

Parent Committee Minutes

Date: _____ Time: _____

Center or Home Based Location: _____

Members Present:

Staff: _____
Staff: _____

Committee Meeting held at: _____

Information about events in the community shared by Family Advocate(s):

Old and New Business, Action Taken, Assignments made:

Report from Policy Council Member:

Policy Council Minutes were available? YES NO
Concerns or input from parent committee for Policy Council to consider:

Family Events Planned:

Event: _____ Date: _____

Time: _____ Location: _____

Budget Amount: _____ Speaker (if applicable): _____

Items to be purchased: _____ Food to be served: _____

Event: _____ Date: _____

Time: _____ Location: _____

Budget Amount: _____ Speaker (if applicable): _____

Items to be purchased:

Food to be served:

Event: _____ Date: _____

Time: _____ Location: _____

Budget Amount: _____ Speaker (if applicable): _____

Items to be purchased:

Food to be served:

Event: _____ Date: _____

Time: _____ Location: _____

Budget Amount: _____ Speaker (if applicable): _____

Items to be purchased:

Food to be served:

Next Parent Committee Meeting Date: _____ **Time:** _____

Location: _____

Additional Notes: _____

Parent Committee Chair Signature: _____

Complete a volunteer sign-in sheet for the meeting. After the meeting, make copies, one for each member of the Parent Committee and one for the Family Advocate. Please staple the original Parent Committee minutes and the original volunteer sign-in sheet together and mail to C.O. within 5 days of the meeting.