

## Parent-Teacher Conference Record

Conferences are offered to parents two times a year, but parents can request a conference to discuss any concerns on an as needed basis. During conference times, each parent will receive information on their child's development and have the opportunity to set goals with teachers based on the results from the developmental assessments conducted by the teacher. This form is completed by the teacher and signed by the parent during the scheduled conference time.

Program Name: _____	Class: _____
Child's Name: _____	Age: _____
Teacher(s) Name: _____	_____
Conference Date: _____	Time: _____
Location (check one): <input type="checkbox"/> Center (in person) <input type="checkbox"/> Phone	

<u>To be completed by Teacher:</u>	
Strengths: _____	Areas for Growth: _____
_____	_____
_____	_____
_____	_____
How you can help: _____	_____
_____	_____
Assessment type: _____	Assessment results: _____
_____	_____

I acknowledge that I participated in the Parent-Teacher conference and was provided with the information above.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Teacher Signature

\_\_\_\_\_  
Date