



**BROWARD SCHOOLS**



**VIRTUAL COUNSELOR**

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School: LYONS CREEK MIDDLE

Committee: SAC

Sign In sheet for LYONS CREEK MIDDLE Date: _____ Time: _____					
#	Full Name ▲	Position	SBBC Employee	Parent Of Student At School	Sign Here .
1.	AAMIR, SABA	Parent	No	Yes	
2.	ARBUCCI, MATTHEW	BUSINESS	No	No	
3.	BORGES, ANABEL	SAF-DESIGNEE	No	Yes	
4.	FELDMAN, ALISA	SAC Co-Chair	Yes	No	
5.	FELE, DAWN	Parent	No	Yes	
6.	FRANKLIN, EVALINA	Non-instructional	Yes	No	
7.	FREITAS, MARI	IZ Rep	No	Yes	
8.	GIBSON, TARA	Parent	No	Yes	
9.	MARTINEZ, KRYSTAL	Gifted Rep	Yes	No	
10.	MARTINIZ, MICHELLE	Parent	No	Yes	
11.	PAGANO, DANIELLE	ESE Rep	No	Yes	
12.	SAGON, BEVLYN	Parent	No	Yes	
13.	SARGIS, SUSAN	Parent	No	Yes	
14.	SHARO, JULIE	Parent	No	Yes	
15.	SULLIVAN, SHEMETRIA	SAC Secretary	Yes	No	
16.	VINCENT, BESTY	BTU Steward	Yes	No	
17.	WENCESLAU, ZILDENEI	ESOL Rep	No	Yes	
18.	WRIGHT, SHENA	SAC Co-Chair	Yes	No	
19.	WYNTER, VERNICCA	Principal	Yes	No	
20.	YOHROS, ITZEL	ESOL Rep	No	Yes	

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