

THE KENTON COUNTY BOARD OF EDUCATION

1055 EATON DRIVE, FORT WRIGHT, KENTUCKY

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WEBSITE: www.kenton.kyschools.us

Dr. Henry Webb, Superintendent of Schools

KCSD ISSUE PAPER

DATE:

November 19, 2018

AGENDA ITEM (ACTION ITEM):

Receive New Administrative Procedure 08.1131 AP.22 "Curriculum and Instruction: Alternative Credit Options"

APPLICABLE BOARD POLICY:

01.51 "Administrative Procedures"

HISTORY/BACKGROUND:

Due to the increase in the number of high school students who are pursuing alternative credit options, this procedure was developed to support the implementation of the revised board policy.

FISCAL/BUDGETARY IMPACT:

\$0.00 at the district level.

RECOMMENDATION:

CONTACT PERSON:

Martha Setters, Assistant Superintendent of Curriculum and Instruction, Tara Sides, Director of Reducing Barriers for Learning

Principal

Director

Superintendent

Use this form to submit your request to the Superintendent for items to be added to the Board Meeting Agenda.

Principal –complete, print, sign and send to your Director. Director –if approved, sign and put in the Superintendent's mailbox.

CURRICULUM AND INSTRUCTION

Performance-Based Learning Contract

On		_/,	will begin this contract that will ensure his/her success in				
	(S	Starting Date)	will begin this contract that will ensure his/her success in (Name of Student)				
the			High School Performance-Based Learning Program.				
Pre-	Plac	ement Criteria:					
		Appropriate da stakeholders.	ta is available and has been reviewed by the Principal and other				
		☐ Data supports that an appropriate continuum of services has been provided.					
		If the student receives special education services, an ARC has determined placement of the student on Performance-Based Learning and the IEP has been adjusted to reflect the revised educational setting.					
		☐ The student has internet and computer access.					
		A ' A	parent(s), student, and other stakeholders are in agreement with the decision Performance-Based Learning Agreement.				
			rformance-Based Learning Program is a virtual learning program with				
rigo:	rses rous Scho	and aligned w abil ol Name)	h Edgenuity with oversight and support from school personnel. Coursework is ith Kentucky Academic Standards. Your schedule will be matched to the best of ity based on the curriculum offered through Edgenuity. Scheduled ill reflect a full schedule at				
		2 ,	ill reflect a full schedule at (School Name)				
The	stuc	lent agrees to th	e following requirements of the Performance-Based Learning Program:				
	1.		ust remain enrolled at and will adhere to the Student Code (School Name)				
		•	ehavior and Conduct.				
	2.	Participation i	n school activities/events will be determined by the Principal.				
	3.	The student w	ill work toward one (1) of the following diplomas:				
			enton County Basic Diploma (The student must be enrolled for 8 semesters of high application must be completed and signed by the student and parent/guardian.)				
		□ 28 credit(5	Diploma School Name)				
	4.	Participation requirements.	in graduation ceremonies will be determined upon completion of graduation				
	5.		in progress review conferences at least once a semester at the school or more determined by the Principal.				
Notes:							
<u> </u>							

Performance-Based Learning Contract

The student agrees to the following Expectations of the Performance-Based Learning Program:

- 1. Develop a daily schedule to meet weekly goals assigned by the program coordinator.
- 2. Be on time for all scheduled meetings.
- 3. Log on daily and actively make progress in his/her coursework.
- 4. <u>Meet or exceed the individualized weekly goals set forth by the program coordinator in the weekly updates.</u>
- 5. <u>Communicate with the program coordinator any questions, concerns, status changes, quiz/test retakes, etc. to ensure congruency between the program coordinator, the student, and/or parent/guardian.</u>
- 6. Respond to phone or email communication from the school within 24 hours.

Phone Number:	Email:
Notes:	

As the parent/guardian of a student in the Performance-Based Learning Program, I agree to:

- Partner with the school in the success of my child.
- Monitor my child's implementation of his/her daily schedule and progress toward weekly goals.
- Participate in progress review conferences at least once per semester at the school or more frequently if determined by the Principal.
- Be available to the school so information about my child's progress can be shared and respond to messages within a reasonable amount of time (preferably one business day).

The best way to communicate with me about my child's progress is:

Phone (Please call this number):							
Email:							
Other:							
The best time of day to reach me is:							
Notes:							

Performance-Based Learning Contract

The Performance-Based Learning Program agrees to the following:

• Communicate regularly with the parent and student about progress and weekly goals.						
Be available during school hours for que	e during school hours for questions and academic support.					
Respond to emails and phone calls within day).	n a reasonable amount of time (preferably one business					
• Participate in a progress review conference at least once per semester at the s frequently if determined by the Principal.						
Support social/emotional services if app.	licable.					
Social/Emotional Services? Yes	No					
Type of Social/Emotional Service (Cir	Type of Social/Emotional Service (Circle all that apply):					
Small Group Sessions Scheduled	Sessions with School Counselor KTP					
School-Based Mental Health Provider	Mental Health Provider Outside of School					
Please explain how the student will continue receiving his/her school-based services: If a student receives services through an outside provider: Frequency: Provider:						
Consent to share on file: Yes No						
Notes:						
	ident is not being successful as a Performance-Base e measures which may include removal of the opportunit g Program and a return to the regular school day.					
By signing this contract, all parties agree to the sti	pulations in the document and will follow accordingly.					
Printed Name of Student	Student Signature					
Printed Name of Parent/Guardian	Parent/Guardian Signature					
Printed Name of Coordinator/Administrator	Coordinator/Administrator Signature					
Printed Name of Administrator	Administrator Signature					

Performance-Based Learning Contract

WEEKLY CHECK-IN SCHEDULE

Frequency (Daily, Weekly, etc.)	Check-In Type	Other
	(Email Progress Report, Phone, Scheduled Time at School, etc.)	
WHO TO CONTACT:		
Performance-Based Learning Sch	ool Coordinator	
Name:		
Phone Number:		-
Email:		
Contact the Performance-Based Le how it works, student academic sup receive a weekly report, generate b	port, troubleshooting, and que	estions about progress. Expect to
Any other questions or concerns,	contact:	
Name:		
Role:		
Phone Number:		-
Email:		

**Once the contract is complete, make a copy for all parties, send a copy to the District PBI designee, and complete the only PBI form.