

BOARD OF COOPERATIVE EDUCATIONALSERVICES
SOLE SUPERVISORY DISTRICT
FRANKLIN-ESSEX-HAMILTON COUNTIES

**PERSON IN PARENTAL RELATIONSHIP REQUEST
FOR AN INFORMAL CONFERENCE**

If you desire to request an informal conference, complete the following:

An informal conference is hereby requested in relation to the removal of:

_____ (*student*) from the class of

_____ (*teacher*) on _____ (*date*).

Date: _____

_____ Person in Parental Relationship

.....
The informal conference was held on _____ (*date*). A summary of the conference is as follows:

_____ Person in Parental Relationship

.....
The informal conference was held on _____ (*date*). A summary of the conference is as follows:

_____ Person in Parental Relationship