

**St. Thomas the Apostle School
Academic Deficiency Notice**

Student's Name _____ Date _____

Reporting Teacher _____ Student's Grade/Homeroom _____

Subject _____ Quarter _____

Lack of Preparation:

- () Missing or incomplete homework (third instance) _____
- () Major project not completed _____
- () Unprepared for class _____

Action Taken:

- () Warning
- () Parent Conference is Requested at _____
- () Student Referred to Administrator

Comments: _____

Parent/Guardian:

I have reviewed this Deficiency Notice with my child.

Parent/Guardian Signature

Date

Please print a copy, sign, and return it to the issuing teacher by the next school day. Any questions concerning this notice should be directed to the issuing teacher.

