



The Parent Academy Workshop/Event Sign-in Sheet

Spanish__ English__ Haitian-Creole__



Title:	Date:	Time:	Location:	Presenter:
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Please **PRINT CLEARLY** and indicate if parent has a **student** who is in **ESOL** or is a **Recently Arrived Immigrant** (RAI-has lived 3 years or less in the US)

Parent Name	Email	Telephone	Student Name	School	ESOL	RAI

Please mail the original sign-in sheets to The Parent Academy office at Mail Code 9619, room 226

Please be advised you may be photographed or video taped at this event for use by the media, brochures, videos, and on the M-DCPS Web site