

To **Chris Tozer**  
**Primary Learning Support Co-ordinator**  
**The Dukes Centre**  
**Dukes Avenue**  
**Kingston upon Thames**  
**Surrey**  
**KT2 5QY**

Tel: 020 8547 6679 Fax: 020 8439 7794

From: The Governing Body/Headteacher of

\_\_\_\_\_ **School**

**Primary Learning Support required for 2008/09**

TERM	AM/PM WEEKLY SESSIONS	PRICE PER TERM	NO. OF SESSIONS REQUIRED	TOTAL COST
Summer 2008	1 am session per week	£1,830		£
	1 pm session per week	£1,307		£
Autumn 2008	1 am session per week	£2,155		£
	1 pm session per week	£1,539		£
Spring 2009	1 am session per week	£1,771		£
	1 pm session per week	£1,265		£

**Primary Speech and Language Teacher Support required for 2008/09**

TERM	AM/PM S session SESSIONS	PRICE PER SESSION	NO.OF SESSIONS REQUIRED	TOTAL COST
Summer 2008	1am session	£148		£
	1pm session	£105		£
Autumn 2008	1am session	£148		£
	1pm session	£105		£
Spring 2009	1am session	£148		£
	1pm session	£105		£

Signed.....

Chair of Governors / Headteacher

**For Payment purposes only:**

Payment will be by: Journal Transfer/Cheque

Certified Payable: .....

For JT Charge Code: \_\_\_\_ E\_Y\_\_

Date:

**PLEASE RETURN THIS FORM BY 1<sup>st</sup> April 2008 or as soon as possible thereafter**