



# St Cecilia's

CHURCH OF ENGLAND PRIMARY SCHOOL

**PERMISSION FOR PUPILS TO WALK TO AND FROM SCHOOL UNACCOMPANIED**  
**(Year 5 and 6 only)**

**The person with parental responsibility must complete and return this reply slip to school before the school will release your child unaccompanied.**

Name of child:

Year:

I wish to inform you that my child will be walking to/from school unaccompanied on the following days (please tick as appropriate):

Monday .....

Tuesday .....

Wednesday .....

Thursday .....

Friday .....

I will notify you immediately should this arrangement change.

I have read and understood the guidelines, systems and reasonable precautions set out in 'policy on safeguarding pupils walking to and from school alone'.

Signed \_\_\_\_\_

Date: (d/m/y) \_\_\_\_\_

Print Name \_\_\_\_\_