

# Woodridge Local School District

## HOME INSTRUCTION REIMBURSEMENT

Directions Time should be calculated only in ¼, ½, ¾ or hourly segments per session.

Student's Last Name	Grade	School
Address		Phone
Name of Parent or Guardian	Parent/Guardian Signature	
Teacher	Address	

The information listed below is for the following period of time:

\_\_\_\_\_ to \_\_\_\_\_  
 Month                  Day                  Year                  Month                  Day                  Year

Subject Area	Assigned Hours of Instruction Per Week	Grades Received	Date and Hours of Instruction per Visit	
			Date	Hours
Total Hours				

\_\_\_\_\_  
Signature of Teacher

\_\_\_\_\_  
Phone Number

\_\_\_\_\_  
Date

\_\_\_\_\_  
Building Principal's Approval

\_\_\_\_\_  
Social Security #

\_\_\_\_\_  
Date