

INDEPENDENT SCHOOL DISTRICT 196
Rosemount-Apple Valley-Eagan, Minnesota
Educating our students to reach their full potential

Series Number 602.6.2.7P Adopted June 2007 Revised September 2008

Title Meeting Summary for Consideration of Single Subject Acceleration

Student's name _____ Date _____

School _____ Grade _____ Subject area _____

Signature of people in attendance and their recommendation for whether the student should be approved for single subject acceleration:

	Recommended	Not Recommended		Recommended	Not Recommended
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	<input type="checkbox"/>	<input type="checkbox"/>	_____	<input type="checkbox"/>	<input type="checkbox"/>

Summary:

The team decision process has been completed in accordance with Regulation 602.6.2AR, Single Subject Acceleration of Students in Grades K-8. The above-named student is:

- not approved for single subject acceleration in _____.
- approved for single subject acceleration from _____ to _____.

Signature of principal Date

Parent or Guardian: Please sign below to indicate that you are aware of the decision that has been made.

Signature of parent or guardian Date

- Copy to student's cumulative folder
- Copy to director of teaching and learning
- If approved, copy to student information supervisor
- Copy to school's case study files