

Parent Conference Form NS Jr./Sr. High School

Parent-teacher communication is an essential aspect of a child's education. The following questionnaire allows the parent to share information about his/her child with the teacher. It will help the teacher get to know each student and have a better understanding of the parent's concerns and expectations for the school year. The information will also help in planning a meaningful parent-teacher conference. Please complete the following form and send it back in to your child's homeroom teacher by: <u>Monday, November 4th</u>

Thank you for your help and cooperation! We look forward to meeting with you!

Student's Name:

Parent's Name:

Parent conferences will be held on <u>November 18th from 12:00 – 3:15</u> and then $\frac{4:00 - 5:45}{4:00 - 5:45}$. Please put a checkmark by the class period and write the name(s) of the teacher(s) below - within your child's schedule - which you would like to meet with on this date. Also include the 1^{st} , 2^{nd} , and 3^{rd} choice time that will be convenient. Conferences will be held in <u>15 minute intervals</u>. For example – please put 12:00, 2:15, 4:30, etc. on the line by meeting time. If you would have any questions, please feel free to call the office 570-874-0466. You will be notified when the final schedule is made.

 1 st Period Teacher - Name:	15 Minute Meeting Time:			
		1st Choice	2 nd Choice	3rd Choice
 2 nd Period Teacher - Name:	15 Minute Meeting Time:			
 3 rd Period Teacher - Name:	15 Minute Meeting Time:			
		1 st Choice	2 nd Choice	3 rd Choice
 4 th Period Teacher - Name:	15 Minute Meeting Time:			
 5 th Period Teacher - Name:	15 Minute Meeting Time:			
		1 st Choice	2 nd Choice	3 rd Choice
 6 th Period Teacher - Name:	15 Minute Meeting Time:			
			2 nd Choice	
 7 th Period Teacher - Name:	15 Minute Meeting Time:			
		1 st Choice	2 nd Choice	3rd Choice

Please answer the following questions to the best of your ability.

1. What are your child's academic strengths and interests? Is there anything specific you would like to discuss during our conference regarding your child academically, socially, personally, etc.?

2. In what outside/extracurricular activities does your child participate? Please include jobs and hobbies.

3. Any other concerns, comments or questions:

What is the best way for a teacher to communicate with you? (Please circle)

PHONE EMAIL OTHER: _____

Preferred Phone Number:

Preferred Email Address: