



# Huron-Superior Catholic

## DISTRICT SCHOOL BOARD

**FORM B - HOME INSTRUCTION REPORT**

**(To be submitted to the Superintendent of Education responsible for Home Instruction upon completion of the service.)**

**Refer to Policy No. 5006**

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**STUDENT** \_\_\_\_\_ **DATE OF BIRTH** \_\_\_\_\_  
Day Month Year

**ADDRESS** \_\_\_\_\_ **POSTAL CODE** \_\_\_\_\_

**SCHOOL** \_\_\_\_\_ **GRADE** \_\_\_\_\_

**HOME INSTRUCTION TEACHER** \_\_\_\_\_

**DATE INSTRUCTION BEGAN** \_\_\_\_\_

**DATE INSTRUCTION COMPLETED** \_\_\_\_\_

**PROGRESS NOTES (CONNECT WITH GOALS FROM FORM A)**

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\_\_\_\_\_  
**Date Form Submitted**

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**Principal / Designate Signature**