



Attendance Calendar

Reporting Period 11
May 22 – June 16

Student Name _____
 Room Number _____ Grade _____

Monday	Tuesday	Wednesday	Thursday	Friday
May 22	May 23	May 24	May 25	May 26
<input type="checkbox"/> I.S. <input type="checkbox"/> In Class	<input type="checkbox"/> I.S. <input type="checkbox"/> In Class	<input type="checkbox"/> I.S. <input type="checkbox"/> In Class	<input type="checkbox"/> I.S. <input type="checkbox"/> In Class	<input type="checkbox"/> I.S. <input type="checkbox"/> In Class
May 29 NO SCHOOL MEMORIAL DAY	May 30	May 31	June 1	June 2
	<input type="checkbox"/> I.S. <input type="checkbox"/> In Class	<input type="checkbox"/> I.S. <input type="checkbox"/> In Class	<input type="checkbox"/> I.S. <input type="checkbox"/> In Class	<input type="checkbox"/> I.S. <input type="checkbox"/> In Class
<p><u>Make sure to turn in attendance calendars no later than the last day of school.</u></p> <p>Have a wonderful summer!</p>				

This calendar is due on **Friday, June 2, 2017.**

I.S. Days Requested _____

Parent's Signature _____ Date _____

This bottom section is for teacher use only.

I have given this student credit for ____ class attendance days, and ____ independent study days.

Total attendance credit ____ days out of 9 total attendance days this period.

If this box is checked, please make an appointment to meet with me about your child's independent study.

Teacher Signature: _____ Date _____

Independent Study Log

