

FORESTVILLE UNION ELEMENTARY SCHOOL DISTRICT
FORESTVILLE ELEMENTARY SCHOOL
MASTER AGREEMENT FOR SHORT TERM INDEPENDENT STUDY
(Minimum 5/maximum 20 school days per contract)

Name: _____ **Student ID#:** _____ **Grade:** _____

Reason for planned absence: _____

Beginning Date: _____ **End Date:** _____ **Number of Days:** _____

OBJECTIVES: All course objectives will be consistent with the guidelines established in the curriculum of student's school of enrollment. For each course attempted there will be a Short-Term Independent Study Assignment Sheet which will become part of this agreement and which will contain additional descriptions of student's objectives, study methods, resources supplied and evaluation. The Short-Term Independent Study Assignment Sheet and this Master Agreement Form will list all subjects attempted as well as grade/assignment points attempted and completed. Independent Study for anticipated absence is appropriate only when a student will be absent from school for 5 or more consecutive days with a maximum of 20 school days per contract.

DIRECTIONS TO PARENT/GUARDIAN:

STEP 1: Pick up **Master Agreement for Independent Study** from school office or teacher at least 5 days in advance of absence.

STEP 2: Submit completed **Master Agreement for Independent Study**, including parent/guardian signature to teacher.

STEP 3: Obtain assignments from teacher on Assignment Sheet.

STEP 4: Obtain approval of:

Supervising Teacher

Date

Attendance Secretary Signature

Date

****Steps 1-4 must be completed before the beginning date of the independent study contract.**

STEP 5: Return all assigned work to teachers on the day you are scheduled to return to class.

SCHEDULED TEACHER/STUDENT MEETING:

A student participating in Short-Term Independent Study shall continue to be enrolled in regular classes at his/her school. (Education Code 51747-51749.3.) A student will receive credit for Independent Study upon teacher approved completion of the assignment(s). Upon the first day the student returns to school, the student shall present evidence to teacher that all assignments have been met.

EVALUATION ACTIVITIES:

*Assignment Complete *Student Log *Demonstration of Skill *Oral/Written *Written Test/Report
*Presentation

STUDENT RESPONSIBILITIES/UNDERSTANDING:

1. I understand that this agreement will remain in effect as written, unless amended.
2. **I will turn in assignments to my teachers upon the first day I return to school.**
3. I understand that if I miss fail to complete all the work on my assignment sheet, I will receive an absence.
4. I am eligible for all Forestville Union School District services and resources.

SCHOOL RESPONSIBILITIES/UNDERSTANDINGS:

1. The teacher will be responsible for the evaluation of the work presented by the student under the terms of this Independent Study Agreement to determine the credit earned by the student.
2. The teacher will offer guidance and provide resources to the student as specified in each course contract or assignment.

AGREEMENT: We understand that Independent Study is a continuously voluntary, educational alternative in which no student may be required to participate and that each student has the continuing option of classroom instruction available. The student shall have access to resources of the school district, including but not limited to teachers, textbooks, supplementary materials, and library privileges.

We have read the terms of this Agreement and hereby agree to all the conditions, including those in the contracts and assignments.

Student Signature

Date

Parent/Guardian/Caregiver Signature

Date

COMPLETION OF SHORT-TERM INDEPENDENT STUDY VERIFIED BY SUPERVISING TEACHER:

Teacher's Signature

Date

Days of Attendance Granted