



Continuous Learning Plan
Independent Study via Distance Learning, Summer 2020
Eden Prairie High School, Resident District #272
Participation in this program is optional

June 15th – July 17th
 Two Sessions per Day: 10:00am-Noon or Noon-2:00pm

June 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
14	15 First Day of Summer School	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	July 1	2	3 No Summer School	4

July 2020

Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
5	6	7	8	9	10	11
12	13	14	15	16	17 Last Day of Summer School	18

Attention Student: This form must be completed by your counselor and signed by your and your parent before submitting it to your counselor.

Student Name _____ Grade 2019/2020: _____ Birth Date _____

Address _____ City _____ State _____ Zip Code _____

Student Signature _____ Date _____

Parent Signature _____ Date _____

(Student/parent signatures can be by electronic/email confirmation)

The objective of distance learning independent study is for students to achieve credit(s) for any incomplete course(s).

Students will meet their goals by showing understanding on course competencies. Credit(s) will be awarded to students once demonstrated to the satisfaction of a licensed teacher.

Distance Learning instruction will be delivered virtually through the Schoology platform. This will occur in individual or small group sessions. Teachers will have “office hours” where students will be required to call in or log in for their instruction.

To be completed by counselor.

Course Title	Teacher	# of Units/Membership Hours (80 units = 1 credit)

I am aware and acknowledge that the above student needs the listed credit(s) for graduation.

Counselor's Signature: _____ Date _____

Graduation Incentive (#1-12) _____

1. Performs substantially below performance level on a local achievement test
2. Is behind in satisfactorily completing course work or obtaining credits for graduation
3. Is pregnant or a parent
4. Has been assessed as chemically dependent
5. Has been excluded or expelled
6. Has been referred by a school district for enrollment in an eligible nontraditional program
7. Has been physically or sexually abused
8. Has experienced mental health problems
9. Has been homeless sometime in the last 6 months
10. Has limited English proficiency or speaks English as a second language
11. Has been chronically truant or has withdrawn from school
12. Is being treated in a hospital in the seven-county metropolitan area for cancer or other life-threatening illnesses or is the sibling of the above scenario and resides at least 60 miles beyond the outside boundary of the seven-county metropolitan area.

To be completed by independent study teacher at the end of the program.

Independent Study Teacher Signature _____ Date _____

Did the student accomplish their goal(s)? Yes _____ No _____

If no, indicate which goal(s) were unmet? _____

Indicate plan for meeting unmet goal(s)? _____

I. Current status Assessment of Need	II. Goal(s) What the student can do to get on track.	III. Learning Experiences How the program will support the student.	IV. Assessments How it will be determined the student and program have met goals.
<ul style="list-style-type: none">• Behind in credit(s)• Grade level progression/graduation	<ul style="list-style-type: none">• Complete the credit(s) that are listed above	<ul style="list-style-type: none">• Independent study via distance learning	<ul style="list-style-type: none">• Credits earned