



NORTHOAKS PRIMARY SCHOOL

Letter to Parents 03/2020

7 January 2020

Dear Parents of Primary 5 and 6 students,

A letter was issued on 3 January 2020 to inform parents that CCA will **commence on Wednesday, 22 January 2020.**

Kindly acknowledge receipt of the dates of the 30 sessions of CCA. If your child is absent during CCA, a medical certificate or a parent's letter is required.

Kindly be informed that CCA for P6 will cease in Term 3 and Term 4 in preparation for the PSLE.

Kindly also indicate the transport arrangement for your child by Friday, 10 January 2020. If your child requires transport back home after CCA, **an additional \$6 per trip back home is required to be paid directly to the School Bus vendor (For Existing student taking School Bus Only)**

Should you have further queries, please feel free to call Mr Jasni M. Jasmin (HOD PE/CCA) at 67538835 or email jasni_mahmood_jasmin@moe.edu.sg.

Thank you for your continued support in your child's holistic development.

Yours sincerely

Mrs Theresa Hong
Principal

P4, P5 & P6* CCA 2020 30 Weeks Session Time: 2.45- 4.15am

Term 1		Term 2		Term 3		Term 4	
No	Date	No	Date	No	Date	No	Date
1	Wed, 22 Jan	9	Wed, 25 Mar	16	Wed, 1 July	25	Wed, 16 Sep
2	Wed, 29 Jan	10	Wed, 1 April	17	Wed, 8 July	26	Wed, 23 Sep
3	Wed, 5 Feb	11	Wed, 8 April	18	Wed, 15 July	27	Wed, 30 Sep
4	Wed, 12 Feb	12	Wed, 15 Apr	19	Wed, 22 July	28	Wed, 7 Oct
5	Wed, 19 Feb	13	Wed, 22 Apr	20	Wed, 29 July	29	Wed, 14 Oct
6	Wed, 26 Feb	14	Wed, 20 May	21	Wed, 5 Aug	30	Wed, 11 Nov
7	Wed, 4 March	15	Wed, 27 May	22	Wed, 19 Aug		
8	Wed, 11 March			23	Wed, 26 Aug		
				24	Wed, 2 Sept		



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Please return this Acknowledgement to the Form Teacher
by Friday, 10 January 2020

Acknowledgement from Parent

I have **taken note of the dates of the 30 sessions CCA.**

Please tick ☐ the option on transport arrangement:

- ☐ I **need to book the School Transportation for a Return Trip** for my child after CCA.
(For **existing students taking the school bus only**)
- ☐ I will arrange my own transportation for my child.
- ☐ My child will go home on his/her own after CCA.
- ☐ My child will be going to the Student Care Centre after CCA.

Name of Child/Ward : _____ Class: _____

Contact Telephone No(s): _____

Signature of Parent/Guardian: _____

Date: _____