School provision during closure from Wednesday 6th January 2021

|  |  |  |
| --- | --- | --- |
| Parent’s name |  | |
| Child/ren’s name  and Year group |  | |
| Type of ID provided |  | |
| Emergency contact no |  | |
| Name of employer |  | |
| Work telephone number |  | |
| Details of provision needed.  Please attached a copy of your rota if possible or inform school if your need will vary from week to week | Day | Times |
|  |  |
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I declare I am a Key Worker and have no other means of childcare during the times I am expected to work.

PRINT NAME\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

SIGNATURE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

DATE\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_