

Kristen Rea

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Grades1-6 Home Schooling

CHILD'S INFORMATION

LAST NAME:			FIRST NAME:		
DATE OF BIRTH:			GRADE LEVEL:		
PARENT'S INFORM	ATION				
LAST NAME:			FIRST NAME:		
HOME ADDRESS:			Apt. #:		
CITY:			STATE: NY ZIP:		
Home Telephone:		Alternate Telephone:		Email /	Address:
SUBJECTS	Syllabi, curriculum materials, textbooksr				
Reading					
Coolling					
Spelling					
English Language					
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Geography	
United States History	
Science	
Music	
Visual Arts	
and/or English as a	
second Language	
where the need is indicated.	
Following subjects to	
be covered k12:	
alcohol, drugand	
highway safety and	
including bicycle	
and safety.	

DATES OF QUARTERLY REPORT SUBMISSION:

Please indicate the dates you intend to submit quarterly reports. The number of reports should be submit only 3^d and 4^h quarterly reports).

Include in the quarterly report:

quarter, **E**25000**2**1.401.7.6000006 1119 (77 09112708)11 100006 10)110018