

Home Instruction Portfolio Review Form

School Year: _____
 Semester: Winter Spring
 Elem. Middle High

Student Name: _____
Last *First* *Grade*

Parent Information: _____
Last *First* *Telephone* *Email*

Directions: Parent please complete the materials presented and concepts completed sections and bring it to the portfolio review. Portfolio reviewers will complete the required content course during the portfolio review. Reviewers Key: C – Compliant, N – Needs additional evidence, D - Deficient

REQUIRED CONTENT COURSE* *Section to be completed by Reviewer	MATERIALS PRESENTED	CONCEPTS COMPLETED
<u>Reading, English, Language Arts</u> Is parent the Primary Instructor? _____ Name of Secondary Instruction Source: _____ Evidence: <input type="radio"/> C <input type="radio"/> N <input type="radio"/> D	<input type="checkbox"/> Reading Materials <input type="checkbox"/> Worksheets <input type="checkbox"/> Writing Samples <input type="checkbox"/> Workbook <input type="checkbox"/> Photographs <input type="checkbox"/> Assessments <input type="checkbox"/> Anecdotal Records <input type="checkbox"/> Field Trip	
<u>Mathematics</u> Is parent the Primary Instructor? _____ Secondary Instruction Source: _____ Evidence: <input type="radio"/> C <input type="radio"/> N <input type="radio"/> D	<input type="checkbox"/> Reading Materials <input type="checkbox"/> Worksheets <input type="checkbox"/> Writing Samples <input type="checkbox"/> Workbook <input type="checkbox"/> Photographs <input type="checkbox"/> Assessments <input type="checkbox"/> Anecdotal Records <input type="checkbox"/> Field Trip	
<u>Science</u> Is parent the Primary Instructor? _____ Secondary Instruction Source: _____ Evidence: <input type="radio"/> C <input type="radio"/> N <input type="radio"/> D	<input type="checkbox"/> Reading Materials <input type="checkbox"/> Worksheets <input type="checkbox"/> Writing Samples <input type="checkbox"/> Workbook <input type="checkbox"/> Photographs <input type="checkbox"/> Assessments <input type="checkbox"/> Anecdotal Records <input type="checkbox"/> Field Trip	
<u>Social Studies</u> Is parent the Primary Instructor? _____ Secondary Instruction Source: _____ Evidence: <input type="radio"/> C <input type="radio"/> N <input type="radio"/> D	<input type="checkbox"/> Reading Materials <input type="checkbox"/> Worksheets <input type="checkbox"/> Writing Samples <input type="checkbox"/> Workbook <input type="checkbox"/> Photographs <input type="checkbox"/> Assessments <input type="checkbox"/> Anecdotal Records <input type="checkbox"/> Field Trip	
<u>Art</u> Is parent the Primary Instructor? _____ Secondary Instruction Source: _____ Evidence: <input type="radio"/> C <input type="radio"/> N <input type="radio"/> D	<input type="checkbox"/> Reading Materials <input type="checkbox"/> Worksheets <input type="checkbox"/> Art Samples <input type="checkbox"/> Workbook <input type="checkbox"/> Photographs <input type="checkbox"/> Assessments <input type="checkbox"/> Anecdotal Records <input type="checkbox"/> Field Trip	

Student Name: _____
Last
First
Date of Birth

<p><u>Music</u></p> <p>Is parent the Primary Instructor? _____</p> <p>Secondary Instruction Source: _____</p> <p>Evidence: <input type="radio"/> C <input type="radio"/> N <input type="radio"/> D</p>	<p><input type="checkbox"/> Reading Materials <input type="checkbox"/> Worksheets</p> <p><input type="checkbox"/> Writing Samples <input type="checkbox"/> Workbook</p> <p><input type="checkbox"/> Photographs <input type="checkbox"/> Assessments</p> <p><input type="checkbox"/> Anecdotal Records <input type="checkbox"/> Field Trip</p>	
<p><u>Physical Education</u></p> <p>Is parent the Primary Instructor? _____</p> <p>Secondary Instruction Source: _____</p> <p>Evidence: <input type="radio"/> C <input type="radio"/> N <input type="radio"/> D</p>	<p><input type="checkbox"/> Reading Materials <input type="checkbox"/> Worksheets</p> <p><input type="checkbox"/> Writing Samples <input type="checkbox"/> Workbook</p> <p><input type="checkbox"/> Photographs <input type="checkbox"/> Assessments</p> <p><input type="checkbox"/> Anecdotal Records <input type="checkbox"/> Field Trip</p>	
<p><u>Health Education</u></p> <p>Is parent the Primary Instructor? _____</p> <p>Secondary Instruction Source: _____</p> <p>Evidence: <input type="radio"/> C <input type="radio"/> N <input type="radio"/> D</p>	<p><input type="checkbox"/> Reading Materials <input type="checkbox"/> Worksheets</p> <p><input type="checkbox"/> Writing Samples <input type="checkbox"/> Workbook</p> <p><input type="checkbox"/> Photographs <input type="checkbox"/> Assessments</p> <p><input type="checkbox"/> Anecdotal Records <input type="checkbox"/> Field Trip</p>	
<p><u>Other</u> (Not Required)</p> <p>Is parent the Primary Instructor? _____</p> <p>Secondary Instruction Source: _____</p> <p>Evidence: <input type="radio"/> C <input type="radio"/> N <input type="radio"/> D</p>	<p><input type="checkbox"/> Reading Materials <input type="checkbox"/> Worksheets</p> <p><input type="checkbox"/> Writing Samples <input type="checkbox"/> Workbook</p> <p><input type="checkbox"/> Photographs <input type="checkbox"/> Assessments</p> <p><input type="checkbox"/> Anecdotal Records <input type="checkbox"/> Field Trip</p>	
<p><u>REVIEWERS STATUS</u></p>		
<p>Reviewer's Name: _____ Date: _____</p> <p><input type="radio"/> Compliant: Evidence of regular and thorough instruction demonstrated as required.</p> <p><input type="radio"/> Needs additional evidence of instruction. Another portfolio review must be scheduled by _____</p> <p><input type="radio"/> Deficient: It has been determined that corrections or a plan must be submitted to the home schooling office by _____ per COMAR 13A.10.01.03.</p> <p>Comments: _____</p> <p>_____</p>		

Parent's Signature: _____

Date: _____

Reviewer's Signature: _____

Date: _____