

**STUDENT SUPPORT SERVICES**  
**PASS TO ROOM C-149: Mrs. L. Demory**

Student \_\_\_\_\_ Date \_\_\_\_\_ Time \_\_\_\_\_

Teacher \_\_\_\_\_ Subj. \_\_\_\_\_ Rm \_\_\_\_\_ Prd \_\_\_\_\_

<input type="checkbox"/> DAILY ASSIGNMENT <input type="checkbox"/> TAKE TEST/QUIZ <input type="checkbox"/> HAVE TEST READ ALOUD <input type="checkbox"/> WORK ON PROJECT <input type="checkbox"/> RESEARCH PAPER <input type="checkbox"/> STUDY <input type="checkbox"/> OTHER _____	<b>STUDENT MAY USE:</b> <input type="checkbox"/> TEXTBOOK <input type="checkbox"/> NOTES/HANDOUTS <input type="checkbox"/> CALCULATOR <input type="checkbox"/> DICTIONARY/SPELLING AIDES <input type="checkbox"/> INTERNET <input type="checkbox"/> OTHER _____
<input type="checkbox"/> SEND COMPLETED ASSIGNMENT/TEST BACK WITH STUDENT <input type="checkbox"/> STAPLE TEST IN HALF AND RETURN WITH STUDENT <input type="checkbox"/> PLACE COMPLETED ASSIGNMENT/TEST IN TEACHER'S FOLDER	

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**STUDENT SUPPORT SERVICES**  
**- RETURN PASS -**

Student \_\_\_\_\_

Date \_\_\_\_\_

Teacher \_\_\_\_\_

Room \_\_\_\_\_

<input type="checkbox"/> COMPLETED ASSIGNMENT/TEST <input type="checkbox"/> DID NOT COMPLETE ASSIGNMENT <input type="checkbox"/> THE ASSIGNMENT/TEST WAS FILED IN TEACHER'S FOLDER AS REQUESTED <input type="checkbox"/> THE ASSIGNMENT/TEST WAS STAPLED IN HALF AS REQUESTED
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**SIGNATURE TEACHER/PARAPROFESSIONAL** \_\_\_\_\_ **TIME** \_\_\_\_\_

COMMENTS \_\_\_\_\_

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