The Empowered Parent and Family Member Report Card

Participant's Name:

Child's Name:			
Teacher(s):			
Subject/ Topics	Grade/ Scoring	Comments	
PARENTING			
LEARNING AT HOME			
VOLUNTEERING			
DECISION-MAKING			
COMMUNITY INVOLVEMENT			
COMMUNICATING			
N	ext Steps/ S.M.A.R.T	T. Goals	
Completion date:			
Signature		Date	
Signature:		Date:	

The Family-School Partnership Program