

Parent Address Line 1
Parent Address Line 2
City, NY, ZIP Code

Date

Contact Person at School District
c/o School District
School District Address Line 1
School District Address Line 2
City, NY, ZIP Code

Dear Contact Person:

School Year: 2011 – 2012

Quarterly Report #1 – covering (insert dates that you indicated in your IHIP)

Date submitted: _____

Homeschooling Student: _____

Grade Level: _____

_____ is progressing at a satisfactory level or above in all subject matter.

We have had instruction in all the following areas, as per Section 100.10 of the Regulations of the New York State Commissioner of Education and Maya's Individualized Home Instruction Plan (IHIP): arithmetic, reading, spelling, writing, the English language, geography, United States history, health, science, music, visual arts, and physical education.

_____ had no absences from instruction this quarter, and has exceeded the required hours of instruction (225).

Sincerely,

(Parent Signature)

(Parent Signature)

(Parent Name)

(Parent Name)