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Dear Parent(s),		
Today in class had trouble following some rules and directions. Below you will find boxes checked to indicate which rules he or she struggled with today. If you are receiving this letter, it means your student had 3 or more times today that he or she was not following the rules.		
Please have a discussion at home with your child about following these rules and return this letter to me signed tomorrow. I have included a space for parents to sign, as well as a place for your student to sign (or write his or her name).		
Thank you for you support at home to help keep our classroom a positive, learning environment.		
Blessings, Miss Wilson		
	Making noise during quie	t work time
	Talking out of turn	
	Wearing a hood or hat inside	
	Getting out of his or her	seat
	Tilting or leaning his or l	ner chair
	Not keeping hands to se	f
	Parent Signature	Student Signature/Name