

## SECONDARY SCHOOL REPORT CARD

### CYCLE TWO

20\_\_ - 20\_\_ School Year

*Insert the school board's logo and name*

#### 1. GENERAL INFORMATION

Name of school: Institution code: Address: Telephone (area code and no.): Fax (area code and no.): Principal: Signature:	Reporting term: Starting: Ending:
Student's name: Permanent code: Date of birth: Age on September 30: Year: Secondary ____	Recipient(s) of report card ( <i>Check</i> ) : Father <input type="checkbox"/> Mother <input type="checkbox"/> Legal guardian <input type="checkbox"/> Other <input type="checkbox"/> Student of full age <input type="checkbox"/>  Name: Address: Telephone at home (area code and no.): Telephone at work (area code and no.): Other (area code and no.):

#### 2. RESULTS

Enter subject name Course code: Teacher:	Secondary ____			
	Term 1	Term 2	Term 3	Final Mark
<i>Enter a competency or component if the subject is one for which a detailed result is required under section 30.1</i>				
<b>Repeat the preceding line as many times as necessary</b>				
Subject mark				
Group average				
Credits				
Days absent	Term 1: ____ Term 2: ____ Term 3: ____			
Comments: <i>Enter comments regarding the student's strengths, challenges and progress</i>				

**Repeat this section as many times as necessary**

**3. COMMENTS ON CERTAIN COMPETENCIES**

Comments on two of the following four competencies: exercises critical judgment / organizes his/her work / communicates effectively / works in a team		
	Term 1	Term 3
Secondary __		

**4 . OTHER COMMENTS (COMPLETE IF APPLICABLE)**

Various comments, such as regarding other learning that has taken place during class or school projects