APPOINTMENT REQUEST SHEET
Parent/Teacher Conferences 2007
Tues., Oct. 16th and Wed., Oct. 17th
3:00pm - 9:00pm

Parent/Teacher Conference Procedures: Please indicate below the teacher(s) you would like to meet with and the date and time preferred. **Your student must take this request sheet to each teacher(s) you have indicated between October 3rd through October 5th.** Teachers have set up their dates and times when they will be available for conferences and will do their best to accommodate your request. The teacher(s) will indicate the date and time they can meet with you and return this sheet to your student. If there is a conflict with the date or time, please contact the teacher(s) at 784-7300 or via e-mail at www.wnhs.org

Student Name: _____

Parent Name & Phone: _____

TO BE COMPLETED BY PARENT

Requested Teacher	Date Preference	Time Preference	Alternate Date

TO BE COMPLETED BY TEACHER

Teacher's Name	Date	Time	Room #