

# CENTRAL MN JOINT POWERS DISTRICT 6074 ALC CONTINUAL LEARNING PLAN

Serving District 742	Diploma School	ALC Program	Counselor/Advisor	Qualifying Criteria	Student ID/Lunch #	Grad Year	Qualifying Criteria (below)
Student Name					DOB/Age		
Parent Name			Parent Phone		Student Cell Phone		
Home Address							

What are Your Sources of Support? Who Cares about Your Success?
What Led you Here? What do you Want to Accomplish Here?

**REQUIRED GOALS & PLAN/STEPS (ACADEMIC DEVELOPMENT, PERSONAL DEVELOPMENT AND CAREER DEVELOPMENT)**

PERFORMANCE CRITERIA RUBRIC:	1-NOT MASTERED	2-PARTIAL MASTERY	3-ACCEPTABLE	4-EXEMPLARY								
ACADEMIC GOAL:	PLAN TO OBTAIN GOAL:			EVALUATIONS/DATES: <table style="width: 100%; text-align: center;"> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>__/__/__</td> <td>__/__/__</td> <td>__/__/__</td> <td>__/__/__</td> </tr> </table>	1	2	3	4	__/__/__	__/__/__	__/__/__	__/__/__
1	2	3	4									
__/__/__	__/__/__	__/__/__	__/__/__									
PERSONAL GOAL:	PLAN TO OBTAIN GOAL:			EVALUATIONS/DATES: <table style="width: 100%; text-align: center;"> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>__/__/__</td> <td>__/__/__</td> <td>__/__/__</td> <td>__/__/__</td> </tr> </table>	1	2	3	4	__/__/__	__/__/__	__/__/__	__/__/__
1	2	3	4									
__/__/__	__/__/__	__/__/__	__/__/__									
CAREER GOAL:	PLAN TO OBTAIN GOAL:			EVALUATION/DATES: <table style="width: 100%; text-align: center;"> <tr> <td>1</td> <td>2</td> <td>3</td> <td>4</td> </tr> <tr> <td>__/__/__</td> <td>__/__/__</td> <td>__/__/__</td> <td>__/__/__</td> </tr> </table>	1	2	3	4	__/__/__	__/__/__	__/__/__	__/__/__
1	2	3	4									
__/__/__	__/__/__	__/__/__	__/__/__									

PARENT/GUARDIAN SIGNATURE (REQUIRED FOR STUDENTS UNDER 18)	DATE
STUDENT SIGNATURE	DATE
REVIEWING COUNSELOR	DATE

**AT RISK QUALIFYING CATEGORIES (ENTER ABOVE):**

1. Performs substantially below the performance level for pupils of the same age in locally determined achievement test.
2. Is behind in satisfactorily completing coursework or obtaining credits for graduation.
3. Is pregnant or is a parent
4. Has been assessed as chemically dependent
5. Has been excluded or expelled according to Section 121A.40 to 121A.56
6. Has been referred by a school district for enrollment in an eligible program or a program pursuant to section 124D.69
7. Is a victim of physical or sexual abuse
8. Has experienced mental health problems
9. Has experienced homelessness sometime within the last six months before requesting a transfer to an eligible program
10. Speaks English as a second language or has limited English proficiency
11. Has withdrawn from school or has been chronically truant
12. Is being treated in a hospital in the seven-county metropolitan area for cancer or other life threatening illness or is the sibling of an eligible pupil who is being currently treated, and resides with the pupil's family at least 60 miles beyond the outside boundary of the seven county area.