

 Head Teacher:

Mrs Sue Barnes

Deputy Head Teacher:

Mrs Steph Parkinson

Chair of Governors:

Mr Paul Phillips

Wharf Road

Wendover

Buckinghamshire

HP22 6HF

 Telephone: 01296 622629

Email: office@jhampden.bucks.sch.uk

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |

October 2016

Dear Parents

Consultation Evenings are to be held on Tuesday 8th and Wednesday 9th November. This is a valuable opportunity for you to meet with your child’s teacher and I shall also be in school, should anyone wish to speak to me. Please enter School through the main entrance as the black security gates at the side of the building will be locked. When you arrive for your child’s appointment, please feel free to look at his/her work before you talk to the teacher. I know the children like to think that their parents/carers also look at all the displays in the classroom.

We would appreciate it, if you could make alternative arrangements for your children, since they will not be able to come into the classrooms. However, if you are unable to do this then please bring something for them to do quietly while you speak with the teacher.

Please complete the slip below and return it to us by **Friday, 21st October** so that we know the day and time that will be most convenient for you. We shall then endeavour to match it as closely as we can. Appointments will be sent home week commencing 31st October.

Yours sincerely

Sue Barnes

Head Teacher

✂ -------------------------------------------------------------------------------------------------------------------------------

**THE JOHN HAMPDEN SCHOOL WENDOVER**

**Consultation Evenings**

**It would be helpful if you could tick at least two convenient times.**

**Tuesday 8th November Wednesday 9th November**

4.00 – 4.30 p.m. …………4.00 – 4.30 p.m. …………

4.30 – 5.00 p.m. ………… 4.30 – 5.00 p.m. …………

5.00 – 5.30 p.m. ………… 5.00 – 5.30 p.m. …………

5.30 – 6.00 p.m. ………… 5.30 – 6.00 p.m. …………

6.00 – 6.30 p.m. ……….. 6.00 – 6.30 p.m. …………

6.30 – 7.00 p.m. ………… 6.30 – 7.00 p.m. …………

flexible ………… flexible …………

(each appointment will be for **10 minutes** only)

Child’s name ………………………………………………………………………………………… Class ………………………………………..

I have other children in the following classes ………………………………………………………………………………………………

Signature ………………………………………………………………………………………… (parent/guardian)