# Daily Attendance Record and Work Progress

**For Parent and ES use to document attendance, daily educational activity and progress**

Use blue ink only – please print

River Springs Program: _____ Education Specialist:_____

Student Name (Last Name, First Name):_____ SSID#:_____

Possible Number of attendance days:___20_____ Beginning Date: 04/18/17 Ending Date: 05/15/17

| Number of days | Date | Mark "X" if an educational activity took place; mark "O" if no educational activity(ies) took place *(BLUE INK)* | Course/Area | Educational Activity |
|---|---|---|---|---|
| 1 | 04/18 | | | |
| 2 | 04/19 | | | |
| 3 | 04/20 | | | |
| 4 | 04/21 | | | |
| 5 | 04/24 | | | |
| 6 | 04/25 | | | |
| 7 | 04/26 | | | |
| 8 | 04/27 | | | |
| 9 | 04/28 | | | |
| 10 | 05/01 | | | |
| 11 | 05/02 | | | |
| 12 | 05/03 | | | |
| 13 | 05/04 | | | |
| 14 | 05/05 | | | |
| 15 | 05/08 | | | |
| 16 | 05/09 | | | |
| 17 | 05/10 | | | |
| 18 | 05/11 | | | |
| 19 | 05/12 | | | |
| 20 | 05/15 | | | |

***Total Days of Attendance:***_____

***CERTIFICATION:*** **To the best of my knowledge and belief this record has been kept as required by laws pertaining to charter schools.**

***CERTIFICATION*: For this learning period, this student**

□ **has made adequate progress in all courses**

□ **has not made adequate progress (student has completed _____% of assigned work / or GPA is _____)**

**CERTIFICATION: For this learning period, this student**

□ **is not an English Learner**

□ **is an English Learner and completed 30 minutes of English Language Development each instructional day**

□ **is an English Learner and did not complete 30 minutes of English Language Development each instructional day. He/she completed _____ days of English Language Development during this period**

ES/Teacher Name (print):_____ Signature:_____ Date_____

(Use blue ink only) (Use blue ink only)