

REQUESTING CONTACT FROM CSEE...

Please complete this form to meet or speak with a member of the CSEE staff. Your request will be forwarded to that individual. We will do our best to reach you within 48 hours.



I WOULD LIKE TO BE CONTACTED BY: _____

My Name: _____

Today's Date: _____

TIME: _____

My Child's Name: _____

Grade/Class: _____

- I would like to **speak** with you. Please call me.
- I would like to **schedule an appointment** to meet with you. You may **call me** or **email me** for further details about our meeting.

My Telephone: _____

Best time/s to call: _____

Email: _____

Reason for Contact:

- School-Related Matter
- Personal
- Other reason/s (describe briefly): _____

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