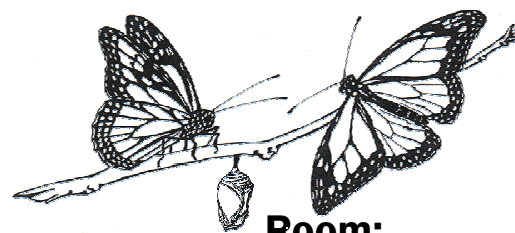


Monarch Learning Center

Attendance Calendar for August, 2009



Student: _____

Room: _____

Monday	Tuesday	Wednesday	Thursday	Friday
3	4	5	6	7
Sign up for Student-Parent-Teacher Conferences During the First Week of School 1:00 - 3:00 PM				
10	11	12	13	14
Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.
17	18	19	20	21
Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.
24	25	26	27	28
Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.
Attendance: <input type="checkbox"/> Class <input type="checkbox"/> I.S.	Total More Hours: _____ I. S. Days requested: _____ Calendar due Tuesday, 9/2/08			

For Independent Study credit, please attach I.S. logs and student artifacts equivalent to one day's work (worksheets, writing, book/video/field trip reports, reading logs, etc.). **Include specific task descriptions and time spent on each lesson in your I.S. logs.** Please log "MORE" hours on the back of this calendar.

Parent Signature: _____ Date: _____

This box for teacher use only	
I have given this student credit for _____ class attendance days, and _____ independent study days: Total attendance credit: _____ days out of 11 total attendance days this month. Total MORE hours: _____ hours out of _____ required for this month.	
If this box is checked, please make an appointment to meet with me about your child's Independent Study: <input type="checkbox"/>	
Teacher Signature: _____	Date: _____

