

## PERSONALIZED LEARNING DAYS



## K-5 Attendance Form:

Due Wednesday,11/6/2024

| Student First Name:  | School:           | Grade:       |
|--|-------------------|--------------|
| Student Last Name:   | Homeroom Teacher: |              |
| 1. Please CIRCLE all experiences you participated in on the <u>BACK</u> of this paper. |                   |              |
| 2. Reflection: Describe or draw a picture learn? What did you like? What did you       |                   | What did you |

Parent/Guardian signature:

Parent/Guardian feedback (optional):

