

# Welcome Back!

Dear Parents,

August 8<sup>th</sup>, 2019

Welcome back to school! I hope you all had a wonderful summer filled with many fun experiences. We are very excited about this school year and can't wait to begin working with you and your child to ensure a successful and positive academic school year.

As we begin the 2019-2020 school year I want to share with you an opportunity to support your child's individual growth and academic success. I will be inviting all students and their families to meet one-on-one with me to develop a personal performance plan. This plan will be made up of three goals; An academic goal, behavioral or social goal and a personal goal. The purpose of creating a personal performance plan is to provide your child an additional layer of support and show them that together you and I feel their personal success is valuable and important.

The personal performance plan will be student led, meaning that the students decide their own goals. At the same time I will reinforce their efforts to reach this goal using an incentive program and I can share with you resources and ideas about how you can reinforce their efforts at home too. Additionally, your child's teacher will also be included in this process and we will share your child's most recent assessment data.

Our next step is to personally meet in the next couple weeks. If you have multiple children please plan on meeting with me for approximately 15 minutes per child.

Attached to this letter you will find a calendar. Please select a 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> choice for our meeting and times that are convenient for you and your family.

Please return this to your child's teacher as soon as possible.

Thank you! Ms. Hochheim

Please indicate your 1st, 2nd and 3rd choice (Please See Example Below) in the top right box of the calendar date you select. Then write times that are convenient for you in the box. If you need an evening appointment or weekend appointment please do not hesitate to state that on this form, we will do everything possible to accommodate your schedule.

**Parent Name:**

**Student(s) Name:**

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**Circle Grade Level(s):**

**P k 1 2 3 4 5 6 7 8**

**Phone Number for confirming the appointment date/time:**

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# August

Sun	Mon	Tue	Wed	Thu	Fri	Sat
4	5	6	7	8	9	10
			8:00-10:00am anytime after 6:30 PM		Anytime between 9:00 and 3:00PM	
11	12	13	14	15	16	17
				Anytime after 4:00 PM		
18	19	20	21	22	23	24
25	26	27	28	29	30	31

EXAMPLE

Sun	Mon	Tue	Wed	Thu	Fri	Sat
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	31