

Dear Parents,

Please fill out the contact information below and return to me by the first week of school.

The form below will help me greatly. Hold on to the lower portion for your records.

Thanks!



Mrs. Michelle Murphy

Your child's name _____

Parent/Gaurdian Names _____

Mom

Dad

How does your child get home from school?

Bus #

Walk

Parent/ Family Member

Email address best to be contacted at: _____

How often do you check your email? Daily___ Weekly_____ Not often_____

Would you like weekly updates about class activities and assignments via email? Yes_____ No_____

Home Phone_____ Cell (if you would like me to call it)_____

When is a good time to contact you? _____

Mrs. Michelle Murphy's Information for Your Records:

School phone: 920-757-7140 extension 51106- I check my voicemail daily.

Email address: michellemurphy@hasd.org I also check this daily, although usually don't get to see the emails until the afternoon. If you have a message that is **urgent**, please call the office so they can contact me right away.