



**CAPISTRANO UNIFIED SCHOOL DISTRICT**  
**San Juan Capistrano, California 92675**

**SHORT-TERM INDEPENDENT STUDY MASTER AGREEMENT**

**Beginning Date of Agreement:** \_\_\_\_\_ **Ending Date of Agreement:** \_\_\_\_\_  
**School of Enrollment:** \_\_\_\_\_ **Total school days requested:** \_\_\_\_\_  
**Student** \_\_\_\_\_ **Grade** \_\_\_\_\_ **Date of Birth** \_\_\_\_\_  
**Parent/Guardian** \_\_\_\_\_ **Parent email Address** \_\_\_\_\_  
**Address** \_\_\_\_\_ **City** \_\_\_\_\_ **Zip** \_\_\_\_\_  
**Home Phone** (\_\_\_\_) \_\_\_\_\_ **Work** (\_\_\_\_) \_\_\_\_\_ **Cell** (\_\_\_\_) \_\_\_\_\_

**MANNER, TIME, FREQUENCY AND PLACE FOR SUBMITTING ASSIGNMENTS AND COMMUNICATING WITH PUPIL'S PARENT/GUARDIAN REGARDING A PUPIL'S ACADEMIC PROGRESS:** The student will complete all assignments/coursework listed on the Independent Study Assignment Sheet and return the work and Assignment Sheet to the supervising teacher on the day the student returns to the classroom. The teacher will evaluate/grade completed assignments and communicate this evaluation to the student's parents/guardians.

**Manner:** In-person **Frequency:** Upon return **Place:** Classroom **Day:** \_\_\_\_\_ **Time:** \_\_\_\_\_

**OBJECTIVES, METHODS OF STUDY, METHODS OF EVALUATION, RESOURCES AND PERSONNEL:** The student will complete all assignments listed on the Independent Study Assignment Sheet. Assignment and subject/course objectives reflect the curriculum adopted by the district's governing board and are consistent with district standards as outlined in the district's subject/course descriptions. The specific objectives, methods of study, methods of evaluation, and resources for each assignment covered by this agreement are described on the Independent Study Assignment Sheet. Any subsidiary agreements are also part of this agreement. All students have access to connectivity and devices adequate to participate in the educational program and complete assigned work. If your child has not checked out a chrome book, contact the school office.

**MAXIMUM LENGTH OF TIME TO COMPLETE AN ASSIGNMENT, SATISFACTORY EDUCATIONAL PROGRESS, NUMBER OF MISSED ASSIGNMENTS ALLOWED BEFORE AN EVALUATION:** According to the district school policy for grades K through 12, the maximum length of time allowed between the assignment and the date the assignment is due is 14 school days. (14 school days in a school year is the maximum number of days for short-term independent study). If four assignments listed on this agreement are missed or incomplete, and/or a student is not making satisfactory educational progress, an evaluation will be made to determine whether independent study is an appropriate strategy for this student. A written record of this evaluation will be placed in the student's cumulative file and maintained for a period of three years from the date of the evaluation and, if the student transfers to another California public school, the record shall be forwarded to that school. Satisfactory educational progress is determined based on the all of the following indicators: The pupil's achievement and engagement in the independent study program, as indicated by the pupil's performance on applicable pupil-level measures of pupil achievement and pupil engagement, the completion of assignments, assessments, or other indicators that evidence that the pupil is working on assignments, learning required concepts, as determined by the supervising teacher, progressing toward successful completion of the course of study or individual course, as determined by the teacher. *If a student requests a short-term independent study agreement and does not satisfactorily complete at least 70% of the assignments, that student will not be eligible to request another short-term independent study agreement for the remainder of the school year.*

**COURSE/CLASS CREDITS (To be completed by Office)**

| Elementary Subjects | Course Credits<br>(# of days of the contract) | Middle & High School<br>Courses | Course Credits<br>(# of days of the contract) |
|---------------------|---|---------------------------------|---|
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|                     |   |                                 |   |
|                     |   |                                 |   |
|                     |   |                                 |   |
|                     |   |                                 |   |
|                     |   |                                 |   |

**ACADEMIC AND OTHER SUPPORTS:** The major objective for the duration of the agreement is to enable the student to keep current with his/her studies for the period covered by the agreement. The district will provide instructional materials, teacher support/assistance and other necessary items and resources as specified on the Assignment Sheet.

