

Young Scholars Academy

Parent-Teacher Conference Policy

Purpose

To ensure that communication of a child's social-emotional/academic progress is communicated to parent in a professional manner.

Scope

All Young Scholars employees and volunteers

Policy

All employee/volunteers are expected to utilize professional judgment when communicating to a parent, a child's social-emotional/academic progress.

The following guidelines must be followed:

1. Designated school personnel (parent-child mentors) are the only personnel given authority to provide parent(s) with information on child's behavior/performance.
2. Parent-Child Mentors are employees which have been designated by Principal.
3. Parent-Child Mentors are expected to comply with state and school policies on guidance and discipline.
4. Under no circumstance shall an employee contact a parent regarding a child's behavior/academic progress without prior written approval from school administration.
5. If a parent asks, "How did my child do today," all personnel can respond, "_____ enjoyed the amphibian activity we discussed in class today. Be sure to tell the parent to ask what the child learned about amphibians."
6. If a parent asks, "How was my child's behavior today," all personnel may respond, "We are working on developing listening, following rules the first time, putting our things away, following through on responsibilities, etc." Remember to keep responses general to the rules of our school/early childhood programs.
7. If a parent insists on acquiring information on their child's social-emotional/academic progress, suggest that the parent schedule a parent-teacher conference.
8. **All parent-teacher conferences must include a member of administration.**
9. All employees/volunteers are expected to support the philosophy of the school at all times.

Compliance

Failure to comply with this policy shall result in disciplinary action up to termination of employment with Young Scholars.

YSAFE Parent/Teacher Conference Request Form

School Name: Young Scholars **Date:** _____

Student: _____ **Grade:** _____

Parent/Caregiver: _____ **Language:** _____

Parent Contact Information (telephone #): _____

Teacher(s) participating in conference (name and subject taught):

1) _____

2) _____

3) _____

<i>Strengths?</i>	<i>Concerns?</i>	<i>Ideas for parent/student?</i>
<ul style="list-style-type: none"> <input type="checkbox"/> Asks for help <input type="checkbox"/> Attends class every day <input type="checkbox"/> Comes prepared with materials <input type="checkbox"/> Comes to class on time <input type="checkbox"/> Completes homework <input type="checkbox"/> Does well on tests <input type="checkbox"/> Gets along with other students <input type="checkbox"/> Has positive attitude <input type="checkbox"/> Is respectful towards adults <input type="checkbox"/> Listens well <input type="checkbox"/> Participates in class <input type="checkbox"/> Solves problems <input type="checkbox"/> Thinks creatively <input type="checkbox"/> Other: _____ 	<p>Student needs to:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Attend school every day <input type="checkbox"/> Be on time to class <input type="checkbox"/> Bring all materials <input type="checkbox"/> Remain seated during class <input type="checkbox"/> Complete class work <input type="checkbox"/> Participate appropriately <input type="checkbox"/> Communicate respectfully <input type="checkbox"/> Help others as needed <input type="checkbox"/> Be positive towards learning <input type="checkbox"/> Pay attention, focus <input type="checkbox"/> Complete homework <input type="checkbox"/> Other: _____ _____ _____ 	<ul style="list-style-type: none"> <input type="checkbox"/> 8-10 hrs of sleep; alarm clock <input type="checkbox"/> Attend After-School tutorials <input type="checkbox"/> Check homework log daily <input type="checkbox"/> Clean up backpack/locker <input type="checkbox"/> Daily Progress Report <input type="checkbox"/> Enroll in an after-school program <input type="checkbox"/> Get health check-up & follow up <input type="checkbox"/> Get phone #s of study buddies <input type="checkbox"/> Healthy breakfast & lunch daily <input type="checkbox"/> Obtain counseling: academic/social/emotional <input type="checkbox"/> Obtain/meet with adult mentor <input type="checkbox"/> Reward small improvements <input type="checkbox"/> Student Attendance Review Team <input type="checkbox"/> Student Success Team <input type="checkbox"/> Weekly Progress Report <input type="checkbox"/> Other: _____

Comments/Notes

Signatures

Parent/Guardian Sign/Date: _____ **Teacher Sign/Date:** _____

Teacher Sign/Date: _____ **Teacher Sign/Date:** _____

Teacher Sign/Date: _____ **Student Sign/Date:** _____

Principal Sign/Date: _____