



ANAKIE PRIMARY SCHOOL

2125-2135 Ballan Road, Anakie 3213

Phone: 03 52841 291

## OUT HOURS SCHOOL CARE REMOTE LEARNING

*This form must be completed and returned by email to:  
[anakie.ps@education.vic.gov.au](mailto:anakie.ps@education.vic.gov.au) **by Thursday** of the week prior to the  
week required to support staffing requirements.*

NAME OF CHILD: \_\_\_\_\_

CLASS: \_\_\_\_\_

NAME OF CHILD: \_\_\_\_\_

CLASS: \_\_\_\_\_

NAME OF CHILD: \_\_\_\_\_

CLASS: \_\_\_\_\_

NAME OF PARENT: \_\_\_\_\_

CONTACT NUMBER: \_\_\_\_\_

CONTACT EMAIL: \_\_\_\_\_

**Week Beginning:** \_\_\_\_\_

*I request the following sessions, and understanding that lodging this form is not a guarantee of the program operating on the requested day/s.*

DROP OFF &/OR COLLECTION TIMES: (Example: AM - 8.00am / PM - 5.00pm )

AM	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
	MONDAY	TUESDAY	WEDNESDAY	THURSDAY	FRIDAY
PM	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

SIGNATURE: \_\_\_\_\_

DATE: \_\_\_\_\_

(You will received a response within 24 hours of submitting this form)