

Fulton City School District Parent Comment / Complaint Form

CONTRACT FOR EXCELLENCE

Name: _____ Date: _____

Child(ren)'s School(s) _____

How do you wish to be reached for response? (Phone, Email, US Postal Service Mail)

Phone _____ Email _____

Address _____

Please describe your concern regarding the Fulton City School District's Contract for Excellence.

This form may be turned in at the school building's office or mailed to the Superintendent:

Fulton City School District
167 S. Fourth Street
Fulton, New York 13069