

EVERGREEN COMMUNITY SCHOOL

2800 Colorado Avenue
Santa Monica, California 90404

Thank you for requesting an Educator’s Observation of Evergreen Community School. Please list the preferred dates for your visitation below (November 16, February 2, April 16, May 15):

1st choice: Date: _____ # of people: _____

2nd choice: Date: _____ # of people: _____

3rd choice: Date: _____ # of people: _____

On your Educator’s Tour, the director will speak from 9:00 – 10:00am. You will then be free to observe Evergreen classrooms for approximately one hour. Following your observation, the director will again meet with you to answer questions. You are welcome to stay to observe until noon.

To confirm your reservation and hold your space, please remit the required \$10 per person deposit along with this letter. You will be called upon our receipt of the above to confirm your date. Your deposit will be refunded on the day of your tour. Deposits are non-refundable for no-shows and cancellations.

Name(s) of participants: _____

School affiliation: _____

Are you presently on our mailing list? Yes _____ No _____
Are you interested in being/remaining on our mailing list? Yes _____ No _____

(If more than one name for our mailing list, please use the reverse side of this letter.)

Name: _____ Job Position: _____

E-mail _____

Home/School Address (please circle): _____

City: _____ State: _____ Zip: _____

Work Phone: _____ Home Phone: _____

Why would you like to visit Evergreen? _____

Parking: There is metered street parking on Stewart, a few parking spots behind the school (no parking in the disabled spots or along the wall) and an underground parking lot for which there is an hourly fee. Please allow extra time for parking.

Photographs: Photography is permitted before the students arrive. Please arrive at 8:40 a.m. if you would like to take photographs of the school.

We look forward to seeing you