October 9, 2017

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| Dear Parents/Guardians, It is time for our mandatory first quarter conference. We must meet with all families to discuss your child’s academic progress during the first nine weeks of school. **Please choose three times, numbering them by preference (1st, 2nd, 3rd), that you would be available to review your child’s progress.** Sign and return this letter. I will send a response to confirm your appointment time. We appreciate your cooperation and look forward to this very important opportunity to share your child’s successes. Mrs. Ramsey  | Child’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Parent’s Name \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Please contact Mrs. Ramsey at (980) 343-6076 if you cannot meet during these times. **Would you like to request a translator? Yes\_\_\_\_ No\_\_\_\_\_** **Language\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_** |

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| **Monday Oct. 23, 2017** | **Tuesday,** **Oct. 24, 2017** | **Wednesday****Oct. 25, 2017** | **Thursday,** **Oct. 26, 2017** |
| 4:00 \_\_\_\_\_\_\_\_\_4:20 \_\_\_\_\_\_\_\_\_4:50 \_\_\_\_\_\_\_\_\_ | 4:00 \_\_\_\_\_\_\_\_\_4:20 \_\_\_\_\_\_\_\_\_4:50 \_\_\_\_\_\_\_\_\_ | 4:00 \_\_\_\_\_\_\_\_\_4:20 \_\_\_\_\_\_\_\_\_4:50 \_\_\_\_\_\_\_\_\_ | 4:00 \_\_\_\_\_\_\_\_\_4:20 \_\_\_\_\_\_\_\_\_4:50 \_\_\_\_\_\_\_\_\_ |

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| **Saturday, October 28, 2017** | **Monday, October 30, 2017** |
| 9:15\_\_\_\_\_\_\_\_\_9:30 \_\_\_\_\_\_\_\_\_9:45 \_\_\_\_\_\_\_\_\_10:00\_\_\_\_\_\_\_\_\_10:15\_\_\_\_\_\_\_\_\_10:30\_\_\_\_\_\_\_\_\_ | 10:45\_\_\_\_\_\_\_\_11:00\_\_\_\_\_\_\_\_\_11:15 \_\_\_\_\_\_\_\_\_11:30 \_\_\_\_\_\_\_\_\_ | 8:15\_\_\_\_\_\_\_\_\_8:30\_\_\_\_\_\_\_\_\_8:45\_\_\_\_\_\_\_\_\_9:00\_\_\_\_\_\_\_\_\_9:15\_\_\_X\_\_\_\_\_\_9:30 \_\_X\_\_\_\_\_\_9:45 \_\_X\_\_\_\_\_\_10:00\_\_\_\_\_\_\_\_\_10:15\_\_\_\_\_\_\_\_\_10:30\_\_X\_\_\_\_\_ | 11:00\_\_\_\_\_\_\_\_\_11:15 \_\_\_\_\_\_\_\_\_11:30 \_\_\_\_\_\_\_\_\_11:45\_\_\_\_\_\_\_\_\_1:00\_\_\_\_\_\_\_\_\_\_1:15\_\_\_\_\_\_\_\_\_\_1:30\_\_\_\_\_\_\_\_\_\_1:45\_\_\_\_\_\_\_\_\_\_2:00\_\_\_\_\_\_\_\_\_\_2:15\_\_\_\_\_\_\_\_\_\_ |

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**Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Your conference has been confirmed for**

**Date:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Time:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**