

Stevenson Middle School

Parent / Teacher Conference
Tuesday, November 20, 2018
12:00 - 3:00 p.m. OR 4:00 - 7:00 p.m.

Please indicate a preference for your conference time. Your child's advisor will confirm the time. Please come ahead of time to keep all the conferences on-schedule.

Return bottom form completed to your child's advisor. Your child's advisor will make a schedule and inform you of your assigned time.

PLEASE RETURN BOTTOM SECTION TO YOUR CHILD'S ADVISOR

Student's Name: _____ Advisor: _____

I would prefer: (Circle ONE)

12:00 - 1:00 p.m.	4:00 - 5:00 p.m.
1:00 - 2:00 p.m.	5:00 - 6:00 p.m.
2:00 - 3:00 p.m.	6:00 - 6:45 p.m.

Parent/Guardian Signature _____ Relationship _____

I need a translator for this conference - Yes _____ No _____

I have more than one child at Stevenson - Yes _____ No _____

Name _____ Grade _____ Advisor: _____

Name _____ Grade _____ Advisor: _____

For Teacher Use Only

Student's Name: _____ Advisor: _____

Assigned Conference Time: Tuesday, November 20 _____

Meet in Room # _____

Please come ahead of time to keep all the conferences on-schedule.