

Agenda Item:	V D: Action Item
Date:	June 8, 2023
To:	Magnolia Educational & Research Foundation dba Magnolia Public Schools (“MPS”) Board of Directors (the “Board”)
From:	Alfredo Rubalcava, CEO & Superintendent
Staff Lead(s):	Erdinc Acar, Chief Academic Officer William Gray, Director of Educational Services
RE:	Updated Independent Study Policy & Master Agreement

Action Proposed:

I recommend for the Board to approve the revised Independent Study Policy & Master Agreement for use by all Magnolia Public Schools campuses.

Purpose:

Feedback on the use of the current Independent Study Master Agreement by school sites has been collected by the Director of Educational Services and suggested changes have been collected for inclusion in this revision. Changes include:

- additional language clarifying that assignments need to be submitted to the school within five days of the due date
- additional language clarifying that each subject area for which work is being done needs to have an ‘assignment sheet’ created as part of the Master Agreement
- additional language clarifying that an attendance and academic credit/evaluation will take place for each class
- addition of ‘due date(s)’ entry on assignment sheets for each course

Background:

The Director of Educational Services regularly collects feedback on current policies and practices to improve the workings of Magnolia Public Schools. This Master Agreement is Board Approved so updates are to be brought forward during a regularly scheduled board meeting.

Analysis:

This will bring clarity to the use and functionality of the Master Agreement for Magnolia Public School staff members, students, and parents/guardians.

Impact:

This will bring clarity to the use and functionality of the Master Agreement for Magnolia Public School staff members, students, and parents/guardians.

Budget Implications:

N/A

Exhibits:

- Current Master Agreement with Highlighted Suggested Changes (Page 3)
- Proposed Revised Master Agreement for Adoption (Page 19)

MASTER AGREEMENT FOR INDEPENDENT STUDY

Student Name: _____	Date of Birth: _____	Grade: _____
Parent/Guardian Name: _____		
Home Address: _____		
Phone #: _____	Email: _____	
Agreement Duration: _____	Beginning Date: _____	Ending Date: _____

The manner, time, frequency, and place for submitting a pupil's assignments, for reporting the pupil's academic progress, and for communicating with a pupil's parent or guardian regarding a pupil's academic progress:

Manner of Reporting: ☐ One-on-one ☐ Small Group ☐ E-mail/digital/online platform ☐ Fax ☐ Mail

Time: _____ **Frequency:** _____ **Place of Meeting:** _____

Method of Study: Specific methods of study will be designated on the Student Assignment Sheet and Attendance Record incorporated herein. Examples of methods of study for the student will include but are not limited to:

☐ Independent Reading ☐ Textbook Activities ☐ Problem Solving ☐ Study Projects ☐ Drill & Practice
☐ Experiential Learning ☐ Computerized Curriculum ☐ Web/Internet Research ☐ Library Research ☐ Field Trips ☐
Learning Center Courses ☐ Other _____

Method of Evaluation: Academic evaluations will be designated on the Student Assignment Sheet and Attendance Record incorporated herein. Examples of acceptable methods of evaluation include but are not limited to:

☐ Teacher-made Tests ☐ Student Conferences ☐ Progress/Report Cards ☐ Chapter/Unit Tests ☐ Work Samples
☐ Observations ☐ Portfolios ☐ State Standards Testing ☐ Learning Journals
☐ Presentations ☐ Quizzes ☐ Labs ☐ Finals ☐ Other _____

Method of Work submission: ☐ Turned in upon return (*only for IS placements of less than 5 days*) ☐ Email
☐ Google Classroom submission ☐ Other _____

Resources: The school will provide appropriate instructional materials and personnel to enable the student to complete the assigned work. Resources must include those reasonably necessary to the achievement of the objectives and must include resources that are normally available to all students on the same terms as the terms on which they are available to all. The school will confirm or provide access to all pupils to the connectivity and devices adequate to participate in the educational program and complete/turn in assigned work, such as Chromebooks and hotspots. Assignments and specific resources will be designated on the Assignment and Attendance Record incorporated herein.

