Written Student Learning Plan

STUDENT NAME:

COURSE TITLE:

CERTIFICATED TEACHER:

STARTING DATE: ENDING DATE:

AMOUNT OF CREDIT POSSIBLE: .5 Credit

Course Description:

Instructional Materials:

Timeline:

This course is expected to be completed in five weeks and the student will be engaged in learning activities for a minimum of five hours each week for a total of twenty-five hours to complete the course of study. These hours will include weekly direct teacher/student contact; one-on-one, by phone, digital or email. The purpose of this contact is to assist the student in meeting the course completion date, goals, and objectives.

Academic progress and course completion progress will be evaluated on a weekly basis by the certificated teacher stated above and successful progress will be determined on a monthly basis as stated in the Evaluation section of this Learning Plan.

Learning Goals and Performance Objectives:

The student will:

Sample

Washington State K-12 [Science] Learning Standards that the student will be working toward by completion of required assignments.

[CONTENT] Performance Objectives:

[List GLEs the course is aligned with or other specified performance objectives.]

Learning Activities: (see specific assignments)

To meet the objectives for this course, the student will:

[List learning activities student will engage in throughout the course. Sample:

- Read chapters and complete the assigned problems outlined on syllabus sheet and additional problems provided in weekly packets.]
• Take notes on main concepts.
• Complete a test with at least 70% correct on each chapter.

Assignments

Assignments added [date specific assignments are]

Week 1: [list assignments/problem sets]
Week 2: [list assignments/problem sets]

Take assessment ___________ now [list any chapter tests, assessment or additional activities]

Week 3: [list assignments/problem sets] [list assignments/problem sets]
Week 4: [list assignments/problem sets]
Week 5: [list assignments/problem sets]

Evaluation:
Student will be evaluated as follows:
[List how student will be evaluated per the learning activities, assessment requirements, and the discretion of the certificated teacher.]

Unsatisfactory Progress
[Note what could constitute unsatisfactory progress and any potential repercussions for lack of progress.]

________________________________________________
Instructor's Signature         Date

___________________________________________  ______________________________
Student's signature     Date