

**CJH Advisory SLC Schedule Sheet
March 23-27, 2009**

Parent/guardians;

Please see the times listed below. We will work to accommodate the best time for you and your child. Please select up to 3 time slots, numbering them 1, 2, 3 to indicate your preferred times. Your child's advisor will finalize the student-led conference schedule, and notify you of your final conference time.

Student name: _____

Parent/Guardian name: _____ **Phone Number:** _____

Monday March 23 2:35-2:55	Tuesday March 24 2:35-2:55	Wednesday March 25 2:35-2:55	Thursday March 26 2:35-2:55	Friday March 27 2:35-2:55

Tuesday evening, 6-8 p.m., March 24

6:00-6:20	6:30-6:50	7:00-7:20	7:30-7:50

If you are unable to attend, and are sending a family member, or other significant adult, please sign below.

<p>I will be unable to attend my child's scheduled Student-Led Conference. I give my permission to have:</p> <p>_____ meet with my child.</p> <p>(adult's name)</p> <p>I give my permission for my child to share information about his/her grades, academic performance, personal goals, etc. with the adult listed.</p> <p>Parent Signature: _____</p>
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