

Name: _____

Date: _____

Homework

At times your student may need to complete work not finished at school. This work will be considered Homework and will be sent home on Wednesdays attached to this sheet. It is our expectation that you will assist your student in completing the attached work. Any notes or information that we need to pass on will be in the area below. Sign the bottom and return on Thursday with the completed work.

<input type="radio"/> Literature	<input type="radio"/> Math	<input type="radio"/> Writing
<input type="radio"/> Grammar	<input type="radio"/> Handwriting	<input type="radio"/> Spelling
<input type="radio"/> History	<input type="radio"/> Science	<input type="radio"/> Other

Parent Comments:

Teacher Initial: _____

Parent Signature

Name: _____

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