

## PARENTS AND STUDENT INFORMATION

PLEASE DETACH THIS PORTION OF THE SYLLABUS AND RETURN THIS FORM TO MRS. TIRADO BY **AUGUST 16, 2021.**

• Student's Name \_\_\_\_\_

• Parent/Guardian's Name \_\_\_\_\_

• Relationship to Student \_\_\_\_\_

• Home Phone Number \_\_\_\_\_ ☐

• Parent Cell Number: \_\_\_\_\_ ☐

• Work Number \_\_\_\_\_ ☐

Please check the number(s) where I can most easily reach you during the day.

• Parents' Email(s):

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• Does your son/daughter have regular access to:

☐ a computer? ☐ Internet? ☐ a printer?

Is there any important information that you would like me to know about your child?

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Success requires support from all stakeholders: students, parents, teachers, administrators, and counselors. By signing below, you are indicating that you have read all the information in the Syllabus and are completely aware and understand the procedures in Mrs. Tirado's Spanish class.

**STUDENT:**

I have read the syllabus and understand all that is expected from me. I agree to organize my time and work diligently and give extra effort to successfully complete the Spanish course. I agree to seek help from Mrs. Tirado as soon as possible if there is something that I do not understand or I'm struggling with.

\_\_\_\_\_  
(Print)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)

**PARENT:**

I have read this syllabus and understand all that is expected from my child. I agree to be familiar with the Spanish course requirements and to help my son/daughter organize study time in support of class assignments. I will notify the teacher immediately of any concerns that I have relating to the class or my child's progress. I also agree to all the requirements of the class.

\_\_\_\_\_  
(Print)

\_\_\_\_\_  
(Date)

\_\_\_\_\_  
(Signature)