

**Parent Engagement Activities Log**  
**School Year 2023-2024**  
*Office of the Superintendent: Communication and Stakeholder Engagement*

Fulton PreK-5

SCHOOL NAME:

FACE COORDINATOR NAME:

Abigail Pekelnicky

January 2024

REPORT MONTH:

| Date    | Time Spent on Activity (Required) | Event Name, Meeting Type, Communication Type and Brief Description (including location) | Childcare Provided? Y or N | Food Provided? Y or N | Interpreter provided? Y or N | Communication Method(s) (How was this event communicated to parents & students)? Ex. Flyer, morning announcements, phone calls from teachers etc. | Feedback from Parents (How did the school collect feedback from parents)? Ex. Survey, comment box, signature sheet w/room for comments etc. | # Parents in attendance (if applicable) | Total # of Participants (if applicable) |
|---------|-----------------------------------|---|----------------------------|-----------------------|------------------------------|---|---|---|---|
| 1/16/24 | 5:30pm-7:00pm                     | PSCC/PTA Meeting CANCELLED due to Snow Day  | Y                          | Y                     | N                            | Robocall, flyer, FB, Peachjar, calendar   | Comments, signature sheet, Verbal Feedback, email   | N/A                                     | N/A                                     |
| 1/23/24 | 4:00pm-5:00pm                     | Black History Month Planning Committee Meeting  | N                          | N                     | N                            | Email, text   | Comments, Verbal Feedback, email  | 4                                       | 6                                       |

Please indicate the number of parents who volunteered in your school this month:

1

Please indicate the number of community members who volunteered in your school this month:

0

Principal Signature:

*[Signature]*

2/1/24

FACE Coordinator Signature:

*[Signature]*

2/1/24

Date:

Date: