



Dear Parents

**Subject:** Remedial Classes for Academic Support

At Bloom Public School, we are committed to ensuring the academic success and overall development of each student. In line with this commitment, we have observed that your ward requires additional support in certain subjects to enhance his/her understanding and performance.

To address this need, we are pleased to inform you that we have organized remedial classes for students who may benefit from extra help. These classes are specifically designed to provide targeted assistance in subjects where students may be facing challenges. The aim is to reinforce their learning, clarify concepts, and improve their academic outcomes. The classes will be held on Weekdays 7.20 am- 8.00 am according to the schedule given below:

<b>DAY/ CLASS</b>	<b>VI</b>	<b>VII</b>	<b>VIII</b>
<b>Monday</b>	<b>MATHS</b>	<b>MATHS</b>	<b>MATHS</b>
<b>Tuesday</b>	<b>SCIENCE</b>	<b>SCIENCE</b>	<b>SCIENCE</b>
<b>Wednesday</b>	<b>ENGLISH</b>	<b>ENGLISH</b>	<b>ENGLISH</b>
<b>Thursday</b>	<b>MATHS</b>	<b>MATHS</b>	<b>MATHS</b>
<b>Friday</b>	<b>ENGLISH</b>	<b>ENGLISH</b>	<b>ENGLISH</b>

We kindly request your cooperation in ensuring that your ward attends these remedial classes regularly and punctually. Consistent attendance is crucial for maximizing the effectiveness of these sessions. Please make arrangements for the drop-off of your child promptly on the scheduled days.

Regards  
Principal

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### **Consent Form**

I \_\_\_\_\_ Father/Mother of \_\_\_\_\_  
understand the benefits of the classes arranged by you and will ensure regular attendance of my ward \_\_\_\_\_. I will make the required arrangements for the drop-off of my child on the scheduled days.

Regards

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