BEEKMANTOWN CENTRAL SCHOOL DISTRICT

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HOME SCHOOL QUARTERLY REPORT

Grades 9 - 12

Mail or email: pepe.nick@bcsdk12.org

School Year _____ **Date**_____

Quarter (circle one): 1st 2nd 3rd 4th*

Student_____
First Middle Last

Student's Grade_____ **Total hours of instruction for this quarter** _____

Parent's/Guardian's Name_____

Please describe the material covered during this quarter and provide a number or letter grade or a written narrative evaluating the child's progress in each subject on the following pages.

***4th Quarter - At the time of filing the fourth quarterly report as specified in the IHIP, an annual assessment must also be filed.**
Are the results of the annual assessment or alternate form of evaluation (if permitted) attached? ____Yes ____No

Grades 9 - 12

English/Language Arts: (including Reading, Writing, Spelling, Speaking, & Listening)
GRADE/EVALUATION_____

Mathematics:
GRADE/EVALUATION_____

Science:
GRADE/EVALUATION_____

Grades 9 - 12

Social Studies: (include Geography, Citizenship, Patriotism, American History, Government, Economics)
GRADE/EVALUATION_____

Health: (include alcohol/drug/tobacco abuse, arson prevention, fire/traffic/highway/bicycle safety education)

GRADE/EVALUATION_____

Art/Music:
GRADE/EVALUATION_____

Grades 9 - 12

Physical Education:
GRADE/EVALUATION_____

Electives:
GRADE/EVALUATION_____