**Annual Assessment Template**

**School Year 20\_\_\_- 20\_\_\_**

***Please fill in the shaded cells and complete both pages of this form:***

|  |  |
| --- | --- |
| Parent Name: |  |
| Address: |  |
| City:  |  | Zip Code:  |  |
|  |
| Child’s Name:  |  |
| Child’s Date of Birth: |  |
| Child’s Grade Level:  |  |
|  |
| My child  |   | has satisfactorily completed at least  | \_\_\_\_% | of the required material  |
| for this year. My child has made adequate academic progress in all subjects and has surpassed 900 or  |
| 990 hours of instruction.  **Annual Assessment Criteria per grade level:*** **Grades K - 3rd:** narrative assessment every year or take a national assessment
* **Grades 4th - 8th:** narrative assessment every other year, but must take a national or state assessment the other years
* **Grades 9th - 12th:** may NOT use a narrative assessment and MUST take a national or state assessment every year

***I will be using the following as my annual assessment for the 20\_\_\_\_ - 20\_\_\_\_ School Year:***[ ]  Narrative Assessment[ ]  Approved Annual Assessment  Please fill out appropriate section on Page 2**Narrative Assessment:**Highlights of the year include:  |
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| **Approved Annual Assessment:**(Please check which assessment you used)* **New York State Regents** (Grades 9-12- the Home School Department will request scores directly from RCSD)
* **New York State Assessment** (Grades 3-8-the Home School Department will request scores directly from RCSD)
* **Commercially published norm-referenced achievement tests per NYSED** (Parent must provide a copy of the score report with this form)
* Iowa Test of Basic Skills
* California Achievement Test
* Comprehensive Test of Basic Skills
* Metropolitan Achievement Test
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|  |  |  |
| My child will begin  |  | grade in September 20\_\_\_\_\_\_\_. |
| Parent Signature  |  |
| Email  |  |
| Phone number |  |
| Today’s Date |  |