Time Start: _____: _____ AM PM

Time End: _____: _____ AM PM

SANTA MARIA INDEPENDENT SCHOOL DISTRICT
PARENT CONFERENCE

PARENT _____ DATE _____

Today a conference was held with the above named parent concerning the matters which are indicated. A summary of this conference is stated.

Those involved in the conference:

_____

_____

Reasons for the conference:

_____

_____

_____

Directions or suggestions:

_____

_____

_____

Parent's comments:

_____

_____

_____

The parent's signature is only an indication that a conference was held.

Parent Signature _____Date _____

Administrator Signature _____ Date_____

Superintendent Signature _____ Date_____

It is the policy of Santa Maria ISD not to discriminate on the basis of race, color, national origin, sex or handicap in its vocational programs, services or activities as required by Title VI of the Civil Rights Act of 1964, as amended; Title IX of the Education Amendments of 1972; and Section 504 of the Rehabilitation Act of 1973, as amended.