



Conference Notes

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|---------------------|--|---------------------|--|-------|--|
| Name | | Student ID | | Grade | |
| School | | Parent/ Guardian | | Date | |
| Purpose of Meeting: | | | | | |
| Discussion: | | | | | |
| | | | | | |
| Summary/Next Steps: | | | | | |
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The signatures below represent individuals who were in attendance at the meeting. Printed names alone represent individuals who participated in the meeting via individual or conference telephone call, video conferencing or other similar method.

If the discussion was for a student with a disability (IEP or 504), parents/guardians/adult student should check No or Yes in response to the following question. Additionally, the parent/guardian/adult student's signature acknowledges the No or Yes response:

Did any school personnel prohibit, discourage or attempt to discourage the parent/guardian/adult student from inviting a person of their choice to today's meeting? No Yes

| Meeting Participants | | |
|----------------------|-------|-----------|
| Name | Title | Signature |
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Distribution: School, Parent/Guardian/Student, Portfolio, Cumulative Folder