

## ATTENDANCE RECORD

	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Month Total	YTD	
Sept																																		
Oct																																		
Nov																																		
Dec																																		
Jan																																		
Feb																																		
March																																		
April																																		
May																																		
June																																		
July																																		
Aug																																		

Parent/Guardian's Name (please print): \_\_\_\_\_

All home schools must provide the minimum aggregate hours.

Address: \_\_\_\_\_

360 hours for half-time Kindergarten

720 hours for grades Full-time K-3

1080 hours for grades 4-12

Child's Name(s): \_\_\_\_\_

Grade: \_\_\_\_\_

School Year: \_\_\_\_\_

When complete, please mail a copy to the Park County Superintendent of Schools, 414 East Callender Street, Livingston, MT 59047