



# Church Hill Infant School

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Headteacher: **Mrs M Bulsara**

22<sup>nd</sup> October 2018

Dear Parents / Carers,

## PARENT/TEACHER CONSULTATIONS

We would like to invite you to school to discuss your child's progress. We firmly believe that education is a partnership between home and school and that by working together we will achieve the best for your child. It is important that you attend this meeting as key information about your child's learning progress will be shared.

All appointments will take place in the classrooms, apart from Mr Mayhew and Mrs Broom's class who will be in the hall. **Please be aware that if you bring your children along they will need to stay with you at all times.** I will also be available in my office should you wish to talk to me.

### HOW TO MAKE AN APPOINTMENT WITH YOUR CHILDS TEACHER

The teachers will be available to see you on the dates and times shown on the attached sheet. Please tick three of the times that would be convenient to you and **return the whole sheet.** An appointment time will then be arranged and you will be informed of it. If these times are inconvenient for you, your child's teacher should be approached to arrange another.

Please be aware that teachers will only be able to make one appointment per child.

We look forward to working with you so that your child gets the best possible education at our school.

Yours sincerely

**Mrs Bulsara**  
Headteacher



The Bradgate Educational Partnership  
Registration Number 08168237

## PARENTS EVENING APPOINTMENTS

Childs Name: ..... Class: .....

Dates: Tuesday 30<sup>th</sup> October and Thursday 1<sup>st</sup> November

I have another child in school: Childs Name: ..... Class: .....

	30 <sup>th</sup> Oct	1 <sup>st</sup> Nov		30 <sup>th</sup> Oct	1 <sup>st</sup> Nov		30 <sup>th</sup> Oct	1 <sup>st</sup> Nov
3.30 - 3.40			4.50 - 5.00			6.10 - 6.20		
3.40 - 3.50			5.00 - 5.10			6.20 - 6.30		
3.50 - 4.00			5.10 - 5.20			6.30 - 6.40		
4.00 - 4.10			5.20 - 5.30			6.40 - 6.50		
4.10 - 4.20			5.30 - 5.40			6.50 - 7.00		
4.20 - 4.30			5.40 - 5.50					
4.30 - 4.40			5.50 - 6.00					
4.40 - 4.50			6.00 - 6.10					

Please tick at least three of the above times and return this whole sheet to your child's teacher. The part below will be returned to you with your appointment time.

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## PARENTS EVENING APPOINTMENT

Child's Name: ..... Class: .....

Your appointment has been arranged for:

Tuesday 30<sup>th</sup> October / Thursday 1<sup>st</sup> November at ..... pm.



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