

## Kranji Primary School

11 Choa Chu Kang Street 54 S689189 Tel: 6763 4812 Fax: 6763 4568 http://kranjipri.moe.edu.sg Email: kranji ps@moe.edu.sg School Vision:
Every Kranjian will be
Knowledgeable
Respectful
Appreciative
Noble
Joyful
Innovative

25 May 2015 **REF No. : 2015C-E/T2/W9/056** 

Through: The Principal

Dear Parents/Guardians,

#### Primary 3 Conversational Chinese /Malay ( CCM ) Programme

We are pleased to inform you that the school has organised Conversational Chinese lessons for non-Mother Tongue Chinese pupils and Conversational Malay lessons for non – Mother Tongue Malay pupils. There will be 10 sessions altogether, commencing on **1 July 2015** ( Wednesday )

#### **Programme Objectives**

- ♦ Pupils are able to listen to and understand simple spoken Chinese/Malay language.
- ♦ Pupils are able to ask and answer questions, speak and express themselves clearly to others in basic Chinese/Malay language.
- ♦ Pupils are able to show an awareness and appreciation of the Chinese / Malay culture.

#### Programme Details P3 15-hour Beginner Module

Dates: 1/7, 8/7, 15/7, 22/7, 29/7, 5/8, 12/8, 19/8, 26/8, 2/9 (Wednesday)

Time: 1.30 pm-3.00 pm

Venue: Kranji Primary School (Assemble at Canteen)

Course Fees: Subsidized by school

Please note that CCM classes will be held only when there is a minimum class size of 10 pupils.

Please complete the attached Consent Form and submit it to your child's Mother Tongue teacher by

#### Wednesday, 27 May 2015.

We seek your understanding and support in ensuring that your child attends every lesson of the programme and make the necessary transport arrangement for your child.

For clarification, you may contact Mdm Ong Su Hui at 67634812.

Thanl	c you.				
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Mdm	Yong (	Chin			
Head	Of Dep	artme	nt, Mo	ther To	ongue

### **CONSENT FORM** P3 CONVERSATIONAL CHINESE /MALAY ( CCM ) PROGRAMME

Teachers-in-charge	Schedule	Time	Venue
1. Mdm Ong Su Hui	With effect from Term 3/ Week 1	1.30pm -3.00pm	Classrooms
2. Mdm Sarimah	( Wednesday )		
	1/7, 8/7, 15/7, 22/7, 29/7, 5/8, 12/8,		
	19/8, 26/8, 2/9		

2. Mdm Sarimah		( Wednesday ) 15/7, 22/7, 29/7, 5/8, 12/8, 19/8, 26/8, 2/9	,	
PLEASE KEEP THIS	PORTION OF THE FO	ORM FOR YOUR OWN REFER	ENCE	
		PLEASE TEAR HERE		
				ER'S PORTION
	(To be re	CONSENT FORM eturned to the Mother To		
Particulars Of Pupil	Nomo			
Of Pupil	Name Form Class	Form Class: Primary 3	( )	
	Mother Tongue Class	3CL ( ) / 3ML (	)/3TL( )	
Particulars of Parent /	Name		Relationship:	
Guardian	Contact no.	Mobile :	Home:	
		Office:		
		1		
I, allow / disallo	ow my child / wa	rd to participate in the P	rimary 3 CCM prog	ramme.
Parent's Guardi	an's Signature		Date	<del></del>



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#### **Our School Mission:**