LAFAYETTE PARISH SCHOOL SYSTEM
SPECIAL CONFERENCE FORM
SESSION 20 - 20

Employee: _____ School: _____

I. Conference Notations:

a. Date of Conference _____

b. Persons Present _____

c. Points Discussed

II. Administrator's Comments:

III. Employee's Comments:

IV. Request For Personnel Assistance: ☐ Yes ☐ No

Signature of Administrator: _____

Title: _____ Date: _____

I have read and discussed the content of this special conference form. My signature denotes neither agreement nor disagreement. It does indicate that I have received a copy of this form.

Signature of Employee: _____ Date: _____

Copy Distribution: Official Personnel File Administrator Employee 11/2009