



**LOURDES SCHOOL QUEZON CITY
High School Department**

APPOINTMENT SLIP

Date: _____

Dear _____:

May I make an appointment with you on _____
(Date)
at _____ to discuss the academic/disciplinary standing of my son/daughter
(Time)
_____ of _____.
(Student's Name) (Grade & Section)

May I also be given the chance to talk with the other teachers of my son/ daughter through you.

Respectfully yours,

Signature Over Printed Name of Parent/Guardian

Telephone/Mobile Number/s

RETURN SLIP

Date: _____

Dear: _____

_____ I am pleased to see you as scheduled.

_____ May I meet you on _____ at _____

Respectfully yours,

Teacher