



**EAST IRONDEQUOIT CENTRAL SCHOOL DISTRICT
INDIVIDUAL HOME INSTRUCTION PLAN FOR 20__-20__
GRADES 1-6**

Student's Name _____ Date of Birth _____ Grade Level _____

Address _____ Phone Number _____

Email Address _____

Name of Individuals Providing Instruction _____

In the spaces provided below, please describe the student's IHIP for the current school year as required in Section 100.10 of the Commissioner's Regulation.

<i>Subject</i>	<i>A list of syllabi, curriculum materials, textbooks or plan of instruction</i>
Math	
Reading	
Spelling	
Writing	

REGIONAL PROGRAMS AND SERVICES

English	
Science	
History	
Health	
Visual Arts	
Physical Education	
Music	

Signature of Instructor _____ Date _____