Board Policies:

- For pupils in all grade levels and programs offered by MPS, the maximum length of time that may elapse between the time an assignment is made (*i.e. due to be completed & submitted*) and the date by which the pupil must complete (*and submit*) the assigned work shall be five (5) school days.
- The Principal of each MPS school site, or his or her designee, shall conduct an evaluation to determine whether it is in the best interests of the pupil to remain in independent study upon the following triggers:

- a. When any pupil fails to complete three (3) assignments during any period of five (5) school days.
- b. In the event a student's educational progress falls below satisfactory levels as determined by the Charter School's MTSS or SST policy and protocol which considers ALL of the following indicators:
 - i. The pupil's achievement and engagement in the independent study program, as indicated by the pupil's performance on applicable pupil-level measures of pupil achievement and pupil engagement set forth in Education Code Section 52060(d) paragraphs (4) and (5).
 - ii. The completion of assignments, assessments, or other indicators that evidence that the pupil is working on assignments.
 - iii. Learning required concepts, as determined by the supervising teacher.
 - iv. Progressing toward successful completion of the course of study or individual course, as determined by the supervising teacher.

Objectives: The student will complete the courses listed below. All course objectives will be consistent with the established MPS board policy and are consistent with MPS standards, as outlined in MPS' subject/course descriptions. The pupil shall engage in content provided by MPS which is aligned to grade level standards that are substantially equivalent to in-person instruction. For high school grade levels this shall include access to all courses offered by MPS for graduation and approved by the UC or CSU as credible under the A-G admissions criteria. Assignment Sheet and Attendance Record will include additional descriptions of the major objectives and activities of the courses of study covered by this agreement including the evaluation of student work and is incorporated herein. The term "Course Value" ("CV") refers to the number of days of work the student will attempt, or if applicable, the number of credits the student will attempt (secondary education). Each subject area below shall have at least one "ASSIGNMENT SHEET" chart page created as part of this agreement. More shall be attached as needed pending length of IS placement.

Course Credits or Other Measures of Academic Achievement to be Earned upon Completion:

Grades TK-5 Subject Area	Specific Course	CV <small>(Days attempted)</small>	Modified
Elementary School Grade	Grade-level work		No
Other			No
Other			No

Grades 6-12 Subject Area	Specific Course	CV <small>(Days or credits attempted)</small>	Modified
English			No
Mathematics			No
Science			No
History/Social Science			No
Other			No
Other			No

Statement of Academic and Other Supports for Special Populations: MPS shall utilize strategies described in its Charters and relevant existing policies such as MTSS and SST to address the needs of pupils who are not performing at grade level, or who need support in other areas, such as English Learners, pupils in foster care or pupils who are experiencing homelessness, and/or pupils requiring mental health support. MPS complies with the Individuals with Disabilities Education Act (“IDEA”) and is committed to meeting the needs of individuals with exceptional needs in order to be consistent with the pupil’s individualized education program (“IEP”). Policies, procedures, and guidelines are in place to ensure that pupils are identified, assessed, and provided a free appropriate public education in the least restrictive environment. The school complies with Section 504 of the federal Rehabilitation act of 1973 (29 U.S.C. Sec. 794) and is committed to providing equivalent access to and providing a free appropriate public education to all students with disabilities.

Voluntary Statement: It is understood that independent study is an optional educational alternative in which no pupil may be required to participate. In the case of a pupil who is referred or assigned to any school, class or program pursuant to Education Code Section 48915 or 48917, instruction may be provided to the pupil through independent study only if the pupil is offered the alternative of classroom instruction.

Pupil-Parent-Educator Conference: Before signing this written agreement, the parent or guardian of a pupil may request that the Charter School conduct a telephone, videoconference, or in-person pupil-parent-educator conference or other school meeting during which the pupil, parent or guardian, and, if requested by the pupil or parent, an education advocate, may ask questions about the educational options, including which curriculum offerings and nonacademic supports will be available to the pupil in independent study, before making the decision about enrollment or disenrollment in the various options for learning.

Signatures and Dates¹:

I have read and I understand the terms of this agreement and agree to all provisions set forth.

Student: _____	Date: _____
Parent/Guardian/Caregiver: _____	Date: _____
Certificated employee designated as having responsibility for the general supervision of independent study:	
_____	Date: _____
Certificated employee designated as having responsibility for the special education programming of the pupil, as applicable	
_____	Date: _____

¹ Written agreements may be signed using an electronic signature that complies with state and federal standards, as determined by the California Department of Education that may be a marking that is either computer generated or produced by electronic means and is intended by the signatory to have the same effect as a handwritten signature. The use of an electronic signature shall have the same force and effect as the use of a manual signature if the requirements for digital signatures and their acceptable technology, as provided in Section 16.5 of the Government Code and in Chapter 10 (commencing with Section 22000) of Division 7 of Title 2 of the California Code of Regulations, are satisfied.

