

# 2018 – 2019 Parent Information Form

Dear Parent or Guardian:

Our class website (<http://mrsolsenmath.weebly.com/>) will be an invaluable resource for you to keep track of what is going on in your student's math class. Please make use of it and encourage your student(s) to as well, as it is designed for them to access notes, assignments, handouts, answer keys to tests and quizzes, as well as view a calendar with important upcoming dates. I also strongly encourage you to talk with your student(s) about his/her feelings on this course throughout the year and to help him/her monitor his/her own progress.

You can support your student's efforts and increase success by:

1. Asking your student what they learned in class that day,
2. Emphasizing the importance of practice and hard work. Please help him/her establish a time and place (away from the television) to complete his/her daily practice problems if they seem to be struggling on assessments. Practice problems are assigned almost every night, and
3. Staying up to date with your student's progress by checking grades posted on PowerSchool at least every two weeks.

It is important that all students and guardians understand the policies of this class, specifically the necessary materials, unique grading policy, and ways and times to get additional help from me. Please take a moment to go over your student's syllabus with him or her so you are familiar with this course and what is expected from your child.

Please feel free to contact me if you have any questions now or throughout the year:

Email: [molsen@cicsnorthtown.org](mailto:molsen@cicsnorthtown.org)

Day phone: 773-478-3655 ext 6023

Sincerely,  
Mrs. Melissa Olsen

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Student Name: \_\_\_\_\_

Class Period: \_\_\_\_\_

## **Parent/Guardian #1:**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Preferred Phone Number to Call: \_\_\_\_\_

This phone number is my (circle one): Cell Phone      Home Phone      Work Phone

Preferred e-mail address to contact: \_\_\_\_\_

Preferred method of contact (circle one):      Phone      E-mail

Preferred language spoken (circle one):      English      Spanish      Urdu      Other: \_\_\_\_\_

## **Parent/Guardian #2:**

Name: \_\_\_\_\_

Relationship: \_\_\_\_\_

Preferred Phone Number to Call: \_\_\_\_\_

This phone number is my (circle one): Cell Phone      Home Phone      Work Phone

Preferred e-mail address to contact: \_\_\_\_\_

Preferred method of contact (circle one):      Phone      E-mail

Preferred language spoken (circle one):      English      Spanish      Urdu      Other: \_\_\_\_\_

**Parents/Guardians, please answer the following questions about your student:**

Please take a moment to describe your student's personality. Is your student shy, outgoing, a leader, etc.?

Do you anticipate any concerns or needs for your student? For example, do you believe your student will need extra tutoring, reminders to stay focused, or other similar needs?

When you think of your son or daughter, what type of future do you see for your child? Do you see your child becoming a lawyer, going into the military, being a parent?

Please use the space below to address any other questions or concerns.

**Mrs. Olsen loves to take pictures and videos of what is going on in our classes and post them for you to see. Names and personal information are never tied to any photos or videos that may be posted to our class website. Please check one of the boxes below.**

- I give Mrs. Olsen my permission to post pictures or videos of my student to our class website.
- I do not give Mrs. Olsen my permission to post any pictures or videos of my student to our class website.

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*By signing below, I acknowledge that we have received and reviewed the [SY18-19] course syllabus for Advanced Algebra and we understand the expectations and requirements for successful completion of the course and agree to follow the guidelines set forth therein. I understand that I may contact Mrs. Olsen if I have any questions or concerns.*

Parent/Guardian Name (Printed): \_\_\_\_\_

Signature: \_\_\_\_\_ Date: \_\_\_\_\_