Linscott Charter School

DISCOVERY ROOM ~ INDEPENDENT STUDY CONTRACT

Student: _____ Dates: From _____ to _____

REASON FOR INDEPENDENT STUDY:

❒ Illness ❒ Long term, full time ❒ Short term, educational opportunity at home, or in the community

❒ Travel ❒ Long term, part time

GOALS/OBJECTIVES and PLAN TO ACHIEVE GOALS (What will the student be doing?)
(for more detail, see other side and use expanded version)

1.) Read at least 30 min., write at least 4 sentences about the story
2.) Drill on + - facts or math worksheets
3.) Complete class work
4.) Art project or Eduplace.com

EVALUATION METHOD: (How will the teacher be kept informed of the student's learning?)

❒ Work sample(s) turned in.
Specific samples required (optional): _____

❒ Written record of list of student's experiences and activities

❒ Student log/journal

❒ Completed assignments

❒ Test or report (written or oral)

❒ Demonstration of skill

❒ Conference between teacher, student and parent
Conference date & time: _____

TIME TABLE: (When or how often will the teacher evaluate the student's progress?)

❒ Upon return to school (in the case of travel, illness, or short term I.S.)

❒ Weekly

❒ Monthly: By what date _____

❒ Other: _____

I agree to follow the Independent Study plan as described in this contract. I understand that participation in I.S. is voluntary. I understand that upon satisfactory completion the student will receive full attendance credit for the work completed while on the plan.

_____ _____

Student Signature Date Parent Signature Date

Date MUST be the either the first day contract begins OR date prior to absence. NOT the day it is completed and returned. If the date is not correct...the contract will not be valid.

--- Teacher use ONLY ---

The student has satisfactorily completed the terms of this contract and shall receive ____ days of attendance credit.

Teacher Signature: _____Date _____