

**VICTOR CENTRAL SCHOOL  
QUARTERLY REPORT**

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

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

**GRADES 7-12**

<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

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

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

## Grades 7-12

<b>Subject:</b>	<b>Plans/Materials</b>	<b>Hours of Instruction</b>	<b>% of Content Covered</b>	<b>Grade</b>
<b>English</b>				
<b>Math</b>				
<b>Geography/History</b>				
<b>Science</b>				
<b>Health</b>				
<b>Art (.5)</b>				
<b>Music (.5)</b>				
<b>Library Skills</b>				
<b>Practical Skills</b>				
<b>PE</b>				
<b>Electives:</b>				