

## HOMESCHOOL ATTENDANCE SHEET

School Name: \_\_\_\_\_

County: \_\_\_\_\_

Level: \_\_\_\_\_

Place a check (✓) on the days in which academic instruction or educational activities were conducted.

Month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Total
July																																
August																																
September																																
October																																
November																																
December																																
January																																
February																																
March																																
April																																
May																																
June																																
Total Days																																

I affirm that the above information is accurate and truthful.

ADMINISTRATOR'S NAME

ADMINISTRATOR'S SIGNATURE

DATE \_\_\_\_\_