



Ref: TNS/2018/Jan-027

05 January 2018

Dear Parents/Guardians,

PRIMARY THREE SWMSAFER PROGRAMME

1. All Primary 3 students will undergo swimming lessons as part of the PE programme. The objectives of the swimming programme are aligned with MOE's PE Syllabus as follows:

- To teach students water safety, swimming, survival and rescue skills
- To enable students to demonstrate confidence in water without buoyancy aids

2. Lessons will be conducted at Katong Swimming Complex. Swimming lessons will commence in **Term 1 Week 3 for Primary 3A, 3B, 3C, 3D, 3E & 3F**. All 8 lessons will be conducted during curriculum time. As such, your child/ward will report to school as per normal school hours. At the end of the programme, your child/ward will be required to take a swim test according to his/her swimming proficiency.

3. On days when there are swimming lessons, your child/ward is required to put on his/her swimwear beneath the PE attire before he/she reports to school. Please prepare a separate bag for your child/ward comprising the following items:

- towel
- comb
- toiletries
- water bottle
- food for recess
- undergarments
- slippers/sandals
- a plastic bag for wet clothing
- goggles & cap

4. The schedule for the respective classes is as follows:

Date of 1 st Lesson	15 Jan 2018	18 Jan 2018	19 Jan 2018
Day	Monday	Thursday	Friday
Classes	3C & 3F	3A & 3D	3B & 3E

5. Attendance is compulsory unless your child/ward is certified medically unfit.

6. For clarifications, please do not hesitate to contact Ms Neo Lay Peng via e-mail at neo_lay_peng@moe.edu.sg. You can visit www.swimsafer.com.sg for more information. Thank you.

Ms Neo Lay Peng
 HOD/PE

Dr Chin Kim Woon
 Principal





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PRIMARY THREE SWIMSAFER PROGRAMME

Kindly complete this form and return it to your child's/ward's PE teacher by **08 January 2018**.

Name: _____ () Class: 3 ()

Swimming Ability

Please indicate the **highest** certification attained where applicable and provide a copy of the certificate.

<input type="checkbox"/> SwimSafer Stage 1	<input type="checkbox"/> SwimSafer Stage 2	<input type="checkbox"/> SwimSafer Stage 3
<input type="checkbox"/> SwimSafer Bronze	<input type="checkbox"/> SwimSafer Silver	<input type="checkbox"/> SwimSafer Gold
<input type="checkbox"/> Others: _____	<input type="checkbox"/> My child is unable to swim.	
<input type="checkbox"/> My child does not have any form of certification but he/she is able to swim at least 50 metres using * freestyle stroke / breaststroke / backstroke / butterfly stroke.		
<input type="checkbox"/> My child does not have any form of certification but he/she is swimming competitively.		

In case of emergency, please contact:

Name of *Parent/Guardian:		
Mobile phone:		Home number:

Medical Details

Is your *child/ward susceptible to seizures, fainting spells, epilepsy, diabetes or any other condition that may affect his or her safety during the swimming lesson? If yes, please provide details below. A NIL return is required.

 Signature of *Parent / Guardian

 Date

* Delete where not applicable

