

**LIVERPOOL CENTRAL SCHOOL DISTRICT**  
**Home Instruction Quarterly Report**  
**Grades 9 - 12**

**Student Name:** \_\_\_\_\_ **Grade:** \_\_\_\_\_ **Quarter:** 1 2 3 4  
 (please circle)

**Total Hours of Instruction this Quarter:** \_\_\_\_\_ **Total # of Absences:** \_\_\_\_\_

Subject	Description of materials covered	Hrs. of Instruction	Narrative Evaluation or Grade
<b>ENGLISH LANGUAGE ARTS</b> (Reading, Writing, Spelling, Spelling/Listening)			
<b>MATHEMATICS</b> <i>Course Name:</i> _____			
<b>SCIENCE</b> <i>Course Name:</i> _____			
<b>SOCIAL STUDIES</b> <i>Course Name:</i> _____			

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Subject	Description of materials covered	Hrs. of Instruction	Narrative Evaluation or Grade
<b>MUSIC/ART</b> <b>Course Name:</b> _____			
<b>HEALTH</b> (Include HIV/AIDS, alcohol/drug/tobacco abuse, arson prevention, fire/traffic/bicycle safety and child abuse education)			
<b>PHYSICAL EDUCATION</b>			
<b>LIBRARY SKILLS</b>			
<b>ELECTIVE</b> <b>Course Name:</b> _____			
<b>ELECTIVE</b> <b>Course Name:</b> _____			

\_\_\_\_\_  
 Parent/Guardian Signature

\_\_\_\_\_  
 Date

\_\_\_\_\_  
 Home School Instructor (if not parent/guardian)

**IMPORTANT REMINDER:** An annual assessment is due at the time the 4<sup>th</sup> quarter report is filed.