



MORTON HIGH SCHOOL

350 NORTH ILLINOIS AVENUE
MORTON, ILLINOIS 61550-2299
(309) 266-7182 FAX (309) 263-2168

Dennis A. Johnson
Principal

Greg Prichard
Administrative Assistant
Athletic Director

Brian Gordon
Administrative Assistant

Brooke Merker
Administrative Assistant

August, 2007

Dear Parents/Guardians:

First semester parent-teacher conferences are scheduled for Thursday, November 1, and Friday, November 2. (Note that there will be no school on either day)

In order that we may efficiently schedule the conferences, please fill out the form on the next page and return it to Barb Aberle in the Morton High School main office starting **Sept. 24th thru Friday, October 26.** You may drop it off or mail it. The address is Morton High School, 350 N. Illinois Avenue, Morton, IL 61550

Your conference times will then be confirmed with the information mailed back to you starting Oct. 1st.

You can pick up the parent/teacher conference form in the main office from 7:30 a.m. to 4:00 p.m.

Requests for appointments will be processed on a first come-first served basis, so it is to your advantage to return the form ASAP. You only need to schedule appointments for the teachers with whom you want to meet.

Thursday, Nov. 1, appointments will be from 8:00 -Noon, 1-4:00 p.m. and 5-6:00 p.m. scheduling every 15 minutes.

Friday, Nov. 2, appointments will be from 8:00-Noon. scheduling every 15 minutes.

We are also asking that you list below the times that you are available each day by 1st choice, and 2nd choice.

Parent-teacher conferences are an important communication tool in your child's educational experience. These conferences provide you with an opportunity to discuss with teachers your student's work habits, organization, attitude, and performance. We believe that these meetings will be beneficial and look forward to seeing you on either of those days.

Sincerely,


Dennis Johnson, Principal

MORTON HIGH SCHOOL
PARENT/TEACHER CONFERENCES
November 1st and 2nd, 2007

Mail to: (your name and address)

Telephone Numbers:

Home _____

Work _____

Cell _____

Student Name _____

Parents Attending Conference _____

Date: Please mark you 1st
 Choice, 2nd choice

Time of day: Mark your choice
 of time: 1st choice
 2nd choice

Anytime _____
 Either day _____

Thursday, November 1 _____

8:00-11:45 AM _____

1:00-4:15 PM _____

5:30 – 6:45 PM _____

Friday, November 2 _____

8:00-11:45 AM _____

Teacher's Names (list below)

1. _____
2. _____
3. _____
4. _____
5. _____
6. _____

For office use only

Room # Time Date of conference _____

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

Please return form to Barb Aberle, Morton High School, 350 N. Illinois Ave., Morton, IL 61550.