

**Individual Learning Plan – Grades K-8, 2011-2012**  
 Upstream Learning – Copper River School District  
 P.O. Box 108, Glennallen, AK 99588 907-822-3234, ext. 226 or 227

<b>Student:</b>	<b>Grade:</b>	<b>Birthdate:</b>
<b>Parent(s):</b>	<b>Phone:</b>	<b>Email:</b>
<b>Home Teacher:</b>	<b>Contact Teacher:</b>	
<i>Parent and Contact Teacher must sign and date below when ILP is complete.</i>		
<b>Parent signature:</b>		<b>Date:</b>
<b>Contact (Advisory) teacher signature:</b>		<b>Date:</b>

*At least 50% of course work must be in core subjects, that include: Language Arts, Math, Science, Social Studies, Technology and World Languages. Other subjects may include: Music, Art, Physical Education/Health, and Electives.*

Complete the following information for each subject area. Boxes will expand when typing.

<b>Subject area:</b> <i>Language Arts</i> <small>Includes Reading, Composition, Spelling, Phonics, Grammar, Handwriting</small>	<b>Fall semester:</b> <input type="checkbox"/> <b>Spring semester:</b> <input type="checkbox"/>
Is this a Parent Designed Course? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, complete PDC form with course details and attach to ILP.	
<b>Curriculum source:</b> List name of distance school or provider of online, printed or computer-based course:	
<b>Primary textbook or materials</b> (if known):	
<b>Grade</b> will be recommended by (check one): Parent and contact teacher <input type="checkbox"/> Contact teacher only <input type="checkbox"/> Distance school advisory teacher <input type="checkbox"/> Tutor <input type="checkbox"/> Other <input type="checkbox"/>	
<b>Grading system to be used:</b> (check one) Pass or Fail <input type="checkbox"/> Letter Grade <input type="checkbox"/> A=90-100 B=80-89 C=70-79 D=60-69 F=68 and below Proficiency (ADV, P, BP) <input type="checkbox"/> Other <input type="checkbox"/>	
<b>List any planned tutoring or lessons</b> (include workshops, classes, field trips):	
<b>Name of tutor/teacher:</b>	
<b>Notes or Addendums:</b>	<b>Date:</b>

<b>Subject area:</b> <i>Mathematics</i>	<b>Fall semester:</b> <input type="checkbox"/> <b>Spring semester:</b> <input type="checkbox"/>
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<b>Notes or Addendums:</b>	<b>Date:</b>

<b>Subject area:</b> <i>Social Studies</i> <small>Includes History, Geography, Civics</small>	<b>Fall semester:</b> <input type="checkbox"/> <b>Spring semester:</b> <input type="checkbox"/>
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<b>Name of tutor/teacher:</b>	
<b>Notes or Addendums:</b>	<b>Date:</b>

<b>Subject area:</b> <i>Science</i>	<b>Fall semester:</b> <input type="checkbox"/> <b>Spring semester:</b> <input type="checkbox"/>
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**For office use only:**

**Quarterly parent/teacher meetings**

Quarter	Date	In person or by phone	Viewed work samples?	Notes
1st				
2nd				
3rd				
4th				

**Monthly contact: state type** (P-phone, E-email exchange, V-visit, L-letter, S-Skype, M-meeting)

Month	July	Aug.	Sept.	Oct.	Nov.	Dec.	Jan.	Feb.	Mar.	April	May	June
Date												
Type												

**Notes:**