



# Parent Engagement Activities Log

## School Year 2024-2025

Office of the Superintendent: *Communication and Stakeholder Engagement*

SCHOOL NAME: Fulton PreK-5

REPORT MONTH: December 2024

FACE COORDINATOR NAME: Abigail Pekelnicky

Date	Time Spent on Activity (Required)	Event Name, Meeting Type, Communication Type and Brief Description (including location)	Childcare Provided? Y or N	Food Provided? Y or N	Interpreter provided? Y or N	Communication Method(s) (How was this event communicated to parents & students)? Ex. Flyer, morning announcements, phone calls from teachers etc.	Feedback from Parents (How did the school collect feedback from parents)? Ex. Survey, comment box, signature sheet w/room for comments etc.	# Parents in attendance (if applicable)	Total # of Participants (if applicable)
12/9/24	2:15pm-3:30pm	Winter Concert	N	Y	N	Email, Flyer, Talking Points	Verbal Feedback	60+	
12/11/24-12/13/24	8:30am-3:30pm	PTA Holiday Gift Shop	N	N	N	Robocall, flyer, PTA Facebook	Verbal Feedback, signature sheet	14	300+
12/17/24	5:00pm-6:30pm	PSCC/PTA Meeting Holiday Celebration	Y	Y	N	Talking Points, Robocall, Peachjar, Flyer	Verbal Feedback, email	13	28
12/18/24	9:30am-11:00am	Fulton Festival of Lights	Y	N	N	School calendar, Talking Points	Verbal Feedback	8	300+

Please indicate the number of parents who volunteered in your school this month: 14

Please indicate the number of community members who volunteered in your school this month: 5

Principal Signature: [Signature]

Date: 1/2/25

FACE Coordinator Signature: [Signature]

Date: 1/02/25