Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

In Attendance: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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| Resolution |  |

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| Recommendation |  |
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Other items of Concern:

Educator Council Chair Initials: \_\_\_\_\_\_\_\_ Principal Initials: \_\_\_\_\_\_\_\_