



January Home Schooling Progress Report

PARENT INFORMATION	STUDENT INFORMATION
<i>Name of Parent(s)/Guardian(s)</i>	<i>Surname</i> _____ <i>Legal Given Names</i> _____
<i>Name of Main Instructor (if different from above)</i>	Birth Date: _____ <i>Day</i> <i>Month</i> <i>Year</i>
Mailing Address:	Gender: <input type="checkbox"/> Male <input type="checkbox"/> Female
<i>Street Address / Box No.</i>	Grade Level Equivalent: _____
<i>City/Town</i> <i>Postal Code</i>	Date Home Schooling started for current school year.
Phone Numbers:	_____
<i>Home:</i> _____	<i>Day</i> <i>Month</i> <i>Year</i>
<i>Work:</i> _____	
<i>E-mail:</i> _____	

Please indicate satisfactory progress by placing a check mark (v) in the space provided.

If additional space is needed, please add attachment(s).

SUBJECT	COMMENTS
<input type="checkbox"/> Mathematics:	
<input type="checkbox"/> English Language Arts: (listening, speaking, reading, writing, viewing)	
<input type="checkbox"/> Social Studies:	

<input type="checkbox"/> Science:	
<input type="checkbox"/> Electives: (minimum 2)	

Parent / Guardian Signature(s)

Date

PLEASE RETURN TO:	Home Schooling Western School District P. O. Box 368, 10 Wellington Street, Corner Brook, NL A2H 2G9 FAX: (709) 634-1139 Email: eugene.may@wnlsd.ca
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