

Supervised Study Permission Form

Dear Parent or Guardian,

Supervised study will re-commence on Monday 5th November 2012. Supervised study commences at 3.30pm sharp for one hour, a 10 minute break from 4.30pm to 4.40pm and then a second hour of study from 4.40pm to 5.40pm. Supervised study is available to all students in the school not just Junior & Leaving Certificate year students. Also please note that the school canteen will provide a selection of rolls, baps and wraps. These are to be ordered at the end of lunchtime and will be available for collection at staffroom at the end of the normal school day. Hopefully this service will remove the need for students to go Gala before study which often results in these students returning late for study.

The rules of supervised study are

- No talking
- No food or drink to be consumed during study, food to be consumed during break times only
- Toilet and locker visits at break times only
- No one may leave the room during study, unless they have a note signed by parent/guardian
- Headphones are not allowed

Supervised Study will not run on Fridays as it was not well attended last year, but may run on Fridays in future terms if there is sufficient demand.

This term of supervised study will run from Monday 5th November to Thursday 20th December, so it comprises of 28 sessions. The cost for this term is €60 per student.

Money will be collected this week and next week by Ms. Mortell and receipts will be issued. If it is not feasible to pay the full €60 all at once, €30 may be paid by Friday 9th November to secure your child's place, with the remaining €30 to be paid during the term.

If you wish your child to attend supervised study, please fill in the following form and return it as soon as possible to Mr. McNamara/Ms. Mortell. Please ensure to include your mobile phone number so you can be informed of any absences from study by your child.

Kind regards,

Study Organiser

Save this part of the form for future reference.

Cut here-----
Sign this part of the form and return it to Sinead Mortell, if you wish your child to attend Supervised Study.

I request for (Name of student)_____ to attend Supervised Study for 2012/2013. In an emergency/absence, please contact:

Name: _____ Mobile Phone: _____

Parent/Guardian Signature: _____ Date: _____