

**STUDENT NAME:** \_\_\_\_\_

**Please indicate your preferences and return this to your child's 4<sup>th</sup> period teacher as soon as possible. We will begin scheduling appointments tomorrow.**

We recognize that some parents will not be able to attend conferences during the day. If you are able to attend a daytime appointment, please consider requesting block A or B. This will give us flexibility to work with all families. Thanks in advance.

Circle the choice that will work best for you.

<b>Block A</b> 11:30-1:00	<b>Block B</b> 1:00-3:00	<b>Block C</b> 4:00-5:30	<b>Block D</b> 5:30-7:00
<b>No Preference/Any Block Will Work</b>			

If you have concerns regarding your child's performance in a particular core class, please write the name of that class below:

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We will do our best to schedule your conference in that teacher's area.

**Next week, you will receive a confirmation with a specific scheduled time.**