

# ASSIGNMENT CHECKLIST

4<sup>th</sup> – 8<sup>th</sup> GRADE

1. Student's Name: \_\_\_\_\_

2. Assignment Week: \_\_\_\_\_

March 16-20

March 23-27

March 30-April 3

April 13-17

April 20-24

April 27-May 1

*Please initial (next to each subject that applies) once the student has completed the assignments*

3. Completion: English: \_\_\_\_\_

Reading: \_\_\_\_\_

Math: \_\_\_\_\_

Social Studies: \_\_\_\_\_

Science: \_\_\_\_\_

4. Other work completed: \_\_\_\_\_

5. Comments (parent or student): \_\_\_\_\_

\_\_\_\_\_  
Parent's signature

\_\_\_\_\_  
Student's signature