## Home Education Program Portfolio Evaluation

Student Name:	Date of Birth:
Student Address:	
Date of Evaluation:	
Teacher Name:	
Teacher Address:	
	State ofExperienced Educator Certificate #
~ <i>OR</i> ~	Teacher in (nonpublic school name and address):
Descript	tion of work reviewed, including quantitative data if available:
Summary of education	onal progress in the home education program:
Comments:	
	ational progress commensurate with the age and ability of the student has a home education program.
Teacher's	
	Date:
Signature	
Parent's	_
G. A	Date:
Signature	