Parent, please sign and return to teacher.

Assignment Reminder: Behavior Reminder:

FAITH CO-OP Reminder Note

Date:
Student Name:
Dear Parent, in an effort to keep you informed about your child's progress in the classroom, you are receiving this reminder note. Please feel free to contact your child's teacher listed at the bottom of this form for more information.
Teacher, Name and Phone Number
I have read and discussed this note with my child.
Parent Signature

Teacher, please make a copy and give copy to Department Coordinator. Place original in family folder or hand to the parent. Parent will sign and return to you. Please retain for your records for the remainder of the school year.