



KOTHARI INTERNATIONAL SCHOOL

B-279, Sector-50, Noida - 201301, (U.P.) India

Tel.: 0120-4082430, 4319055, Mob.: 9818548495 Fax : 0120-4319066

E-mail : info@kotharischool.edu.in, Website : www.kotharischool.edu.in



KIS/24-25/APRIL/001

02 APRIL , 2024

GRADES 6-8 – SCAFFOLDING CLASSES
ACADEMIC SESSION 2024-2025

Dear Parent
Namaskar!

To address your ward's learning gaps the school has planned scaffolding classes by providing additional support taking into account the previous year's performance. These sessions will help your ward understand the subject in a better way and he/she will become more engaged and a motivated learner . These classes will be conducted for **Science, Social Science and Mathematics on Mondays (Assembly period) and working Saturdays from 9 am to 12 noon.**

Your ward _____ is advised to attend the Scaffolding Classes for _____
_____ subject/s.

On working Saturdays, you are requested to make your own arrangements for drop and pick up of your ward from the School Reception, according to the time schedule, which will be shared shortly.

The students are expected to submit the **Consent Form** to the Grade Tutor on **Friday, 5 April 2024**

Warm regards

Dr. Sangeeta Arora
Principal

CONSENT FORM

1. I am interested / not interested to send my ward _____ of Grade/
Section _____, for the Scaffolding classes to be held in school on working Saturdays. I take the responsibility of picking up my ward on Saturday, according to the above schedule.
2. I am interested / not interested for the extra scaffolding classes taken during the **Assembly periods** as mentioned above.

Parent's Name _____ Mobile No. _____

Mode of Pick up _____

Signature _____