JACKSON PUBLIC SCHOOLS
Transforming lives through excellent education

Parent and Family Engagement Center
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PARENT & FAMILY ENGAGEMENT CENTER

156 N Flag Chapel Road | Jackson, MS 39209 | (601) 960-8945
Keila R. Adams, Parent & Family Engagement Specialist

STUDENT PRESCRIPTION SHEET

DATE: _____

PARENT'S NAME: _____

PHONE: _____ **PARENT'S EMAIL:** _____

ADDRESS: _____ **ZIP CODE:** _____

STUDENT NAME: _____ **MSIS NO.:** _____

TEACHER: _____ **GRADE:** _____ **SCHOOL:** _____

ACADEMIC SERVICES NEEDED:

1.	6.
2.	7.
3.	8.
4.	9.
5.	10.

COMMENTS:

_____

_____

_____

_____

X_____ _____
Signature of Requestor/Title Date of Request

X_____ _____
Signature of Parent (To Be Signed Once Items Are Received) Date of Received

NOTE: This form may be completed by the classroom teacher, teacher assistant, or parent and/or guardian, then taken to the Parent & Family Engagement Center by the parent to pick up the materials.