

**RELIGIOUS EDUCATION PARENTAL RIGHT TO WITHDRAW FORM – Year 10 & 11 ONLY**

**TO BE COMPLETED BY THE PARENTS**

<b>Name of pupil</b>		<b>Tutor Group</b>	
<b>Name of parent / carer</b>		<b>Date</b>	

**Reason for withdrawing from Religious Education within AROE lessons (YEARS 10 & 11 – ONE LESSON EACH HALF TERM)**

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**Please include the arrangements you intend to make for alternative study during this lesson time:**

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**Any other information you would like the school to consider:**

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**Parent / carer's  
Signature**

**TO BE COMPLETED BY THE SCHOOL**

**Agreed actions from  
discussion between  
Head Teacher and  
parent/carers**

**Date implemented:**

**Monitored by:**

**Date of Review:**

**PLEASE RETURN THE COMPLETED FORM TO THE HEAD TEACHER,  
MR DAVID WRIGHT (dwt@woodlandsschool.essex.sch.uk)**