

## St. Bartholomew School

September, 2008

Dear Parents/Guardians:

Parent/Guardian-Teacher conferences are scheduled for students in all grades pre-school through eight on Tuesday, November 4<sup>th</sup>. The times set for these conferences are from 12:00 P.M. - 2:30 P.M. and then again from 4:00 P.M. - 7:00 P.M. Report cards will be handed out at this time. Hopefully, these selected times will accommodate everyone. Your child/children is/are encouraged to attend the conference with you. There will not be any classes for your child/children on Tuesday, November 4th. All money owed to the school, such as tuition payment plans, lunch ticket money, or library fees should be paid in full by this time.

Since your child/children encounter several teachers each week, and the conference times are limited, we will follow this procedure:

1. Parents/Guardians will fill in the bottom section of this form and return it to the homeroom teacher by **Tuesday, October 7, 2008.**
2. A conference schedule will be created that will schedule you for a ten minute conference with the one teacher you have indicated on this form. The teachers and I will do our best to coordinate your appointments if you have more than one child.
3. If after your conference, you have a desire to speak with another teacher or teachers, you may sign your name and phone number on a paper outside that teacher's door. A phone call will be made to you to either discuss your child's progress over the telephone or to set up a future appointment.
4. All conferences are scheduled at **ten-minute** intervals. If you believe that you will need more time, please arrange for another appointment on another day.

Thank you for your understanding and cooperation in this matter.

Yours truly,

Mrs. Linda L. Pricer, Principal

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Please complete this form and return it to the homeroom teacher by **Tuesday, October 7, 2008.** You will have one form for each of your children.

Please schedule our conference during the 12:00 P.M. - 2:30 P.M. time slot.  12:00 P.M. - 1:00 P.M.  
 1:00 P.M. - 2:00 P.M.  
 2:00 P.M. - 2:30 P.M.

**OR**

Please schedule our conference during the 4:00 P.M. - 7:00 P.M. time slot.  4:00 P.M. - 5:00 P.M.  
 5:00 P.M. - 6:00 P.M.  
 6:00 P.M. - 7:00 P.M.

I/We wish to meet with \_\_\_\_\_ . Please indicate the name of one teacher.

Parent/Guardian  
signature \_\_\_\_\_

Child's name \_\_\_\_\_ Grade \_\_\_\_\_ Homeroom \_\_\_\_\_