



# Home Instruction Program Review

Name: \_\_\_\_\_

Grade Cohort by Age: \_\_\_\_\_

Parent: \_\_\_\_\_

Email: \_\_\_\_\_

- Elementary School
- Middle School
- High School

Date of Review \_\_\_\_\_

Location of Review \_\_\_\_\_

Subject/ Course	Curriculum Materials	Reading Materials	Worksheets	Workbooks	Assessments	Writing Samples	Online	Content & Activity Documentation		Evidence of regular, thorough instruction	
								YES	NO	YES	NO
Language Arts											
Mathematics											
Science											
Social Studies											
World Language											
Art											
Music											
Phys. Ed.											
Health											
Elective:											
Elective:											
Elective:											

Reviewer's Comments \_\_\_\_\_

Name of Reviewer \_\_\_\_\_

Recommendations \_\_\_\_\_

Signature of Home School Program Coordinator  
*C. Jewell*

Overall Program:  Compliant  Deficient—Compliance must be demonstrated by:

Withdrawn:  Enrolled in:  Moved to:  Over compulsory attendance age