

Individualized Home Instruction Plan (IHIP) (Grades 1-6)

Student Name: D.O.B.: Grade: Phone: Email: Address: Instructors: School District:	Dates for the Submittal of Quarterly Reports: First Quarter: Second Quarter: Third Quarter: Fourth Quarter:
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Required Subjects	The corresponding subtopics may include and shall not be limited to:
<i>Arithmetic</i>	
<i>Reading</i>	
<i>Spelling</i>	
<i>Writing and English Language</i>	
<i>Geography and History</i>	
<i>Science</i>	
<i>Health Education</i>	
<i>Music</i>	
<i>Visual Arts</i>	
<i>Physical Education</i>	
<i>Bilingual Education</i>	
<i>-patriotism and citizenship -health education regarding alcohol, drug and tobacco misuse -highway safety and traffic regulations, including bicycle safety -fire and arson prevention and safety</i>	

***These plans are subject to change as needed for the child's educational benefit. They will attend the substantial equivalent of 180 days or 900 hours of instruction.*

Parent's Signature: _____ Date: _____

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