Conference Meeting Notes

School: _____ **Time:** _____

Student: _____ **Date:** _____

Administrator: _____ **Grade:** _____

Teacher Initiated	_____	Parent Initiated	_____	Administrator Initiated	_____

Comments/Notes:

Student: _____ **Date:** _____

Student Goals & Plan for Improvement:
How can the teacher(s) help at school?
How can parent(s)/guardian(s) help at home?

Individuals Present

Printed Name	Signature	Position	Date