

SPARTANBURG SCHOOL DISTRICT SEVEN

REPORT OF HOMEBOUND INSTRUCTION

(To be completed by the homebound teacher)

School Year 20__ - 20__



Record instructional dates and teaching hours in the appropriate space provided. The parent or legal guardian MUST initial each instructional session and sign the verification of instruction prior to submission to the appropriate district official. All "Report of Homebound Instruction" forms should be turned in to the Office of Curriculum and Instruction, attention: Lori Humphries at the end of each month.

STUDENT INFORMATION:

NAME: _____ SEX: M / F BIRTHDAY: __/__/__
Last First Middle Mo. Day. Year

DATE ENTERED ON HOMEBOUND: __/__/__
Mo. Day Yr.

DATE ENTERED ON HOMEBOUND: __/__/__
Mo. Day Yr.

SCHOOL ATTENDING: _____ GRADE: _____

Table with 4 columns: DATE WORKED, INSTRUCTIONAL HOURS, TOTAL, PARENT/GUARDIAN INITIAL. Contains 6 rows of blank lines for data entry.

MAXIMUM OF 5 HOURS PER WEEK

Month: _____ No. of Instruction Hours _____ x\$35.00 = Total Cost \$ _____

HOMEBOUND TEACHER-PRINT NAME: _____

HOMEBOUND TEACHER-SIGNATURE: _____

SOCIAL SECURITY NUMBER: __/__/__

INSTRUCTION VERIFICATION SIGNATURE: _____
Parent/Guardian

SUBMIT FORM AT THE END OF THE MONTH TO:
INSTRUCTION AND CURRICULUM
ATTN: LORI HUMPHRIES

(Administrative Use Only)

() Approved () Not Approved

CHIEF ACADEMIC OFFICER: _____ Date: _____