RENFREW COUNTY CATHOLIC DISTRICT SCHOOL BOARD

HOME OR HOSPITAL INSTRUCTION UNIT – MONTHLY SUMMARY:
HOURS OF INSTRUCTION

INSTRUCTIONS:

As soon as possible after the 15th of each month, the Home Instruction Teacher is asked to complete this form.

The Principal is asked to sign it and fax (613-735-9231) to the Superintendent of Educational Services.

Pupil: _____ **Grade:** _____

Teacher: _____ **Month:** _____

Date	# of Hours
Total:	

Signatures

_____
Teacher

_____
Principal

_____
Superintendent of Educational Services

For Office Use Only	
Teacher Category:	
Category Minimum:	
Hourly Rate: Category Minimum 1000	
Total Hours:	
Total Pay:	

Paid: _____

PLEASE SUBMIT TO SUPERINTENDENT OF EDUCATIONAL SERVICES

PR 2/73/76/76/88/98
Jmwinwordforms.Dec10