Weekly Homework sign-off Slips
Complete **all must-do homework**, and any additional homework you choose. At the end of the week, cut off one slip, and staple to the front of the week’s HW packet. Return in your child’s folder on Friday.

Homework Date: ________  Child’s Name: ______________
Parent Signature ________________  My child completed homework:
☐ independently  ☐ with some assistance  ☐ with much assistance
My Child enjoyed: _____________________________
My Child had difficulty with: _____________________________

Homework Date: ________  Child’s Name: ______________
Parent Signature ________________  My child completed homework:
☐ independently  ☐ with some assistance  ☐ with much assistance
My Child enjoyed: _____________________________
My Child had difficulty with: _____________________________

Homework Date: ________  Child’s Name: ______________
Parent Signature ________________  My child completed homework:
☐ independently  ☐ with some assistance  ☐ with much assistance
My Child enjoyed: _____________________________
My Child had difficulty with: _____________________________

Homework Date: ________  Child’s Name: ______________
Parent Signature ________________  My child completed homework:
☐ independently  ☐ with some assistance  ☐ with much assistance
My Child enjoyed: _____________________________
My Child had difficulty with: _____________________________