**STUDENT/PARENT/TEACHER CONFERENCE REQUEST FORM**

If you would like to meet with your child’s teacher at this time please complete the following request form. Please return by **November 2, 2018.**

***ONE FORM PER FAMILY***

Conference Days and Times – Please indicate 1st, 2nd and 3rd choices

Wed., Nov. 7 4:00 – 6:00 p.m. \_\_\_\_\_\_ 7:00 – 9:00 p.m. \_\_\_\_\_\_

Thurs., Nov. 8 4:00 – 6:00 p.m. \_\_\_\_\_\_

Family Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |
| --- | --- | --- | --- |
|  | Child’s Name | Grade | Teacher |
| 1 |  |  |  |
| 2 |  |  |  |
| 3 |  |  |  |
| 4 |  |  |  |

Please indicate if there is a special subject teacher you would like to meet at this time.

Mr. C. Fraser French Teacher: \_\_\_\_ Ms. K. Steele, SERT: \_\_\_\_\_\_

Mme. C. Gillis French Teacher: \_\_\_\_

Mr. S. Byrne, Itinerant Arts Teacher: \_\_\_\_\_

Mrs. J. Gladstone, Itinerant Arts Teacher: \_\_\_\_\_

Mr. A. McIntyre, Kindergarten Prep Teacher: \_\_\_\_\_

Confirmation of conference time(s) will be sent home indicating time of conference by

**Monday, November 5th.**