

DIVISION OF EARLY CHILDHOOD PRE-K PARENT-TEACHER CONFERENCE FORM



	FALL	SPRING	EXIT
Child's Name:		Parent's Name:	
			r:
Conference Date:S	Start Time:	End Time	Format: In-Person Virtual
TOPICS to DISCUSS			
☐ In-class Progress: How stud readiness skills	ent performs on a regu	lar basis; student par	ticipation; show/discuss student work samples;
☐ Academic Expectations: Re Grade Commitment	ading/Math Nine Week	/Semester; End of Ye	ear; Kindergarten Readiness Inventory (KRI); Third
☐ Attendance: Regular/Irregula	ar; On-time/Tardy		
☐ Student's Special Needs/Concerns: Social, emotional, academic, behavior, excessive sleepiness, toileting, etc.			
☐ Medical Needs/Concerns: Vision, hearing, speech, asthma, upcoming health/immunization status, etc.			
☐ Home Connection/Parent's Focus Skill(s) Select all that apply.			
Academic:			
<u></u>			
☐Physical:			
<u></u>			
Summary of Parent-Teacher Conference			
Child's Area(s) of Strength: [] Attends class every day; [] Gets along well with others; [] Has a positive attitude; [] Participates in class; [] Solves problems; [] Listens well; [] Thinks creatively; [] Models advanced language; [] Is respectful towards others; [] Has leadership qualities Other Area(s) of Strengths:			
Child's Area(s) to Strengthen/Improve: [] Attend [] Listens well; [] Thinks creatively; [] Models adv. Other Area(s) to Strengthen:			[] Has a positive attitude; [] Participates in class; [] Solves problems; [] Has leadership qualities
Parent's Learning Goal(s) for Student: By	, my cl	hild,	will
Teacher's Learning Goal(s) for Student: By			will
What will the parents do to ensure the student a	achieves the learning go	al(s)?	
Parent Signature:			Teacher Signature: