Central School

PARENT CONFERENCE REQUEST

2009-2010

Dear Advisory Teacher:

I would appreciate the opportunity to conference with the following teachers:

_____

_____

_____

Please indicate if a phone conference or meeting in person is preferred.

_____ By phone #____(Home) _____

#____(Office) _____

_____ In person, on Friday, February 12

Please include your telephone number so that teachers may call to confirm a time.

_____

Phone Number

_____ _____

Parent Signature Name of Student

Please return this to your child's ADVISORY teacher by Thursday, February 4th.