Please fill out and return this page to your child's teacher:

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Student's Name:		Grade:	leacher	
 Student's Comments My best work is: 				
My goal for improvement is:				
 Parent's/Guardian's Comment My child has improved 				
 I will help my child to: 				
 I have received this report card. I would like to discuss this report card. Please contact me 	Parent's/Guardian's n (Please print)	ame	Signature _ X	Date