



NATIONAL NETWORK OF
Partnership Schools
JOHNS HOPKINS UNIVERSITY

Summary of School Visits School, Family, and Community Partnerships

Facilitator: _____ Date: _____

School: _____ Time of visit: _____ to _____

Who initiated the visit? _____

Purpose of the visit? _____

With whom did you meet? _____

What good practices and/or reports of progress were discussed during this visit?

What issues and/or challenges were discussed during this visit?

What are the school's next steps to solve challenges and/or continue program improvements?

What are your next steps to assist this school with its program of family and community engagement?