**VOLUNTARY STATEMENT:** Independent Study is an optional educational alternative that students voluntarily select, including expelled students and/or students whose expulsion has been suspended (Education Code §48915 or §48917). All students who choose independent study have the continuing option of returning to the classroom.

**EQUITABLE PROVISION OF RESOURCES AND SERVICES:** The independent study content is aligned to grade level standards substantially equivalent to in-person instruction. High school students shall have access to all courses offered for graduation and approved by the University of California or the California State University as creditable under the A–G admissions criteria.

**Parent’s Agreement – I understand that:**

- I am responsible for supervising my child while they are completing the assigned work and for ensuring the submission of all assignments on the day my student returns to school.
- I am liable for the cost of replacement or repair for willfully damaged, destroyed, or lost books and other school property checked out by my student.

**Student’s Agreement – I understand that:**

- I am required to complete my assigned work by the due date, as listed on the Independent Study Assignment Sheet and turn it in on the first day when I return to school.
- I am entitled to textbooks and supplies, supervision by a certificated teacher, and all services and resources received by other students enrolled in my grade.

*If a student with exceptional needs has an Individual Education Plan (IEP), as defined in Education Code 56026, the student may participate in independent study, if the student’s individualized education program specifically provides for that participation. If a parent or guardian of an individual with exceptional needs requests independent study, the student’s individualized education program team shall make an individualized determination as to whether the student can receive a free appropriate public education in an independent study placement. A student’s ability to work independently, the student’s need for adult support, or the student’s need for special education or related services shall not preclude the individualized education program team from determining that the student can receive a free appropriate education in an independent study placement.*

**SIGNATURES AND DATES**

**Student** \_\_\_\_\_ **Date** \_\_\_\_\_

**Parent/Guardian** \_\_\_\_\_ **Date** \_\_\_\_\_

**Supervising Teacher** \_\_\_\_\_ **Date** \_\_\_\_\_

**Special Education Support (if applicable)** \_\_\_\_\_ **Date** \_\_\_\_\_

This ASSIGNMENT SHEET along with all completed assignments MUST be turned in the day the student returns to school.



CAPISTRANO UNIFIED SCHOOL DISTRICT  
Juan Capistrano, California 92675

## SHORT-TERM INDEPENDENT STUDY ASSIGNMENT SHEET

Beginning Date of Agreement: \_\_\_\_\_ Ending Date of Agreement: \_\_\_\_\_

Student \_\_\_\_\_ Grade \_\_\_\_\_

School of Enrollment: \_\_\_\_\_ Parent/Guardian \_\_\_\_\_

Subject Teacher Name \_\_\_\_\_ Subject Teacher Signature \_\_\_\_\_ Date \_\_\_\_\_

Special Education Teacher Name (if applicable) \_\_\_\_\_ Signature \_\_\_\_\_ Date \_\_\_\_\_

**Part 1: To be completed by the subject teacher prior to the beginning date of Independent Study**

- All assignments must be completed and turned in on the first day the student returns to school.
- The student's name, grade, subject, assignment and date must be on each page of every assignment.

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| <b>Subject:</b><br><b>Course objectives:</b>   |
| <b>Description of educational activities (methods of study):</b>   |
| <b>Materials, resources and personnel available to student:</b>  |
| <b>Methods of evaluation of assignments:</b><br><input type="checkbox"/> Written Assignment <input type="checkbox"/> Report <input type="checkbox"/> Test/Quiz <input type="checkbox"/> Project <input type="checkbox"/> Other |

**Part 2: To be completed by the Supervising teacher upon return of the student and submission of Assignment Sheet.**

|   |                         |
|---|-------------------------|
| <b>Teacher Comments/Grades</b><br>Number of days requested by parent: _____ Number of days of apportionment credit (# of days completed): _____   |                         |
| <i>My signature below indicates that I, the assigned supervising teacher, have personally evaluated the student's work, or that I have personally reviewed the evaluations made by other certificated teachers. I have marked each assignment with an evaluation.</i> |                         |
| _____<br>Supervising Teacher Signature  | _____<br>Date Evaluated |
| <b>For Supervising Teacher:</b> Attach one day's worth of student's original assignments (minimum of 2) to this Assignment Sheet and return to the school office.   |                         |