August 23, 2017 **Basic Algebra 2**

Dear Parents,

I would like to welcome you and your student to Basic Algebra II. The purpose of this course is to teach students to use algebra to solve math problems and prepare students for college math. We will be moving at a slower pace than the regular Algebra 2 class and may not cover all the material they do. This is to allow us to help students catch up on math skills from previous years. All of our math classes at East Jackson High School are geared toward helping students become independent learners and thinkers.

You can help us accomplish these goals by supporting your student. Here is what you can do to help:

1. Help your student get the proper supplies. They will need:

* a scientific calculator
* a three ring binder or folder to keep assignments
* lots of pencils
* Head phones for the computer

1. See that your student is completing all the assigned work. Time may be given in class to work on assignments, but any work not completed in class should be done at home. I will update grades on PowerSchool at least once a week. If you do not have an account please call the school office.
2. Contact me with problems and concerns. I will do my best to work with you to help your student succeed. I can be reached by phone at the school office, 517-764-1700. My email address is [beth.sanborn@eastjacksonschools.org](mailto:beth.sanborn@eastjacksonschools.org). You can access weekly schedules and other information on my website which can be accessed through the school website: **eastjacksonschools.org**

I am looking forward to working with your student. I will do my best to make this an interesting and productive year. Please sign this letter and have your child return the bottom portion to me. This will let me know you have reviewed this information.

Sincerely,

Mrs. Beth Sanborn

**Basic Algebra 2**

Student’s Name (print) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Mrs. Sanborn**

Student’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent’s Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Phone Number \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Comments: Email \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_