

Interactive Notebook Signature Page

Sign and Turn IN

Last Name (print neatly) _____ Period _____

STUDENT:

I understand the purpose of the Science Interactive Notebook and will try my best to keep my notebook up-to-date and complete. If I fall behind, I will quickly seek out time after school to get caught up.

Student Name _____ (Print)

SIGNED _____ (Student Signature)

Date _____

PARENTS:

I have read the above information. I understand the purposes of the Science Interactive Notebook and will encourage and monitor my student's completion of notebook work. I will support make-up time after school if necessary. (Note: The best way to communicate with the teacher is by email through www.paloverde.org. or the teacher website)

PARENT SIGNATURE _____

Date _____

Parent E-mail contact information _____