



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

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:	<input type="checkbox"/> Granted <input type="checkbox"/> 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

Date