This program is open to youth that have completed grade 9 or above who meet one or more of the state eligibility guidelines.

Students are given the opportunity to successfully complete/recover up to 1.0 credit required towards graduation.

- If your child failed a FIRST semester class, the session runs from 8:00-12:15 (with a 15-minute break) First Day – Tuesday, June 18th (Students will attend class Tuesday – Friday during the first week only) after that, Monday-Thursday, June 24 – July 3rd.
- If your child failed a SECOND semester class, the session runs from 8:00-12:15 (with a 15-minute break) Monday-Thursday from July 8th – July 25th.
- These sessions may be subject to change based on student enrollment numbers.
- Attendance is mandatory in order to receive full credit.
- Your son/daughter’s teacher or counselor will be contacting you to let you know if he/she failed their class.

Note: if applicant is an out of district student please attach a “referring district” student data sheet with MARSS Number, as well as the Duluth Public Schools Registration Form signed by a parent/guardian or the adult student.

Note: Other classes may be arranged with special permission. Please contact the ALC office.

*Counselors are required to complete and sign the CLP on the reverse side of this form.*
ALC 2019-2020 CONTINUAL LEARNING PLAN

NAME______________________________________ BIRTHDATE ___________ GRADE __________

PARENT NAME (PRINTED) ________________________________________________________________

ADDRESS ______________________________________________________________________________

STUDENT PHONE NUMBER (____) ____________ PARENT/GUARDIAN PHONE (____) ____________

Indicators of Need: (Check √ all that apply)

☐ Performs substantially below the performance level for pupils of the same age in locally determined achievement test

☐ Has experienced mental health problems.

☐ Has experienced Homelessness sometime within six months before requesting a transfer to an eligible program.

☐ Speaks English as a second language or has limited English proficiency (LEP).

☐ Has been excluded or expelled according to sections 121A.40 to 121A.56.

☐ Has been referred by a school district for enrollment in an eligible program or program pursuant to section 124D.69.

☐ Is a victim of physical or sexual abuse.

☐ Is at least one year behind in satisfactorily completing coursework or obtaining credits for graduation

☐ Is pregnant or Is a parent.

☐ Has been assessed as chemically dependent.

☐ Has withdrawn from school or has been chronically truant

☐ Student has met one or more of this criteria.

Current Services:

Special Education (IEP) __________

504 __________________________

Families in transition ____________

Please attach supplemental information about required 504 Plan or IEP learning adaptations and/or modifications.

Goal for current school year: ____________________________________________________________

___________________________________________________________________________________

___________________________________________________________________________________

PARENT SIGNATURE _________________________________________________________________

STUDENT SIGNATURE ______________________________________________________________

STAFF SIGNATURE _________________________________________________________________

March 25, 2019