

**MOUNTAIN OAKS HOMESCHOOL**

**PERSONALIZED LEARNING PLAN**

**Student Name:**

**Grade:**

**Mentor Teacher:**

**Semester:**

**GOALS:**


**Mentor Teacher's Signature:**

**Date:**

**Parent's Signature:**

**Date:**

**Student's Signature:**

**Date:**

**AREAS OF TALENT:**


**MEANS TO ADDRESS AREAS OF TALENT:**


**CURRICULAR ADJUSTMENT:**


**WORKSHOPS:**

	Completed		Completed
_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____	<input type="checkbox"/>
_____	<input type="checkbox"/>	_____	<input type="checkbox"/>

**ENRICHMENT EDUCATIONAL EXPERIENCES: (Special Events, Field Trips, Etc.)**

_____	_____
_____	_____
_____	_____
_____	_____

**TESTS TAKEN:**

_____	_____
_____	_____
_____	_____

**RECOGNITION OF ACCOMPLISHMENTS:**

_____	_____
_____	_____
_____	_____

**PORTFOLIO MATERIALS:**

_____	_____
_____	_____
_____	_____
_____	_____
_____	_____

**STUDENT SUCCESS TEAM MEETINGS:**

_____
_____
_____

**RECAP / GOALS COMPLETED:**


**Mentor Teacher's Signature**

**Date**

**Parent's Signature**

**Date**

**Student's Signature**

**Date**