

1st October 2018

Dear Parents/Carers,

Re: Thandi Coaches – Password Setup 2018/2019

We will be setting up a password system if you have nominated someone to collect your child/children on your behalf, please could you make sure you give them your password so they can communicate this to the chaperone.

If the Parent/Carer has forgotten the password:

- Please speak to the chaperone on the respective coach for your child/children.
- Alternatively, please ring the School Office to reset your password. This will be communicated to the chaperone.

If the nominated person does not know the password then the chaperone cannot release the child/children into their care. The chaperone will contact the parent/carer concerned immediately.

Please complete the form attached and return to the chaperone at the earliest opportunity.

This system will take effect from Tuesday 9th October 2018.

Seva School and Thandi Coaches take the safety of your child/children very seriously and we appreciate your co-operation on the following:

- Please do not board the coach with your child/children in the mornings as the chaperones will ensure your child(ren) is safely seated.
- Please ensure that they are dropped off and collected **on time** at their allocated bus stop.
- If you are collecting your child/children from School or if you have arranged alternative travel, please inform the School Office by 12pm (this also includes Secondary pupils).
- If your child/children attends an after-school club and is not using the coach service at home time, it is your responsibility to inform the School Office by 12pm.

Finally, can we please remind you that to continue our effective working partnership that you display positive behaviours at all times. We are after all a positive role model to all pupils and other adults.

Thank you for your support.

Seva School

Password Setup –2018/2019

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Password: _____

Name of Child/Children & Class: _____

Coach Number: _____

Bus Stop: _____

First Point of Contact Name: _____

Contact Number: _____

Emergency Point of Contact Name: _____

Contact Number: _____

Please provide any additional information