Conference Date: ______________________________  Time: ______

Teacher(s): ________________________________________________

Others in Attendance: _________________________________________

CONFERENCE NOTES
___________________________________________________________
___________________________________________________________
___________________________________________________________

FOLLOW-UP PLAN

What the student will do: ______________________________________
___________________________________________________________
___________________________________________________________

What the teacher will do: _____________________________________
___________________________________________________________
___________________________________________________________

What the parent will do: _____________________________________
___________________________________________________________
___________________________________________________________

Conference follow-up date: ________________________________

___________________________________________________________
Signature of Student

___________________________________________________________
Signature of Teacher(s)    Signature of Parent/Guardian(s)