



JCPS Parent Advisory Council Representative Form

Mission Statement: To involve families, schools, and the community in the educational success of all children through unified active participation, clear understanding, communication, and adequate training.

Please submit the name of one parent representative to serve on the district's Title I Parent Advisory Council.

Name of Parent: _____

Parent's Address: _____
(Include the ZIP code, please.)

Parent's Phone No.: _____ **Email:** _____

Name of School

Principal's Signature

Please return to:

Title I Office, VanHoose Educational Center

Attn: Chrystal Hawkins, PFE Specialist

Phone: (502) 485-6285

Fax: (502) 485-3355



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