



Pioneer Family Academy

Independent Study Program

Semester Report Card

STUDENT'S NAME:

GRADE:

AGE:

ACADEMIC YEAR: **20 -20**

1st Semester

SUBJECT	Grade	Effort	Credit

2nd Semester

SUBJECT	Grade	Effort	Credit

Total School Days in Semester:

Total School Days in Semester:

Number of days student absent:

Number of days student absent:

GRADES:

A= Excellent

B= Good

C= Satisfactory

D= Below Average

F= Failing

EFFORT:

O= Outstanding

S= Satisfactory

U= Unsatisfactory

COMMENTS:

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