Quarterly Report (Grades 1-6)

Student Information Student Name: D.O.B.: Grade: School District: Parents/Guardians: Phone: Email: Address:		Dates for the Submittal of Quarterly Reports: First Quarter: Second Quarter: Third Quarter: Fourth Quarter:		
Req. Subjects	Material Covered			Progress
Arithmetic				
Reading				
Spelling				
Writing and English Language				
Geography and United States History				
Science				
Health Education				
Music				
Visual Arts				
Physical Education				
Bilingual Education				
-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				
*My child has participated in a minimum of 225 hours of instruction and has completed at least 80% of the instruction planned this quarter.				
Parent Signature:			Date:	
Parent Sig	nature:		Date:	