

HOME SCHOOL QUARTERLY REPORT

GRADES 9-12

QUARTER Q1 Q2 Q3 Q4

NAME OF CHILD: _____ DATE: _____

HOURS OF INSTRUCTION: _____ GRADE LEVEL: _____

Please describe the specific skills and concepts covered during this quarter and the level to which each was achieved.

<u>English:</u>	<u># of Hours</u>
	<u>Grade/Evaluation</u>
<u>Mathematics:</u>	<u># of Hours</u>
	<u>Grade/Evaluation</u>
<u>Science:</u>	<u># of Hours</u>
	<u>Grade/Evaluation</u>
<u>Social Studies:</u> (Includes American History, Participation in Government, or Economics, Patriotism and Citizenship)	<u># of Hours</u>
	<u>Grade/Evaluation</u>

<u>Health:</u> (Includes HIV/AIDS, Alcohol/Drug/Tobacco Abuse, Fire/Highway/Bicycle Safety Education, and Child Abuse)	<u># of Hours</u>
	<u>Grade/Evaluation</u>
<u>Music and/or Art:</u>	<u># of Hours</u>
	<u>Grade/Evaluation</u>
<u>Physical Education:</u>	<u># of Hours</u>
	<u>Grade/Evaluation</u>
<u>Library Skills:</u>	<u># of Hours</u>
	<u>Grade/Evaluation</u>
<u>Electives:</u>	<u># of Hours</u>
	<u>Grade/Evaluation</u>

Plan for Annual Assessment (to be submitted no later than third quarter). Please be sure to include qualifications of person who will be administering and scoring assessment for Superintendent's approval.

Test Name: _____