

**HOME SCHOOL REPORTING FORM**

PARENT'S NAME \_\_\_\_\_ DATE \_\_\_\_\_

PARENT'S ADDRESS \_\_\_\_\_

PARENT'S PHONE \_\_\_\_\_

**CHILDREN OF COMPULSORY ATTENDANCE AGE:**

NAME	BIRTH DATE	PROGRAM TYPE*		
_____	_____	A	B	C
_____	_____	A	B	C
_____	_____	A	B	C

\*Specify A, B or C to indicate the type of academic program the child will follow: "A" for correspondence or satellite schools, "B" for a curriculum supplied primarily by a single publisher or supplier, and "C" for individually compiled or prepared curriculum.

**PROGRAM DESCRIPTION**

**PROGRAM A: CORRESPONDENCE OR SATELLITE SCHOOLS**

For children instructed at home by parents, guardians, or assigned tutors using the services of a correspondence or satellite school.

Name of School \_\_\_\_\_

Address of School \_\_\_\_\_

\_\_\_\_\_

Name of principal or contact person \_\_\_\_\_

**PROGRAM B: SINGLE PUBLISHER OR SUPPLIER**

For children instructed at home by parents, guardians, or assigned tutors using the curriculum or study materials prescribed and furnished primarily by a single publisher or supplier.

Name of Supplier \_\_\_\_\_

Address \_\_\_\_\_

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**PROGRAM C: INDIVIDUALLY COMPILED CURRICULUM**

For children instructed at home by parents, guardians or assigned tutors using the curriculum or study materials designed or compiled by the parents, guardians or tutors.

<u>Subject Area</u>	<u>Material Title(s)</u>	<u>Supplier</u>
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Reading

Mathematics

Language Arts

Social Studies

Briefly describe your plans for providing a basic academic education for your children in the ensuing year:

**REGULATION**

**ADOPTION DATE: DECEMBER 18, 1985**

**REVIEW DATE: MARCH 6, 2013**