

Year:

# ANNUAL REPORT

Name:

Time Spent in Studies:

Submitted To:

Submitted By:


# Guidance:

## Words of Caution:

This annual report is for personal record keeping and uses only. While it may be sufficient to meet your state regulations, there are states where it will not be. This annual report in NO way guarantees entrances into colleges. It may or may not be acceptable proof of education in your state. Always check with your state and local laws before implementing a record-keeping method.

## How to Use:

For personal use, you can set up oral, written, and essay-style evaluations to keep in your child's homeschool portfolio as "proof of education." Setting up a progress report for your child on different subjects is easy. Write out the top seven questions from the Unit and give your child the answers. This way, you can show that your child has mastered the unit in an easy to glance at format. Each fill-in-the-blank evaluation comes with the subject, date, and grade/mastery, depending on your grading scale. There is also a reading log, time tracking log, and a nice cover if you need to turn this document in somewhere.

## Tips:

Remove this Guidance page before submitting the document.









**Subject:** \_\_\_\_\_

Grade:

Date:

Evaluations Questions:

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_

5. \_\_\_\_\_

\_\_\_\_\_

6. \_\_\_\_\_

\_\_\_\_\_

7. \_\_\_\_\_

\_\_\_\_\_



**Subject:** \_\_\_\_\_

Grade:

Date:

Oral Evaluation Questions:

1. \_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_

5. \_\_\_\_\_

\_\_\_\_\_

6. \_\_\_\_\_

\_\_\_\_\_

7. \_\_\_\_\_

\_\_\_\_\_



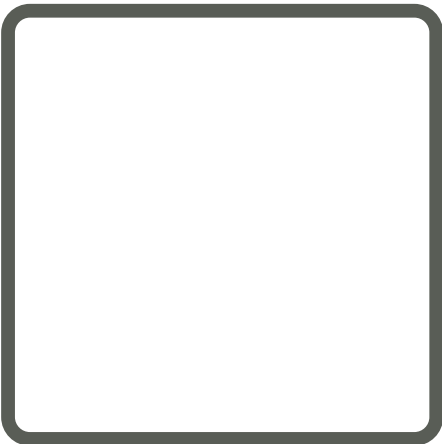




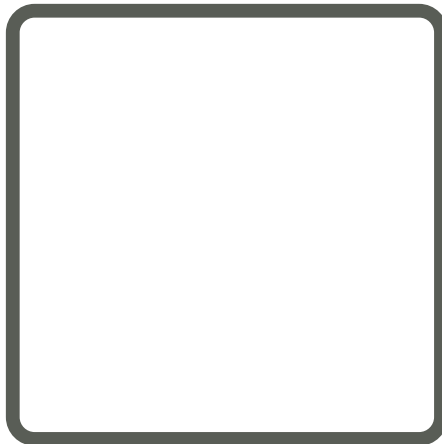
# Weekly Lesson Log

Dates:

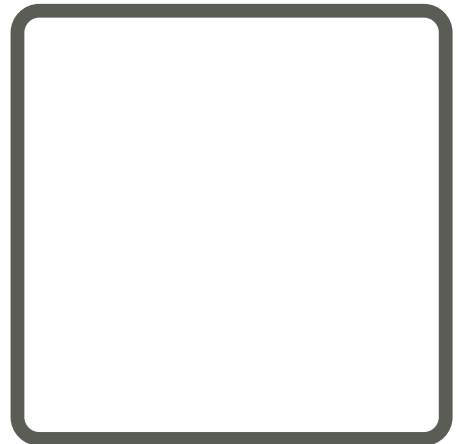
Monday



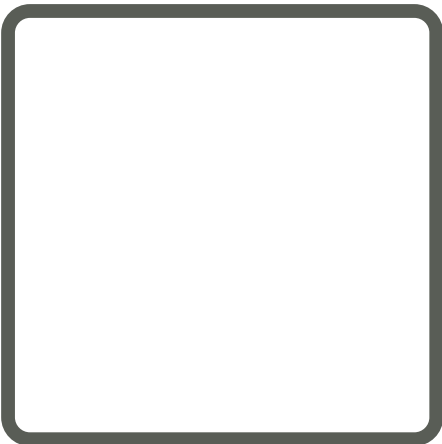
Tuesday



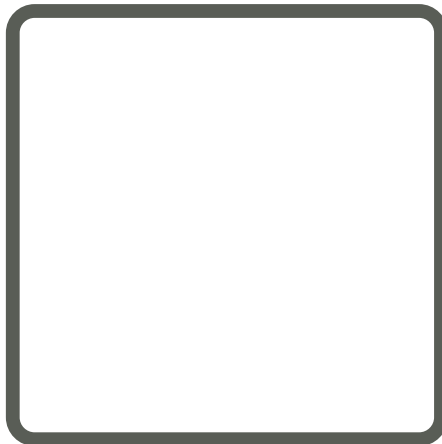
Wednesday



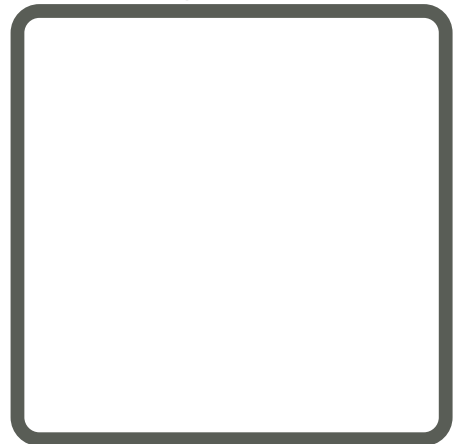
Thursday



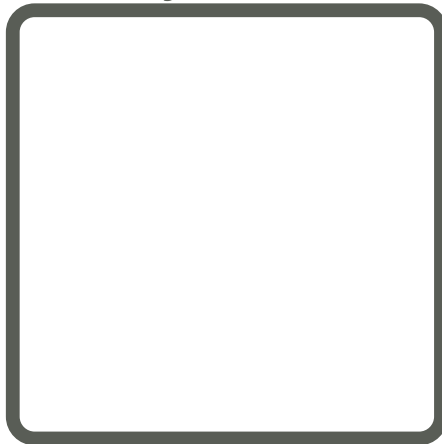
Friday



Saturday



Sunday





# Daily Lesson Log

Date:

Subject: \_\_\_\_\_

Objectives Learned: \_\_\_\_\_

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