

## Family Partnership Charter School High School Assignment/Learning Log

	<b>Student Name:</b>	<b>Grade:</b>	<b>Advisor:</b>
Dates			
Course:			
Course:			
Course:			
Course:			
Course:			
Course:			

I certify that this report is a true and accurate record of work completed for \_\_\_\_\_ of \_\_\_\_\_ apportioned school days. Learning Period # \_\_\_\_\_

Advisor Signature: \_\_\_\_\_ Parent Signature: \_\_\_\_\_ Date: \_\_\_\_\_