

**SPRINGVALE PRIMARY SCHOOL**

**01226 760930**

**Headteacher: Mr L McClure**

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@SpringvalePS

**Thursday 19th April 2018**

**Sunscreen Policy**

Dear Parent/Carer

**Use of Sunscreen in School**

With the weather improving, we would like to try and help protect the children against the effects of the sun, and would like your help in doing so please.

We ask that:

* As the weather warms up, you ensure that a high factor sunscreen (SPF 15+) is applied to your child **before school**. (This includes Nursery children)
* For children from Reception upwards (i.e. those who are in school for the whole day) please can you send a bottle of (non-aerosol) sunscreen, ***clearly labelled with the child’s name***, into school. This will be saved in class for the children to apply at lunchtime, as appropriate.
* To minimise the time this will take, we ask that you teach your child to apply the cream effectively. We recognise that younger children, or children with particular Special Needs may experience some difficulty in applying cream themselves, and staff will endeavour to assist in these cases if you are happy for us to do so. There is no legal requirement for staff to do this, and I am grateful to them for their support in this matter. As Nursery children are only in for a part of the day, applying cream before they arrive should suffice. We strongly recommend however that a waterproof cream is used as the children do engage in water based play.
* Please also send your child with a suitable cap/hat and clothing that protects as much skin as possible. Sun caps with the school logo on can be purchased via the office.

Please be sure to ask your child or, in the case of younger children, the teacher, whether the sun cream has run out.

If your child has a particular vulnerability to the sun which you would like us to be aware of, please advise the teacher in charge.

I ask that you complete the attached form so that the school has a record of your support for the sun safety procedures in school and your wishes with regard to sunscreen use by your child/ren.

Yours sincerely

Mr L W McClure

Headteacher

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**PUPIL DETAILS**

**Child’s Name: Class:**

**Please tick:**

I have read and support the content of the guidelines set out in this sunscreen letter.

I will provide my child/children with a non-aerosol sunscreen product for use at school and on off-site school visits, in accordance with school procedures.

I give my permission for approved teachers and support staff to apply sunscreen to my child/children when this is considered necessary.

**Signature of parent/carer…………………………………… Date…………………..**