

Teacher _____

**PARENT-TEACHER CONFERENCE
EVALUATION FORM**

Subject _____
Number of Conferences held Tuesday- 1st Day _____
Thursday- 2nd Day _____

Subject _____
Number of Conferences held Tuesday- 1st Day _____
Thursday- 2nd Day _____

Subject _____
Number of Conferences held Tuesday- 1st Day _____
Thursday- 2nd Day _____

Subject _____
Number of Conferences held Tuesday- 1st Day _____
Thursday- 2nd Day _____

Subject _____
Number of Conferences held Tuesday- 1st Day _____
Thursday- 2nd Day _____

Please add any additional subjects and corresponding conferences held:

Also, add telephone conferences: _____

Total - 1st Day _____
Total - 2nd Day _____
TOTAL _____

Comments:

Suggestions:

Please submit to the principal's office before you leave on Thursday night.