

Parent Concern Form

The School of Arts & Enterprise

Part I – To be completed by the parent, guardian, or custodian

INFORMATION:

Parent Name:	Address:	
Student Name:	City:	
(First/MI/Last)		
	State/Province:	Zip Code:
Telephone:		
	E-Mail Address:	
Cell Phone		

State Concern: (Attach additional sheets and documentation if necessary)

Action Requested: (Attach additional sheets and documentation if necessary)

Part II – To be completed by Administration

Date Received:	Initials:	
Date Contact Made:	Date of Meeting:	
Action on Concern:	Granted	
	Denied	
	(Attach additional sheets and documentation if necessary)	
Comments:	Signature:	
	Date:	
	Reason:	
	If you wish to request a review of the decision of the principal, you may do so by forwarding this completed form with a note explaining your reason for disagreement to the President of the Governing Board of Directors	

Parent Signature

Date/Time

Director's Signature