

# DUE WITH OPENING REPORT

Please fill out front and back of this form

## SCHOOL BOARD

School Year \_\_\_\_\_

\_\_\_\_\_  
SCHOOL NAME

\_\_\_\_\_  
SCHOOL FAX #

\_\_\_\_\_  
SCHOOL PHONE

\_\_\_\_\_  
SCHOOL E-MAIL

### Chairperson:

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

Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Bus. Phone: \_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

### Treasurer:

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

Home Phone: \_\_\_\_\_

Address: \_\_\_\_\_  
\_\_\_\_\_

Cell Phone: \_\_\_\_\_

E-mail: \_\_\_\_\_

### Home & School Leader:

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

Phone: \_\_\_\_\_

School Board Meetings: \_\_\_\_\_ (Day & Time of Meetings)

Home & School Meetings: \_\_\_\_\_ (Day & Time of Meetings)

NAME	ADDRESS	PHONE	E-MAIL