ASSIGNMENT SHEET

Student Name: _____ Grade: _____

Assignment Period: _____ to _____
Month/Day/Year Month/Day/Year**STUDENT ASSIGNMENTS****Students:**

- Student understands that this agreement will remain in effect as written, unless amended.
- Student will turn in all completed assignments to the Dean of Academics (or designee) as soon as they are completed or at the frequency agreed upon in the master agreement.
- Student understands that he/she will complete assigned work by its due date, as explained by teachers and described in written assignments.
- Student understands that they will turn in assignments to the school in the manner prescribed in this agreement within 5 days of its due date.

Teachers:

- Please include a brief summary of the assignment, the resources to be used to complete the assignment, and the method of evaluation of the assignment. (Attach additional sheets as necessary.)
- Academic and Attendance Credit/Evaluation is completed AFTER the student returns and the work has been evaluated.
- Submit this contract to the Office with an original student work sample within 5 days of student's return. Samples should have student name, date, subject, and marks of evaluation.

Course:**Teacher:****Email:**

Summary:

Resources:

Due Date(s):

Method of Evaluation:

Time value of submitted/completed work (as determined by teacher): _____

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Summary:

Resources:

Due Date(s):

Method of Evaluation:

Time value of submitted/completed work (as determined by teacher):

DAILY ENGAGEMENT

MPS recognizes that families may not evenly distribute student's work assignments over weekdays. However, due to strict State law requirements for charter school attendance, MPS expects each student to be engaged in an educational activity required of them in the assignments on each weekday that MPS is in session and asks that this "daily engagement" be documented on a daily basis on this sheet by the parent/guardian. This should not be read to prohibit schoolwork on weekends and should not be read to dictate the manner in which a family distributes the assignments over the independent study period. MPS asks that a parent/guardian refrain from documenting any "daily engagement" on a day where a student did not engage in any educational activity required of them by the assignments. By law, work done on weekends or other days when school is not in session cannot be used to "make-up" weekdays where no "daily engagement" occurred.

Note: In addition to parent/guardian affirmation, MPS may use a variety of means to document student's daily engagement. These include, but are not limited to, daily time the student spent on online learning platforms, live interactions with the student, educational activity the student engaged in, and other means as verified by the supervising teacher.

Student Name: _____ Grade: _____

Assignment Period: _____ to _____
Month/Day/Year Month/Day/Year

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session					
Week 1					
	Mon ___/___/___	Tue ___/___/___	Wed ___/___/___	Thu ___/___/___	Fri ___/___/___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

*Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.*

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

Student Name: _____ Grade: _____

Assignment Period: _____ to _____

Month/Day/Year

Month/Day/Year

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session					
Week 2					
	Mon ___ / ___ / ___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session					
Week 3					
	Mon ___ / ___ / ___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

Student Name: _____ Grade: _____

Assignment Period: _____ to _____

Month/Day/Year

Month/Day/Year

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session
Week 4

	Mon ___ / ___ / ___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

*Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.*

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session
Week 5

	Mon ___ / ___ / ___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

*Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.*

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

Student Name: _____ Grade: _____

Assignment Period: _____ to _____

Month/Day/Year

Month/Day/Year

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session
Week 6

	Mon ___ / ___ / ___ /___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session
Week 7

	Mon ___ / ___ / ___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

ATTENDANCE RECORDS

For Supervising Teacher Completion:

Student Name: _____ Grade: _____

a. Days of Daily Engagement on Educational Activities Required by the School on Days the School is in Session	_____																									
b. Time Value of Student Work Product as Personally Judged by the Supervising Teacher (Measured in days)	_____																									
c. Attendance Approved by Teacher [Insert lesser of a & b]	_____																									
d. Dates for Which Attendance Has Been Earned Through Independent Study	<table border="1"> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> </table>	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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e. Check to Indicate Representative Work Sample(s) Collected																										
Signature of Supervising Teacher (or designee): By signing below, I certify the days the student has engaged in educational activities required by the school on days that school is in session, and I certify my personal judgment of the time value of the student work product:																										
Signature _____ Date: _____																										

Documentation of Student Participation in Opportunities for Live Interaction and Synchronous Instruction
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Student Name: _____	Grade: _____
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Date	(Grades 4-8) Daily Live Interaction Opportunities		(Grades TK-3 Daily; Grades 9-12 Weekly) Synchronous Instruction Opportunities	
	Provided? (Yes/No)	Notes (By Who? How? Did the Student Participate?)	Provided? (Yes/No)	Notes (By Who? How? Did the Student Participate?)

