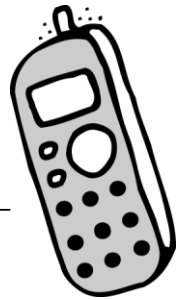
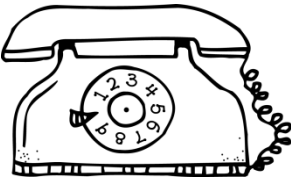


Parent Communication Log



Contacts with



(parent name)

(student name)

Date: _____ Time: _____ Method of Contact: <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Note <input type="checkbox"/> In Person	Reason for Contact:	Notes:
Date: _____ Time: _____ Method of Contact: <input type="checkbox"/> Phone <input type="checkbox"/> Email <input type="checkbox"/> Note <input type="checkbox"/> In Person	Reason for Contact:	Notes:
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