

Short-Term Independent Study Application 2023-2024

When a student is unable to participate in site-based instruction for a **minimum of three (3) and a maximum of fourteen (14) consecutive school days during the school year**, Short-Term Independent Study may be made available to the student. Students are strongly discouraged from missing school as it causes the student to fall behind academically. Family emergencies or special events, however, sometimes necessitate travel out of the area. In order to avoid penalties for missing class for these reasons, students must contract to do work during the period of the absence. While Short-Term Independent Study allows students to avoid unexcused absences and allows the school to collect money for attendance, it can have a negative impact on learning. Short-Term Independent Study is an optional educational alternative in which no student is required to participate.

To be eligible for a Short-Term Independent Study contract, the student must have a good attendance record (minimal unexcused absences or tardies), be in good academic standing, and submit an application to their school site with 10 school days notice. Short-Term Independent Study may be requested up to two times in a given school year (with a maximum total number of fourteen days for the entire year). Although Short-Term Independent Study accommodates most students, **principals may deny the request based on the following:**

- Academic or attendance concerns.
- Failure to complete previous Short-Term Independent Study contracts.
- Conflict with state testing schedules.

Short-Term Independent Study may not be available during the first 10 days of school, finals week, during statewide testing or the last week of school. If a student does not complete the independent study contract, the absences will be considered "unexcused", and will be added in when considering truancy referrals for the student.

For Special Education students, a Short-Term Independent Study agreement must be completed in conjunction with the IEP process. **An addendum to the IEP** must be completed prior to the approval of Short-Term Independent Study.

A student must withdraw from our schools (and enroll in another district) if there is a request for more than fourteen (14) days of Short-Term Independent Study for reasons other than medical or emergency. Re-enrollment in our district will be dependent on current openings and the previous school/classroom placement is not guaranteed.

As the parent/guardian requesting Short-Term Independent Study, I understand the following:

- I will be my child's teacher during the time of this contract.
- I agree to minimize the detrimental effect of absences by having my child complete assignments given by their teacher(s).
- I am aware that failure to complete assignments may result in academic regression.
- I am aware that the materials completed (or not completed) during the contract may be part of future assignments or assessments.
- I am aware that uncompleted Short-Term Independent Study days will be considered "unexcused" absences.
- I am aware that the work provided may not be a direct replica of what occurs in the classroom and may consist of preview and review of topics.

Upon approval of the application by the site administrator, individual teachers will submit Independent Study assignments.

The assignments need to be turned in within five days of the student's return to school, unless there are special circumstances that need to be cleared with the administrator.

| Student Name | Parent/Guardian Requesting STIP | | Today's Date | Today's Date | |
|--|--|---|--|-----------------------------|----------|
| Date of 1 st Day Student will not be in attendance | Date Student Returns to School | | Total School D | Total School Days out: | |
| Phone Number | | Email Address | | | |
| Reason for Short Term Independent Studies Emergency | | Please provide the details here: | | | |
| Medical (verification needed) | | | | | |
| ☐ Vacation☐ Other | | | | | |
| ist other siblings in the district ma | king a similar requ | uest: | | | |
| Student Name | | Site | | Grade | |
| | | | | | |
| | | | | |] |
| 8/17/2023-8/30/2023 5/30/2024-6/6/2024 | es that are unavai | lable for Short-Term I | ndependent Study | , | |
| Secondary dates that are unav • 12/20/2023-12/22/20 | | • | udy | | |
| Will you have access to technolo ☐ Yes ☐ No | gy resources (inte | | phone,etc.) while | on this contrac | ct |
| Student: I agree to complete all wo understand that I may have addition teachers within the agreed upon times. | nal work to complete ne frame. I am aware | upon my return to schoo that failure to do so ma | ol. I will complete this y result in academic r | work and turn it egression. | in to my |
| Parent/Guardian: I agree to minim him/her by his/her teacher. I am aw additional work to complete upon him | are that failure to do | so may result in acader | | | |
| Student | | | Date | | |
| Parent/Guardian | | — ———— Date | | | |

| Office use only | | | | | |
|--|--|--|--|--|--|
| Previous grading period GPA or performance: Current grades/Performance: | | | | | |
| Any previous requests for Short-Term Independent Studies incomplete this year Yes? | | | | | |
| Previous STIS (date): Absences (year to date): Tardies (year to date): | | | | | |
| Is this a student with an IEP? Yes No | | | | | |
| Any additional information? | | | | | |
| | | | | | |
| Request Approved Request Denied | | | | | |
| If denied, reason: | | | | | |
| | | | | | |
| Administrator signature : Date: | | | | | |
| | | | | | |

Vacaville Unified School District Short- Term Independent Study Assignment Form

| Student Name | Student ID# | Grade | | | |
|---|-------------------|----------------|--|--|--|
| STIP Start Date | STIP Return Date | # of Days Gone | | | |
| Teacher Name | Teacher Signature | | | | |
| ☐ The student will have access to technology resources? ☐ The student will NOT have access to a device and technology? | | | | | |
| What materials are needed? (Attach worksheets, textbooks, consumables, instrument, sketch book etc.) | | | | | |
| List Student Assignments OR Assignments are posted on Google Classroom/SeeSaw *Assignments may be posted daily or as assigned. | | | | | |
| DEDCEMITACE OF WORK COMPLETED. | DATE | | | | |
| PERCENTAGE OF WORK COMPLETED: DATE: Please include work samples (2-3 pages) if work was <u>not</u> done online. Online work does not need to be printed. TEACHER SIGNATURE: | | | | | |

^{***}This packet must be returned to the office and signed by the teacher or the agreement will become null and void.