

**VICTOR CENTRAL SCHOOL  
QUARTERLY REPORT**

**School Year:** \_\_\_\_\_

**Quarter:** \_\_\_\_\_

**GRADES 1-6**

|                       |
|-----------------------|
| <b>Student Name:</b>  |
| <b>Address:</b>       |
| <b>Phone:</b>         |
| <b>Grade Level:</b>   |
| <b>Date of Birth:</b> |

**Quarterly Report Beginning and Ending Dates:** \_\_\_\_\_ to \_\_\_\_\_

**Number of Hours of Instruction This Quarter:** \_\_\_\_\_

**Days Present:**

**Days Absent:**

**We have covered at least 80% of our planned material this quarter:** \_\_\_ yes \_\_\_ no

**If no, please provide explanation in the space below:**

\_\_\_\_\_  
**Signature of Instructor**

\_\_\_\_\_  
**Date**

**QUARTERLY REPORT  
GRADES 1-6**

**School Year:** \_\_\_\_\_

| <b>Subject</b>   | <b>Plans/Materials</b> | <b>Hours of Instruction</b> | <b>% of Content Covered</b> | <b>Grade</b> |
|------------------|------------------------|-----------------------------|-----------------------------|--------------|
| <b>Math</b>      |                        |                             |                             |              |
| <b>Reading</b>   |                        |                             |                             |              |
| <b>Spelling</b>  |                        |                             |                             |              |
| <b>Writing</b>   |                        |                             |                             |              |
| <b>Geography</b> |                        |                             |                             |              |
| <b>History</b>   |                        |                             |                             |              |
| <b>Science</b>   |                        |                             |                             |              |
| <b>Health</b>    |                        |                             |                             |              |
| <b>Music</b>     |                        |                             |                             |              |
| <b>Art</b>       |                        |                             |                             |              |
| <b>PE</b>        |                        |                             |                             |              |
| <b>Other</b>     |                        |                             |                             |              |
|                  |                        |                             |                             |              |