

# Elkhart & St. Joseph Counties Head Start Consortium

## Team Meeting Notes

Site: \_\_\_\_\_

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

### Participants:

*Check if present:*

*Signatures:*

_____	<b>Teacher/Facilitator:</b>	_____
_____	<b>Teacher Assistant:</b>	_____
_____	<b>FACS:</b>	_____
_____	<b>Other:</b>	_____
_____	<b>Other:</b>	_____

### Agenda items

- 1.
- 2.
- 3.
- 4.

### Minutes/Notes: *(Use the back of the page if more space is needed)*

---

---

---

---

---

---

---

---

### Follow up:

*Concern*

*Person Responsible*

*Timeline*

---

---

---

---