

April Distance Learning Student Plan

Student:

Grade:

Parent/Guardian:

Phone:

Email:

| Course | Date Work Assigned | Date Student Work Collected | Instructional Services | Possible Supplemental Services | Credits Earned | Comments |
|-------------------------|--------------------|-----------------------------|------------------------|--|----------------|----------|
| English Language Arts | | | | | | |
| Mathematics | | | | | | |
| Social Science | | | | | | |
| Science | | | | | | |
| Physical Education | | | | | | |
| Socio-Emotional Support | | | | Social work conducted via online platform or via phone | | |
| Other | | | | | | |

Communication/Check in Log

| | | | | |
|---------------------------|---------------------------|---------------------------|---------------------------|---------------------------|
| 4/20 | 4/21 | 4/22 | 4/23 | 4/24 |
| Who: What: Outcome: | Who: What: Outcome: | Who: What: Outcome: | Who: What: Outcome: | Who: What: Outcome: |
| 4/27 | 4/28 | 4/29 | 4/30 | |
| Who: What: Outcome: | Who: What: Outcome: | Who: What: Outcome: | Who: What: Outcome: | |