By signing below, I certify the participation of the above student in synchronous instruction and live interaction opportunities.

Signature of Supervising Teacher:	Date:
--	--------------

MASTER AGREEMENT FOR INDEPENDENT STUDY

Student Name: _____	Date of Birth: _____	Grade: _____
Parent/Guardian Name: _____		
Home Address: _____		
Phone #: _____	Email: _____	
Agreement Duration: _____	Beginning Date: _____	Ending Date: _____

The manner, time, frequency, and place for submitting a pupil's assignments, for reporting the pupil's academic progress, and for communicating with a pupil's parent or guardian regarding a pupil's academic progress:

Manner of Reporting: ☐ One-on-one ☐ Small Group ☐ E-mail/digital/online platform ☐ Fax ☐ Mail

Time: _____ **Frequency:** _____ **Place of Meeting:** _____

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☐ Independent Reading ☐ Textbook Activities ☐ Problem Solving ☐ Study Projects ☐ Drill & Practice
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Other			No
Other			No

<u>Grades 6-12</u> Subject Area	Specific Course	CV <small>(Days or credits attempted)</small>	Modified
English			No
Mathematics			No
Science			No
History/Social Science			No
Other			No
Other			No

Statement of Academic and Other Supports for Special Populations: MPS shall utilize strategies described in its Charters and relevant existing policies such as MTSS and SST to address the needs of pupils who are not performing at grade level, or who need support in other areas, such as English Learners, pupils in foster care or pupils who are experiencing homelessness, and/or pupils requiring mental health support. MPS complies with the Individuals with Disabilities Education Act (“IDEA”) and is committed to meeting the needs of individuals with exceptional needs in order to be consistent with the pupil’s individualized education program (“IEP”). Policies, procedures, and guidelines are in place to ensure that pupils are identified, assessed, and provided a free appropriate public education in the least restrictive environment. The school complies with Section 504 of the federal Rehabilitation act of 1973 (29 U.S.C. Sec. 794) and is committed to providing equivalent access to and providing a free appropriate public education to all students with disabilities.

Voluntary Statement: It is understood that independent study is an optional educational alternative in which no pupil may be required to participate. In the case of a pupil who is referred or assigned to any school, class or program pursuant to Education Code Section 48915 or 48917, instruction may be provided to the pupil through independent study only if the pupil is offered the alternative of classroom instruction.

Pupil-Parent-Educator Conference: Before signing this written agreement, the parent or guardian of a pupil may request that the Charter School conduct a telephone, videoconference, or in-person pupil-parent-educator conference or other school meeting during which the pupil, parent or guardian, and, if requested by the pupil or parent, an education advocate, may ask questions about the educational options, including which curriculum offerings and nonacademic supports will be available to the pupil in independent study, before making the decision about enrollment or disenrollment in the various options for learning.

Signatures and Dates¹:

I have read and I understand the terms of this agreement and agree to all provisions set forth.

Student: _____	Date: _____
Parent/Guardian/Caregiver: _____	Date: _____
Certificated employee designated as having responsibility for the general supervision of independent study:	
_____	Date: _____
Certificated employee designated as having responsibility for the special education programming of the pupil, as applicable	
_____	Date: _____

¹ Written agreements may be signed using an electronic signature that complies with state and federal standards, as determined by the California Department of Education that may be a marking that is either computer generated or produced by electronic means and is intended by the signatory to have the same effect as a handwritten signature. The use of an electronic signature shall have the same force and effect as the use of a manual signature if the requirements for digital signatures and their acceptable technology, as provided in Section 16.5 of the Government Code and in Chapter 10 (commencing with Section 22000) of Division 7 of Title 2 of the California Code of Regulations, are satisfied.

ASSIGNMENT SHEET

Student Name: _____ Grade: _____

Assignment Period: _____ to _____
Month/Day/Year Month/Day/Year**STUDENT ASSIGNMENTS****Students:**

- Student understands that this agreement will remain in effect as written, unless amended.
- Student will turn in all completed assignments to the Dean of Academics (or designee) as soon as they are completed or at the frequency agreed upon in the master agreement.
- Student understands that he/she will complete assigned work by its due date, as explained by teachers and described in written assignments.
- Student understands that they will turn in assignments to the school in the manner prescribed in this agreement within 5 days of its due date.

Teachers:

- Please include a brief summary of the assignment, the resources to be used to complete the assignment, and the method of evaluation of the assignment. (Attach additional sheets as necessary.)
- Academic and Attendance Credit/Evaluation is completed AFTER the student returns and the work has been evaluated.
- Submit this contract to the Office with an original student work sample within 5 days of student's return. Samples should have student name, date, subject, and marks of evaluation.

