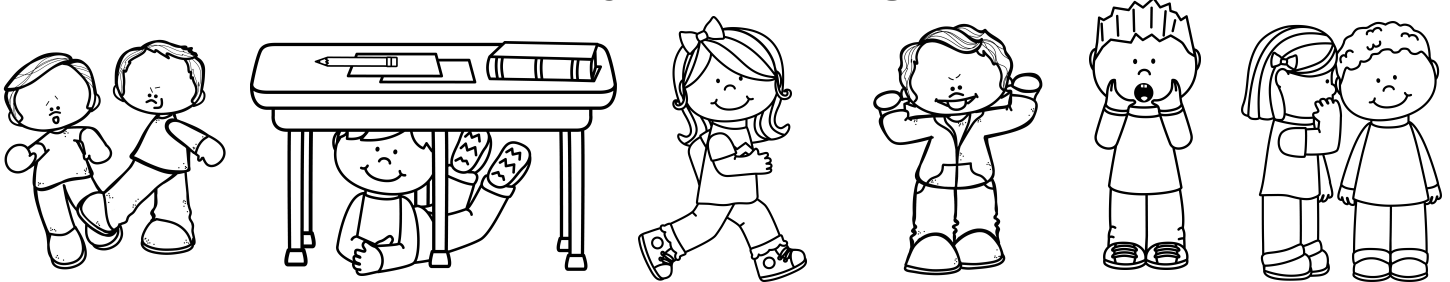


Conference Form

Student: _____ Teacher: _____ Date: _____

1. What behavior stopped your learning?

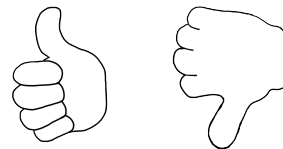


2. What did you want?

3. What will you do next time?



4. Are you ready to return to class?



Comments

Parent Signature Required: Yes No

Parent Signature