



# FAMILY CHRISTIAN ACADEMY

## FORM K: K - 8<sup>TH</sup> REPORTING

(PAGE 1 OF 2)

### STUDENT INFORMATION *(please print clearly)*

Student First Name                      Student Middle Name                      Student Last Name                      Date of Birth                      Social Security No.

Student Home Address *(where student resides)*                      City                      County                      State                      Zip

What grade is student enrolled in? \_\_\_\_\_ What school year is this report for? \_\_\_\_\_

### PRIMARY TEACHER INFORMATION *(please print clearly)*

Primary Teacher Name                      Phone                      Email

Primary Teacher Address *(if different from student)*                      City                      County                      State                      Zip

### GRADES & ATTENDANCE *(please print clearly)*

#### 1ST SEMESTER ATTENDANCE

CIRCLE EACH DAY THE STUDENT DID SCHOOL WORK																															
JUL	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
	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																
AUG	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
	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																
SEP	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	
	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																
OCT	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
	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																
NOV	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	
	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																
DEC	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
	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																

Total Days Completed for 1st Semester:    
**(Due Date is January 15th)**

#### 2ND SEMESTER ATTENDANCE

CIRCLE EACH DAY THE STUDENT DID SCHOOL WORK																															
JAN	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
	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																
FEB	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		
	16	17	18	19	20	21	22	23	24	25	26	27	28	29																	
MAR	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
	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																
APR	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	
	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																
MAY	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
	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																
JUN	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	
	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30																

Total Days Completed for 2nd Semester:    
**(Due Date is July 15th)**

There is a \$10 late fee for any report submitted after the due date. Grades will not be recorded until the late fee is paid. Make a copy of this report for your own records before submission.

**You must complete the academics for the semester on page two of this form**

**X** Parent/Guardian Signature *(REQUIRED)*:  Date:

*By signing this form you acknowledge this requests may be delayed if any information on this form is incomplete. All fees subject to change without notice. No Refunds.*



## FORM K: K - 8<sup>TH</sup> REPORTING

(PAGE 2 OF 2)

### STUDENT ACADEMIC REPORT *(please print clearly)*

STUDENT NAME FROM PAGE 1 OF 2: \_\_\_\_\_

**Grading Scale: A 94-100 B 87-9 C 77-86 D 70-76 F 0-69**

Please ✓ the box to indicate which semester this report is for. It must match the attendance reported on page 1.

**1ST SEMESTER ACADEMICS**

**2ND SEMESTER ACADEMICS**

SUBJECT NAME <small>* Required Subject 3rd-12th</small>	GRADE EARNED	
	Letter	Number
* Bible		
* Mathematics		
* English		
* History		
* Science		

SUBJECT NAME <small>* Required Subject 3rd-12th</small>	GRADE EARNED	
	Letter	Number
* Bible		
* Mathematics		
* English		
* History		
* Science		

Please use this area to include any notes, field trips, etc. that you would like included in this students record.


**X** Parent/Guardian Signature (REQUIRED): \_\_\_\_\_ Date: \_\_\_\_\_

By signing this form you acknowledge this requests may be delayed if any information on this form is incomplete. All fees subject to change without notice. No Refunds.