

TMC



The Mother Connection

3125 Albany Post Road * Office B * Buchanan, NY 10511

Main office: 914-737-8976

BV: 914-257-5405

FGL: 914-257-5505

FW: 914-257-5605

Parent/Child Homework Contract

Child's name: _____ Grade _____

- I would like my child to complete as much of his/her homework as possible.
- I prefer my child to do his/her homework at home.
- My child may choose whether or not to do his/her homework.

Additional Comments:

I _____ have discussed the above homework contract with my child and I/we understand that it is my responsibility to check my child's homework.

Parent's signature

Date