Course:**Teacher:****Email:**

Summary:

Resources:

Due Date(s):

Method of Evaluation:

Time value of submitted/completed work (as determined by teacher): _____

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Course:**Teacher:****Email:**

Summary:

Resources:

Due Date(s):

Method of Evaluation:

Time value of submitted/completed work (as determined by teacher): _____

DAILY ENGAGEMENT

MPS recognizes that families may not evenly distribute student's work assignments over weekdays. However, due to strict State law requirements for charter school attendance, MPS expects each student to be engaged in an educational activity required of them in the assignments on each weekday that MPS is in session and asks that this "daily engagement" be documented on a daily basis on this sheet by the parent/guardian. This should not be read to prohibit schoolwork on weekends and should not be read to dictate the manner in which a family distributes the assignments over the independent study period. MPS asks that a parent/guardian refrain from documenting any "daily engagement" on a day where a student did not engage in any educational activity required of them by the assignments. By law, work done on weekends or other days when school is not in session cannot be used to "make-up" weekdays where no "daily engagement" occurred.

Note: In addition to parent/guardian affirmation, MPS may use a variety of means to document student's daily engagement. These include, but are not limited to, daily time the student spent on online learning platforms, live interactions with the student, educational activity the student engaged in, and other means as verified by the supervising teacher.

Student Name: _____ Grade: _____

Assignment Period: _____ to _____
Month/Day/Year Month/Day/Year

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session					
Week 1					
	Mon ___ / ___ / ___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

*Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.*

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

Student Name: _____ Grade: _____

Assignment Period: _____ to _____

Month/Day/Year

Month/Day/Year

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session					
Week 2					
	Mon ___ / ___ / ___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session					
Week 3					
	Mon ___ / ___ / ___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

Student Name: _____ Grade: _____

Assignment Period: _____ to _____

Month/Day/Year

Month/Day/Year

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session
Week 4

	Mon ___ / ___ / ___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

*Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.*

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session
Week 5

	Mon ___ / ___ / ___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

*Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.*

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

Student Name: _____ Grade: _____

Assignment Period: _____ to _____

Month/Day/Year

Month/Day/Year

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session
Week 6

	Mon ___ / ___ / ___ /___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

Daily Engagement in Educational Activities Assigned by the School on Days the School is in Session
Week 7

	Mon ___ / ___ / ___	Tue ___ / ___ / ___	Wed ___ / ___ / ___	Thu ___ / ___ / ___	Fri ___ / ___ / ___
English					
Mathematics					
Science					
History/Soc. S.					
Other					
Other					
Other					

Parent – Please fill in the date and **initial** on subjects in which the student was engaged on each day.

Parent/Guardian/Caregiver: _____ Date: _____

(and/or) Supervising Teacher: _____ Date: _____

ATTENDANCE RECORDS

For Supervising Teacher Completion:

Student Name: _____ Grade: _____

a. Days of Daily Engagement on Educational Activities Required by the School on Days the School is in Session	_____																									
b. Time Value of Student Work Product as Personally Judged by the Supervising Teacher (Measured in days)	_____																									
c. Attendance Approved by Teacher [Insert lesser of a & b]	_____																									
d. Dates for Which Attendance Has Been Earned Through Independent Study	<table border="1"> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> <tr><td>_____</td><td>_____</td><td>_____</td><td>_____</td><td>_____</td></tr> </table>	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____	_____
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_____	_____	_____	_____	_____																						
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_____	_____	_____	_____	_____																						
e. Check to Indicate Representative Work Sample(s) Collected																										
Signature of Supervising Teacher (or designee): By signing below, I certify the days the student has engaged in educational activities required by the school on days that school is in session, and I certify my personal judgment of the time value of the student work product:																										
Signature _____ Date: _____																										

Documentation of Student Participation in Opportunities for Live Interaction and Synchronous Instruction
--

Student Name: _____	Grade: _____
---------------------	--------------

Date	(Grades 4-8) Daily Live Interaction Opportunities		(Grades TK-3 Daily; Grades 9-12 Weekly) Synchronous Instruction Opportunities	
	Provided? (Yes/No)	Notes (By Who? How? Did the Student Participate?)	Provided? (Yes/No)	Notes (By Who? How? Did the Student Participate?)

By signing below, I certify the participation of the above student in synchronous instruction and live interaction opportunities.

Signature of Supervising Teacher:	Date:
--	--------------