



Windham Ridge Public School

32 Red Cardinal Trail, Richmond Hill ON L4E 3Y4

Tel.: 905-773-5443 Fax: 905-773-3451

Notification of Expected Return to School

Dear Parents:

Date:

Students who will be returning to school after a period of vacation will be required to comply with the following process to confirm their space in their home school. Please complete the attached form indicating the expected dates of absence. Contact with the school **must** be made on the 15th day of absence, and every 15 days after that.

Given current accommodation issues and Ministry of Education class size caps, parents/guardians who do not respond through this ongoing communication format may be required to have their child(ren) attend school at an alternate location which can accommodate them.

If you require further information or clarification, please contact the school.

Sincerely,

Vittoria Leone

Principal

Student Name: _____

Student ID#: _____

The above student will be absent from school for more than 15 days with parent/guardian permission.

Expected dates to be absent: _____ to _____

Notification indicating that the student will be returning must be sent to the school on the thirtieth day of absence and every 15 days after that.

Failure to do so will result in the student being removed from the school's register.

Date

Signature of Parent/Guardian





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Notification of Expected Return to School

Date: _____

Student Name: _____

School: _____

First Date of Absence: _____

The above named student will be returning to school on: _____

Signature of Parent/Guardian