Weekly Report

Parent's Signature

(Student's Name)

Week of

	. 0						
	, PE	Language	Science	Math	Social Studies	English	Subject
							Teacher's Signature
							Academics Comment on: Missing, incomplete, upcoming assignments; performance on tests, quizzes, homework, etc. Please be specific.
· · · · · · · · · · · · · · · · · · ·							Behavior Comment on: Attentiveness, participation, cooperation, etc. Please be specific.
							Attendance Comment on: Absences, lateness. Please be specific.
							Parental Action Please be specific.

HOMEWORK TEMPLATE

Student Name Assignment Name Date Teacher Name

Subject/Assignment	Do I have the materi	all als?	Do I need	d help?	Who will help me?	How long will it take?	When will I start?
	Yes N	lo	Yes	No			
. and the second	Yes N	No	Yes	No			
	Yes 1	No	Yes	No			
	Yes	No	Yes	No			
	Yes	No	Yes	No			
	Yes	No	Yes	No			

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Incentive Planning Sheet

Problem Behaviors						
Goal						
Possible Rewards Daily	Weekly	Long-Term				
Possible Penalties						
	Homework Co	ontract				
Student agrees to:						
To help student reach goal,	To help student reach goal, parents will:					
Student will earn:	, when					
If student fails to meet agre	eement student will:					
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WEEKLY SHEET

wedgers day to - or

Mama !	. Week_of:			
Name:	Homework	Classwork	Behavior	<u>Sign</u>
Monday				
Tuesday				
Wednesday				
Chursday				
Friday				

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Schedule Your Daily Homework Time

Do this worksheet with a parent.

Write down all scheduled activities (music lessons, sports practices, etc.) and responsibilities (babysitting your brother or sister, doing chores, etc.) for each day of an average week so you can clearly see what time is available for homework. From the time available each day, think about your personal time patterns and write in the best time for you to do homework each day. Mark your selected Daily Homework Time for Monday, Tuesday, Wednesday, and Thursday in the spaces shown.

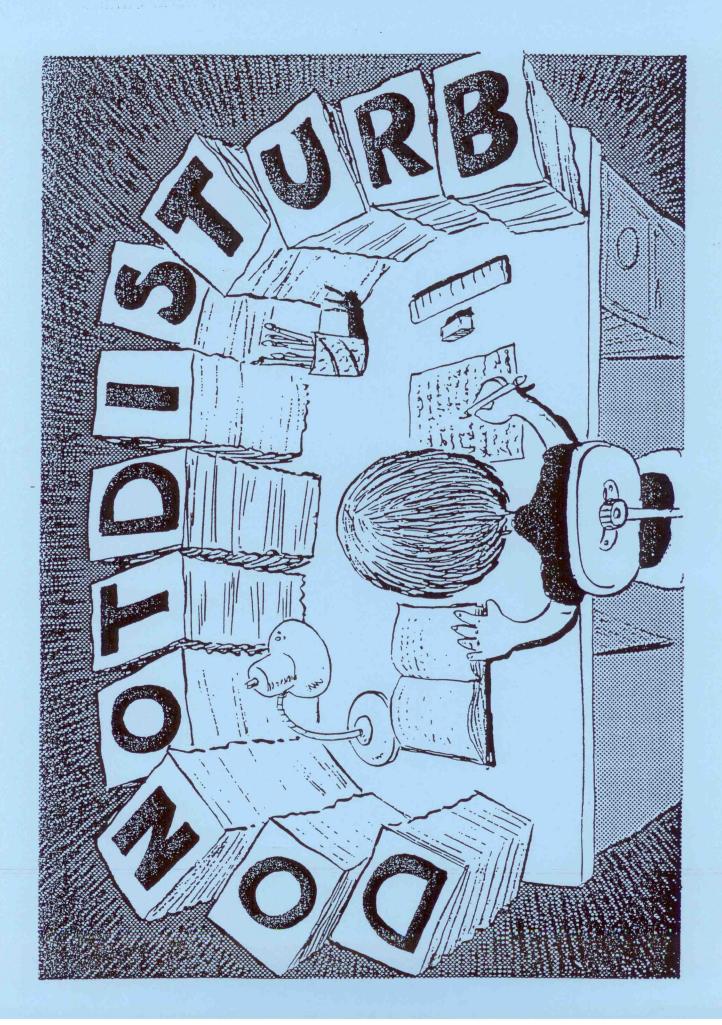
	Daily ».S.c.he	dule
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4:00 PM	8:00 PM	(7 °) to
5:00 PM	9:00 PM	
6:00 PM	10:00 PM	& Sign
Tuesday		HOMEWORK TIME:
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4:00 PM	8:00 PM	
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Wednesday		HOMEWORK TIME:
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5:00 PM	9:00 PM	
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Thursday		HOMEWORK TIME:
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4:00 PM	8:00 PM	to
5:00 PM	9:00 PM	
6:00 PM	10:00 PM	

LONG-RANGE PLANNER

NAME		_DATE
	ENT	DUE DATE
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		completed
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STEP		Date to be completed
		Parent's Initials
Service Care		
STEP		Date to be completed
-		Parent's Initials

SATURDAY FRIDAY THURSDAY WEDNESDAY Projects for the month of TUESDAY MONDAY SUNDAY

Name
Date
My Study Area
In the space below, draw a picture of the study area you have chosen at home. Then complete the lower part of this worksheet.
#####################################
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My study area will be in
This will be a good location for studying because
I will do my homework in this study area.
Student signature
I have agreed upon this study area for my child.
Parent signature



SUBECT:			
SUBJECT:	411	MONDAY	Assignments for the week of
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