**Kindergarten Progress Report**

### WARREN COUNTY SCHOOL DISTRICT

**589 Hospital Drive, Suite A**

**Warren, PA 16365**

**Student:**

**School Year: 2013-2014**

**Grade Level: Kindergarten**

**School Name:**

**Teacher Name:**

**DAYS ABSENT IN MARKING PERIOD**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **1st**  | **2nd** | **3rd** | **4th** |
| **Excused** |  |  |  |  |
| **Unexcused** |  |  |  |  |

**DAYS TARDY IN MARKING PERIOD**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **1st**  | **2nd** | **3rd** | **4th** |
| **Excused** |  |  |  |  |
| **Unexcused** |  |  |  |  |

**TEACHER COMMENTS: (*OPTIONAL)***

**Assigned to grade \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ for the \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ school year.**

**TEACHER SIGNATURE:**