

Student _____ Date _____

Comments: **Child Name:** _____ **Grade:** _____ **Teacher:** _____
Incomplete assignments may indicate difficulty with certain concepts. Please take time to read, sign and review. Also, please let your teacher know about the concern what they can do to better help your child. I thank you.

Subject: Child Name: _____ Date: _____	Handwriting: _____ Spelling: _____ Reading: _____ Math: _____ Science: _____ Health: _____	E-mail: _____ I will fix this problem by: _____ _____	Response: _____ _____
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Student Signature: _____ Parent Signature: _____

(Please write your name on the back signature line)

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