

HOMWORK ASSIGNMENT

Carlson Home Instructional Program and Hospital School
Los Angeles Unified School District

Name: _____

Today's Date: _____

Course Name: _____

Due Date: _____

Assignment: _____

SIGNATURE OF PARENT OR GUARDIAN

Course Name: _____

Due Date: _____

Assignment: _____

SIGNATURE OF PARENT OR GUARDIAN

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Assignment: _____

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Assignment: _____

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If you have questions about these assignments, please call me immediately at:

Teacher: _____