

INDIVIDUALIZED HOME INSTRUCTION PLAN (IHIP)
GRADES 1-6 INSTRUCTIONAL REQUIREMENTS

(Notes: Hours of instruction for grades 1-6 shall be **900** hours per year.
 While the subjects listed below must be taught, the course content may differ from the public school curriculum.)

SCHOOL YEAR: 2026-2027

CHILD'S INFORMATION			
Last Name:		First Name:	
Date of Birth:		Grade Level:	
PARENT'S INFORMATION			
Last Name:		First Name:	
Home Address:			Unit/Apt. #:
City:		State: NY	Zip:
Home Telephone:	Alternate Telephone:		E-mail Address:

SUBJECTS	Syllabi, curriculum materials, textbooks <u>or</u> plan of instruction	Program/ Curriculum Source
Arithmetic		
English/Language Arts: • Reading • Spelling • Writing		
Geography		

SUBJECTS	Syllabi, curriculum materials, textbooks <u>or</u> plan of instruction	Program/ Curriculum Source
United States History		
Science		
Health Education		
Music		
Visual Arts		
Physical Education		
Bilingual education and/or English as a second language where the need is indicated.		
Following subjects to be covered during K-12: patriotism and citizenship; health education regarding alcohol, drug and tobacco misuse; highway safety and traffic regulations, including bicycle safety; and fire and arson prevention and safety		

DATES OF QUARTERLY REPORT SUBMISSION:

Please indicate the dates you intend to submit quarterly reports. The number of reports should be proportional to the period of home instruction (e.g., for a student beginning home school in February submit only 3rd and 4th quarterly reports).

1st Quarter: _____

2nd Quarter: _____

3rd Quarter: _____

4th Quarter: _____

ANNUAL ASSESSMENT TO BE USED:

Please provide the name of instrument to be used for the annual assessment by no later than the third quarter report submission. The annual assessment must be submitted by no later than the fourth quarter report submission.

- ☐ California Achievement Test
- ☐ Iowa Test of Basic Skills
- ☐ Stanford 10 Online
- ☐ NYS Assessments
- ☐ Written Narrative Assessment (for grades 1 through three; for grades 4-6, may only be used every other year.)
- ☐ Other _____

Name(s) of individual(s) providing instruction:

Name(s) of Parent(s)/Legal Guardian(s):

Please submit your IHIP electronically via email to homeschool@bscsd.org or by mail to the below address. Feel free to attach additional supporting documentation.

Office of Student Support Services
Ballston Spa Central School District
70 Malta Avenue
Ballston Spa, NY 12020