

SPRING GROVE AREA SCHOOL DISTRICT
ANNUAL EVALUATION REVIEW TEMPLATE
for HOMESCHOOLED STUDENT
To Be COMPLETED by PRIVATE EVALUATOR
(One Review Form Required for Each Child)

Name of Student in Program: _____

Grade of Student: _____ Student's Date of Birth: _____

School Year Being Evaluated: _____

Name of Supervisor of In-Home Schooling Program: _____

SUMMARY OF PROGRAM – WHAT MATERIALS AND WORK WERE REVIEWED?

**SUMMARY OF THE EDUCATIONAL PROGRESS OF THE STUDENT IN THE
HOMESCHOOL PROGRAM – USE ADDITIONAL SHEET/s IF NEEDED – BE CONCISE**

SPRING GROVE AREA SCHOOL DISTRICT HOMESCHOOL PROGRAM

CERTIFICATION OF PROGRAM

I have reviewed the portfolio of and have interviewed _____.
(Name of Student)

By my signature below, ***I certify that this child is receiving "an appropriate education."*** I further certify that the portfolio contained a log made contemporaneously with the instruction, which designates (by title) the reading materials used, samples of any writings, worksheets, workbooks or creative materials used or developed by the student according to the curriculum requirements as stated in Spring Grove Area School District Policy No. 137, Home Education Programs.

_____ I further certify that this student is in grade three, five or eight, and the portfolio contained results of nationally normed standardized achievement tests in reading/language arts and mathematics, or the results of statewide tests administered in one of these grade levels.

SIGNED: _____ Date _____
(Evaluator's Signature)

VERIFICATION OF REVIEWER CREDENTIALS

I have the following credentials as required by law:

(CHECK ONE)

_____ A licensed clinical or school psychologist
(Include Copy of License, or License Number: _____)

_____ A teacher certified by the Commonwealth of Pennsylvania who possesses appropriate experience in grading/evaluating student performance as defined in School Code, 24 P.S. § 13-1327.1, Home Education Program
(Include Copy of Certificate)

_____ A non-public schoolteacher or administrator with at least two (2) years' experience within the past ten (10) years in a Pennsylvania public or non-public school and who possesses appropriate experience in evaluating student performance at the educational level of the student (*elementary or secondary*)
(Copy of Certificate, list of experience)

_____ An evaluator with appropriate approval **given to the supervisor** of the program by the District Superintendent under "other qualifications"
(Include copy of approval letter from Superintendent to the supervisor)

SIGNED: _____ Date _____
(Evaluator's Signature)