WRITTEN ACCELERATION PLAN
FOR

Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade.: \_\_\_\_\_

Type of Acceleration Subject (specify): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Grade (from-to): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Early Entrance

M/D/Y

**Transition Period** Begins: Ends: ­­­­­

 M/D/Y

Student is currently on a WEP: \_\_\_\_ Yes No

From: .\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

To: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Placement**

GRADE/SUBJECT

GRADE/SUBJECT

BUILDING

BUILDING

Strategies to ensure a successful transition:

Strategies to ensure continuous progress following the transition period:

Requirements and Procedures for Earning High School Credit Prior to Entering High School (if applicable)

Staff member assigned to monitor the implementation of this plan:

Position

Name

 POSITION

Signatures

Date

**PARENT/GUARDIAN/REPRESENTATIVE**

Date

**School district representative**