

Sacred Heart Catholic Primary School

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Headteacher: Mrs R Tregar



APPLICATION FORM for Attending Doctor/Dentist/Hospital

We want to ensure that your child receives the best education. By making doctor/dentist appointments outside of school hours, you will be supporting your child's full school attendance, learning and development.

However, if you do wish to take your child out for doctor/dentist/hospital visits, please complete the form below and return to the school office via letterbox in school foyer **BEFORE** the date of the appointment. **Proof of appointment** is required for all appointments.

Child/Children's Name/s:

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Specify Reason:

.....

Date:

.....

Time of appointment :

.....

Time to be collected:

.....

School Meal Required (*please circle*):

Yes

No

Signed: _____ Date: _____

