FORM 4

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washin

wasnington, D.C. 20549	OMB APPROVAL			
STATEMENT OF CHANGES IN BENEFICIAL OWNERSHIP	OMB Number:	3235-0287		

0.5

Estimated average burden hours per response: Eiled pursuant to Section 16(a) of the Securities Evolution Act of 1034

	Check this box if no longer subject to
\Box	Section 16. Form 4 or Form 5
\cup	obligations may continue. See
	Instruction 1(b).

monuc	don ±(b).			1 110		to Section To(s							4					
					or Secti	ion 30(h) of the	Investr	ment	Com	pany Act	of 19	940						
Name and Address of Reporting Person* FORTE DEBORAH A				2. Issuer Name and Ticker or Trading Symbol SCHOLASTIC CORP [SCHL]								5. Relationship of Reporting Person(s) to Issuer (Check all applicable)						
PORTE DEBORAITA												Directo	-		10% Ow			
												_ 2	M Officer below)	Officer (give title below)		Other (s below)	pecify	
(Last)	,	,	(Middle)		3. Date of Earliest Transaction (Month/Day/Year) 09/01/2004								Ex	resident				
C/O COI	RPORATE	SECRETARY			03/01/2	03/01/2004												
SCHOLA	ASTIC COI	RPORATION 55	7 BROAD	WAY														
				4. If Ame	4. If Amendment, Date of Original Filed (Month/Day/Year)								6. Individual or Joint/Group Filing (Check Applicable Line)					
Street)	ODIZ N	37	10013											Y Form fi	led by One	Repo	rting Persor	1
NEW YORK NY 10012															e than One Reporting			
			<i></i> . \											Person	l			
(City)	(S	tate)	(Zip)															
		Tab	le I - Nor	n-Deriv	ative Se	curities Ac	quire	ed, [Disp	osed o	f, o	r Bene	ficiall	y Owned				
Title of Security (Instr. 3) 2. Transa Date (Month/D			Execution Date,		Cod	Transaction Disposed Code (Instr. 5)						Securitie Beneficia	eficially ned Following		: Direct r Indirect str. 4)	7. Nature of Indirect Beneficial Ownership (Instr. 4)		
					Cod	de	v	Amount (A) or (D)		Price	Transaction(s)				(msu. 4)			
Common Stock			09/20)/2004		А	4		15,000	00 ⁽²⁾ A		(2)	24,	24,152		D		
		-				urities Acq s, warrants								Owned				
. Title of	2.	3. Transaction	3A. Deeme	1 4	·.	5. Number	6. Date	e Exe	rcisa	ble and	7. T	itle and A	mount	8. Price of	9. Numbe	r of	10.	11. Nature
Derivative Security Instr. 3)	Conversion or Exercise Price of Derivative Security	Date (Month/Day/Year)	Date Execution D		ransaction Code (Instr.)		Expira (Month	ation	Date		of S Und Der	Securities derlying ivative So tr. 3 and	ecurity	Derivative Security (Instr. 5)	derivative Securities Beneficial Owned Following Reported Transactie (Instr. 4)	is Blly	Ownership Form: Direct (D) or Indirect (I) (Instr. 4)	of Indirect Beneficial Ownershi (Instr. 4)

09/01/2004 **Explanation of Responses:**

\$29.19

(3)

Employee Stock Option

(right to buy) Restricted

Stock

1. Vests annually in four equal installments beginning on the first anniversary of the grant date.

09/20/2004

- 2. Represents a grant of restricted stock under the Scholastic Corporation 2001 Stock Incentive Plan that vests annually in four equal installments beginning on the first anniversary of the date of grant.
- 3. Acquired under the Scholastic Corporation Management Stock Purchase Plan in lieu of cash bonus; to be converted into shares of Common Stock on a one-for-one basis upon expiration of the deferral period selected by the reporting person.

Date

Exercisable

(1)

09/01/2007

(D)

Expiration

09/20/2014

09/01/2019

Title

Stock

Common

Stock

Teresa M. Connelly, Attorneyin-fact

Amount or Number

Shares

15,000

658

\$<mark>0</mark>

\$19.76

09/22/2004

** Signature of Reporting Person

Date

15,000

658

D

D

Reminder: Report on a separate line for each class of securities beneficially owned directly or indirectly.

- * If the form is filed by more than one reporting person, see Instruction 4 (b)(v).
- ** Intentional misstatements or omissions of facts constitute Federal Criminal Violations See 18 U.S.C. 1001 and 15 U.S.C. 78ff(a).

Code

A

A

(A)

15,000

658

Note: File three copies of this Form, one of which must be manually signed. If space is insufficient, see Instruction 6 for procedure.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB Number.