.30 am.• Students will return to school after the swimming lesson for recess at 10.10 am.• School will carry on as per normal.
Venue	Tampines Swimming Complex	
Cost	No payment is required from students. The programme fee is fully borne by the Ministry of Education (MOE) and Sport Singapore (SportSG).	
Transport	The school will arrange transportation to and from the swimming complex.	

For details on what to bring for the swimming lessons, please refer to attached **Instructions for Swimming Lessons**.

Please complete the acknowledgement form and return to your child's form teacher by **5 July 2016**.

We look forward to your continued support.

Yours Faithfully,

Mr Shafiruddin Rahim

HOD PE/CCA

Instructions for Swimming Lessons

Please ensure that your child has **proper swimming trunk/costume and goggles**. Students participating in the swimming programme are **required to wear proper swimming trunks/costumes at the start of the school day**. The recommended swimming attire for girls is the one-piece swimming costume.

Students are required to wear the **school PE attire over the swimming attire**. This is to minimise time wastage and maximise practice time.

Items required (to be packed inside a small carrier bag)

1. Swimming trunk/costume
2. Goggles
3. Towel
4. Water bottle
5. Sun block lotion/cream (optional as the lessons are carried out in the morning)
6. A plastic bag to contain the wet items after the swimming lesson

Please ensure that all your child's personal belongings **are labelled clearly with their name and class** so that missing items can be returned to the rightful owner. Students will have a quick rinse after the lessons and change into their PE attire. They will depart for the school to have their recess at the school canteen.

To ensure the safety of every student, we strongly urge you to remind your child on the following safety precautions:

1. Instructions from swimming instructors and teachers should be obeyed promptly.
2. No student should leave the pool without permission.
3. Running alongside the pool deck is not allowed.
4. Pushing friends into the pool is not allowed.
5. No student should be allowed in the water until permission is granted by the swimming instructors or the teachers.
6. Students should wear proper swimming trunks/costumes.
7. Students should not swim if they have any foot or skin infection.
8. Students should not swim if they have a severe cold or ear infection.

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P3 SwimSafer Programme Acknowledgement Form

I, _____, parent/guardian of _____ of class P3/() acknowledge my child's participation in the P3 SwimSafer programme. I will ensure that my child is prepared for the activity and follows the guidelines and instructions stipulated within.

Signature of Parent : _____

Date : _____

Contact No: _____