

HOME SCHOOL QUARTERLY REPORT

GRADES 1-6

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/Language Arts:</u> (includes Reading, Writing, Spelling and Speaking/Listening)	<u>Grade/Evaluation</u>
	<u>Total Hours</u>
<u>Mathematics:</u>	<u>Grade/Evaluation</u>
	<u>Total Hours</u>
<u>Science:</u> (Includes Life Sciences and Physical Sciences)	<u>Grade/Evaluation</u>
	<u>Total Hours</u>
<u>Social Studies:</u> (Includes Geography, NYS History & Constitution, US History & Constitution, Local History, Economics, Citizenship & Patriotism)	<u>Grade/Evaluation</u>
	<u>Total Hours</u>

<u>Health:</u> (Includes HIV/AIDS, Alcohol/Drug/Tobacco Abuse, Fire/Highway/Bicycle Safety Education, and Child Abuse)	<u>Grade/Evaluation</u>
	<u>Total Hours</u>
<u>Music:</u>	<u>Grade/Evaluation</u>
	<u>Total Hours</u>
<u>Visual Arts:</u>	<u>Grade/Evaluation</u>
	<u>Total Hours</u>
<u>Physical Education:</u>	<u>Grade/Evaluation</u>
	<u>Total Hours</u>
<u>Library Skills:</u>	<u>Grade/Evaluation</u>
	<u>Total Hours</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: _____

or Narrative: _____