

Toledo Public Schools Parent Congress  
Parent Representative

School \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

Principal \_\_\_\_\_

Parent Name \_\_\_\_\_

Address \_\_\_\_\_ Zip \_\_\_\_\_

Phone \_\_\_\_\_

E-Mail \_\_\_\_\_

Parent Group Affiliation \_\_\_\_\_

Officer Title (if applicable) \_\_\_\_\_

Parent Rep. Signature \_\_\_\_\_ Date \_\_\_\_\_

Principal Signature \_\_\_\_\_ Date \_\_\_\_\_

Please send form to Elementary Education office  
at the Thurgood Marshall building via pony system or fax to 419-671-8252.  
Questions? Please call 419-671-8363, Parent Coordinators, for further information or  
e-mail to [parent.congress@tps.org](mailto:parent.congress@tps.org) .