

Spencerport High School Student Success (Learning) Plan

The purpose of this plan is to support the student in successfully learning the priority content/skills needed for this course, and/or to ensure that the student has the ability to demonstrate this knowledge through an assessment.

This template is a tool to help document and communicate this plan with the student and family.

Student Name: _____

School Year: _____

Student Grade (*circle one*): 9 10 11 12 Academy

Administrator: _____

Teacher Name: _____

Quarter (*circle one*): 1 2 3 4

Course Name: _____

Type (*circle one*): Incomplete Retake

Required Learning OR Evidence of Learning	Plan for Completion <i>Where it will be done and if it is an assessment, what work will be done to prepare for it</i>	Timeline <i>Estimated Completion Due Date</i>	Completed?

Student's Signature: _____

Date: _____

Teacher's Signature: _____

Date: _____

Details of Parent/Guardian Contact to share plan and updates regarding progress (*name, date, form of contact, etc.*):

Plan Completed: _____

Plan Not Completed: _____

Grade Change Form Completed: _____