**Students with Key Worker Parents – Reply Form**

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| Name: | Year Group: |
| Does the child live with key workers: Yes/No | |
| Tick the days your child will be attending school:  Monday  Tuesday  Wednesday  Thursday  Friday | |
| Does your child need transport to and from school: Yes/No | |
| If yes, which bus do they normally catch?  Which bus stop do they catch the bus from? | |
| Does your child require a school meal: Yes/No | |

Please reply by email if possible to [enquiries@queenelizabeths.derbyshire.sch.uk](mailto:enquiries@queenelizabeths.derbyshire.sch.uk)