YOUR FORM FOR TIPS MATH-ELEMENTARY

Student’s Name: ________________________________ Date: ____________

TIPS: (TITLE)

Dear Family Partner:
In math, we are _________________________________. I hope you enjoy this activity with me. This assignment is due _____________________.

Sincerely,

___________________________
Student’s signature

I. LOOK THIS OVER: Explain this example to your family partner.

II. NOW, TRY THIS: Show your family partner how you do this example.

III. PRACTICE SECTION: Complete these examples on your own. Show your work. Explain one example to your family partner.

****CONTINUE YOUR WORK ON THE BACK OF THIS PAGE****
MORE PRACTICE

LET'S FIND OUT or IN THE REAL WORLD...

(Relate this math skill to its use in practical activities that the student can discuss with a family partner. See TIPS prototype activities.)

IV. HOME-TO-SCHOOL COMMUNICATION

Dear Parent,

Please give me your reactions to your child's work on this activity by checking one of the following:

_____ 1. O.K. My child seems to understand this skill.
_____ 2. PLEASE CHECK. My child needed some help on this, but seems to understand this skill.
_____ 3. PLEASE HELP. My child still needs instruction on this skill.
_____ 4. PLEASE NOTE (other comments). _______________________________________________________

Any other comments: __________________________________________________________________________

Parent signature __________________________________________________________________________