



Rivervale Primary School

80 Rivervale Drive, Singapore 545092

Office Tel: 6388 7450 Staff Room Tel: 6388 7446 Fax: 6388 7449

Email : rivervale_ps@moe.edu.sg

Website : <http://www.rivervalepri.moe.edu.sg>

To Parents/Guardian

SCHOOL ACTIVITY: Motivation Camp for P6 Students 2018

Place of Activity	Rivervale Primary School
Date / Time	Session 1: 14 March 2018, Wednesday (8 am to 5 pm) Session 2: 31 May 2018, Thursday (10.30 am to 12.30 pm)
Person-in-Charge	(YH) Mrs Angie Liu and (AYH) Mdm Aishah
Contact Number	63887450

Your child/ward _____ of Primary 6 _____ will be participating in the above-mentioned school activity. Objectives of the Programme are:

1. To improve the current level of motivation towards learning.
2. To enhance SEL competencies particularly Self-Management, Relationship (peers, teachers and parents/guardian) and Responsible Decision Making skills.
3. To help students to manage expectations (align to school's core values) from P5 to P6 by applying transition skills e.g. mind-set, time management and academic resilience.

The cost is **\$47.90** per student (after school subsidy). If your child/ ward is a Singapore Citizen and you have established the Enrichment Programme Standing Order, payment will be deducted from his/ her account, subject to available balance. If your child/ ward is a non-Singapore citizen, please pay in cash or cheque.

Please acknowledge receipt of this notice by completing and returning the portion below to your child's/ ward's Form Teachers by Monday, 12 March 2018.

If the student is not able to attend this activity, a written explanation from the parent/guardian is required.

Mrs Angie Liu
Name of Teacher-in-Charge / Signature

Principal's Signature

----- Please tear here -----

[This portion to be returned to the school]
Acknowledgement Slip

School Activity: Motivation Camp for P6 Students 2018

Student's Name		Class: P6 _____
BC No.		
Date of Birth		
Contact Person [in case of emergency]		
Tel No.	Home / HP : _____ Office : _____	

I, _____, parent/guardian of the above-named student, acknowledged receipt of this notice. I understand that the teachers/person-in-charge will do their best to ensure the safety and the well-being of every member of the group.

Remarks (if any): _____

Parent's / Guardian's Signature

Date