St Martin's Primary



Shared Learning Contract

Following our consultation with parents/carers, pupils and staff, we would kindly ask that our families take some time to complete the following contract together.

Child's Name							
Child's Class							
Please tick what ye	ou would like ✓			\neg			
I would like my ch	aild to receive sh	ared learning	tasks				
I would not like m	y child to receiv	e shared learn	ing tasks				
Parent/Carer Sig	nature						
I will ensure my ch	nild's shared lea	rning tasks ar	e signed by m	e and uplo	oaded to	o Seesaw	
Signed		Date					
Pupils Signature							
∯ ⊕ I will	complete	my shared	learning	tasks	+ and	activities.	
Signed			Date				