



ALAMEDA  
COMMUNITY  
LEARNING  
CENTER



## Independent Study Contract

**Learner** (Print Name \_\_\_\_\_):

I understand and agree:

- Independent Study is an optional form of education that my parents and I have voluntarily chosen in order to sustain my grade-level studies while I am away from the classroom.
- I am entitled to use the textbooks and academic supplies needed to complete the assignments.
- I understand my attendance and grade credit/marks are based on completion of the assignments. If the assignments are not completed, then my absence will be listed as unexcused and no grade credits will be earned for the assignments.
- I understand that my parents(s) will supervise the completion of the assignments and provide help as needed to complete the assignments. If I am unable to complete an assignment because I need further clarification and my parent cannot provide assistance, they will make a note on the assignment for the teacher to review the concept with me upon my return to the classroom.

Learner Signature: \_\_\_\_\_

**Parent/Guardian** (Print Name \_\_\_\_\_):

I understand that the major objective of Independent Study is to provide a voluntary educational alternative to allow my son or daughter to keep current with their studies. I agree to the above conditions listed under "Learner":

- Learning objectives are consistent with and evaluated in the same manner that they would be if he or she were not away from school.
- If my child has an Individualized Education Program (IEP), the IEP must specifically provide for his or her enrollment in Independent Study.
- The supervising teacher(s) who sign this agreement will review the assignments and meet with my child upon their return to school if it is deemed necessary to measure their progress in any of the assigned subject areas.
- I am responsible for the supervision of my child while he or she is completing the assigned work. If I cannot assist my child with an assigned task for academic reasons, I will note it on the assignment as stated above.
- I am responsible, not my child, for submitting the completed Independent Study Contract to the office within three (3) days of my child's return to school as noted by the "Exit Date" on the contract.
- I am liable for the cost of replacement or repair of damaged or destroyed books and other school property checked out to my son or daughter.
- I understand the learner's attendance and grade credit marks are based on completion of the assignments. Partial completion of assignments must meet the minimum number of required attendance minutes in order for attendance credit to be given. Failure to complete the assigned work or minimal completion of the assignments will result in the absence being listed as unexcused in the learner's permanent attendance record and no grade credits will be earned.
- For learners on Independent Study Contracts in duration of 5 or more days, as a result of injury or illness, weekly check-ins of assignments will be required. If assignments are incomplete, the lead facilitator will conduct an evaluation to determine if the student shall be allowed to remain on independent study.

Parent/Guardian Signature: \_\_\_\_\_

*For office use only:*

	Date:
	Date:

# ACLCLC

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Student Name:	Student #	Grade:
Phone:	Reason for Contract:	
Contract Entry Date:	Contract Exit Date:	

SUBJECT	ASSIGNMENT	COMPLETION DATE
FACILITATOR SIGNATURE		DATE

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