August 2025 8:95-E2

Community Relations

or

Exhibit - Verification of School Visitation

To be completed by the parent/guardian ar	nd given to the Building Principal. Please print.
This document serves to verify that the classroom activity for his or her child held	named parent/guardian attended a school conference on the date and time indicated below.
Student	Conference/Classroom activity
Parent/Guardian name	Date/time of conference/classroom activity
Parent/Guardian signature ************************************	**********
To be signed by the Building Principal and	l returned to the parent/guardian.
Building Principal signature	Date
APPROVED:	

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