ATTACHMENT C

STUDENT/PARENT/FAMILY/COMMUNITY VOTE SIGN-IN

Date:_____ Time:_____ Location: _____

Name ***Nombre***	**Role** **(student, parent/guardian, community member)** ***Papel*** ***(estudiante, padre/tutor, miembro de la comunidad)***	**Email** ***Correo Electronico***	**Phone Number** ***Numero de telefono***	**Signature** ***Firma***