

PITTSFORD CENTRAL SCHOOL DISTRICT INDIVIDUAL HOME INSTRUCTION PLAN FOR 20__ - 20__ QUARTERLY REPORT for ___ 1st, ___ 2nd, ___ 3rd, or ___ 4th Quarter GRADES 1-6

Student's Name _____ Date of Birth _____ Grade Level____

Address	Ph	one Number	 	
Email Address				
Number of hours of instruction this quarter Absences this quarter				
Cumulative hours to date Absences to date		Absences to date		
We have covered at least 80% of the planned material for this quarter: Yes [] No []				
Please write a narrative evaluation or include a numerical or letter grade and, if necessary, attach any additional forms.				
Subject	Curriculum materials / Instruction/ Narrative	Evaluation	Grade	
Math				
Reading				
Spelling				

OFFICE OF LEARNING & SCHOOL IMPROVEMENT SERVICES



Subject	Curriculum Materials / Instruction /Narrative Evaluation	Grade
English		
Science		
Health		
History		
Music		
Visual Arts		
Physical Education		
Signature of Instructor Date		