

## Portfolio Review Form for CRSCS

*(This form must be signed by the parents, subjects initialed & signed by the reviewer & dated to be considered valid)*

*I verify that my children have received regular instruction in the courses listed below during the 20\_\_\_\_-20\_\_\_\_ school year.*

Parent Signature: \_\_\_\_\_ Family Name: \_\_\_\_\_ Family ID#: \_\_\_\_\_

*I verify that written documentation has been presented that shows evidence of regular instruction for each of the above -Initialed courses. An 'X' indicates those courses for which written documentation was not satisfactory to show regular Instruction.*

Reviewers Signature: \_\_\_\_\_ Reviewers Name: \_\_\_\_\_ Reviewers Family ID#: \_\_\_\_\_

Date of Portfolio Review: \_\_\_\_\_ Total Number of Course Review Sheets: \_\_\_\_\_

\*Instructions for completing this form can be found on our website at [www.crscs.org](http://www.crscs.org)

	Student:	Grade	Student:	Grade	Student:	Grade
<b>Biblical/ Christian Studies</b>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<b>English</b>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<b>Math</b>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<b>Science</b>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<b>Social Studies</b>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<b>Art</b>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<b>Music</b>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<b>Health</b>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<b>Physical Education</b>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>
<b>Other</b>		<input type="checkbox"/>		<input type="checkbox"/>		<input type="checkbox"/>