



Memphis-Shelby County Schools

Parent-Teacher Conference/Home Visit Request PreK

School/Center: _____

Child's Name: _____

Teacher's Name: _____

Your scheduled day/time for a

☐ Parent Conference ☐ Home Visit

is:

Parents, please check a box below to indicate your scheduling preference.

- ☐ **I will attend** the parent-teacher conference or home visit at my scheduled times as described in this request letter.
- ☐ **I would like to meet that day but need a different time of**_____.
Please contact me at _____ to let me know if I can come at the new time.
- ☐ **I would like to meet with you on a different day.**
Please contact me at _____ to schedule the date and time.
- ☐ **Home Visits: I would like to meet somewhere other than my home.**
Preferred location: _____

****Parent's Signature:** _____

PLEASE return this form to school within one business day.