Green Square Supported Return To School Program

Permission Form

I give permission for my son, daughter or young person under m	ıy care
to attend the Green Square Supported Retu	rn to
School Program until the suspension is resolved.	

- I understand that I am fully responsible for my son/daughter's travel to and from the centre.
- I understand that he/she will be attending the centre between the hours of 9.30am through to 12pm.
- I understand that my child will return directly home from the centre after classes have finished.
- I understand that my son/daughter's behaviour and attendance at the centre will be considered at a return to school meeting.
- I understand that in the event of the head teacher's absence parents/carers will be contacted and the student will be required to stay home, following the DEC guidelines for suspensions.
- I understand that my son/daughter must not use any of the Green Square School facilities and must enter and exit the centre via the nominated access.
- I understand that my son/daughter must wear school uniform whilst at the centre.

Signed:	
	(Parent/Carer)
Date:	