



RISE CHARTER SCHOOL

Policy 2470F: Self-Directed Learner Application Form

Status: 2nd Reading

Original Adopted Date:

Last Reviewed Date:

Self-Directed Learner (SDL) Application & Postsecondary/Personal Goals Plan

Student Name: _____

Grade Level: _____

Date of Plan Submission: _____

Application Initiated By: _____

☐ Student ☐ Parent/Guardian ☐ Teacher

Relationship to Student: _____

Members in Attendance (for Plan Development/Approval):

- Student: _____
- Parent(s)/Guardian(s): _____
- Teacher(s): _____
- Administrator/Designee: _____

SECTION 1 — Eligibility Criteria

To be designated as a Self-Directed Learner, the student must meet one or more of the following criteria:

1. Mastery of Content Knowledge

Demonstrate mastery of all core subjects/classes at their grade level through:

- ☐ Most recent report card or progress report showing grades of at least **70%** in each core subject and/or GPA \geq 2.0
- ☐ Most recent NWEA MAP or ISAT results showing overall academic growth
- ☐ Mastery-based learning portfolio approved by administration

2. Timeliness, Motivation, and Goal-Setting

- Ability to submit assignments on time, demonstrate self-motivation, and set/achieve attainable goals
- Teacher attestation required in Section 5

3. Basic Math Mastery (Grades 5+) (Must meet one of the following requirements.)

- Demonstrate mastery of addition and multiplication (0–10) and related subtraction/division facts
- Assessed via the RISE Basic Math Assessment

4. Postsecondary Career & Education Goals (Grades 8+)

- Completion of an **official Career Pathway / Student Learning Plan**, kept up to date
- Evidence of progress toward postsecondary goals through:
 - Extended Learning Opportunities (ELO)
 - Advanced Opportunities
 - Challenging coursework (Policy 2435)
 - Successful completion of online courses or college credit

5. Personal Life Goals (Grades 8+)

Students must provide a **written description of their self-determined personal life goals**, including:

1. A statement of their personal life goals
2. An explanation of how **attending specific classes or participating in learning activities** will help achieve these personal goals **in addition to postsecondary/career goals**

Attach a document or write below:

6. Additional Considerations

- Any special circumstances (IEP, 504, EL, Migrant, McKinney-Vento, GT, etc.):

SECTION 2 — Flexibility Requested

Describe the flexible learning accommodations requested:

1. Requested Exemptions:

2. Supervision Plan (if outside classroom):

3. How Flexibility Supports Learning and Goals (Grade 8+ includes postsecondary and personal goals):

Optional Flexible Learning Options:

☐ Flexible attendance

- ☐ Virtual attendance
- ☐ Extended learning opportunities
- ☐ Curriculum compacting / acceleration / credit by exam
- ☐ Other: _____

Attach separate documentation if needed.

SECTION 3 — Requirements to Maintain SDL Status

To maintain Self-Directed Learner status, the student agrees to:

1. Continue to master grade-level knowledge and skills and demonstrate academic growth
 2. Comply with school conduct rules (except any exemptions granted)
 3. Submit **quarterly updates** outlining:
 - Planned instructional flexibility
 - Progress toward grade-level content mastery
 - Progress toward postsecondary goals (Grade 8+)
 - Progress toward personal life goals (Grade 8+)
-

SECTION 4 — Review & Rescission

- SDL designation may be rescinded if the student:
 - Fails to meet eligibility criteria
 - Fails to complete assignments on time
 - Does not follow the agreed-upon plan
 - SDL designation may also be voluntarily terminated by the student/parent at the end of a quarter, semester, or school year.
 - **Plan Review Date:** _____
 - **Rescission Date (if applicable):** _____
 - **Administrative Signature:** _____
-

SECTION 5 — Signatures

Student Acknowledgement

I wish to be designated as a Self-Directed Learner and will strive to meet all plan requirements.

Student Name (print): _____

Signature: _____ **Date:** _____

Parent/Guardian Permission

I grant permission for my child to participate as a Self-Directed Learner.

Parent/Guardian Name (print): _____

Signature: _____ **Date:** _____

Supervising Adult (if different from Parent/Guardian)

Acknowledges responsibility for supporting the student's SDL plan.

Name (print): _____

Signature: _____ **Date:** _____

Teacher Recommendation

I recommend the student be designated as a Self-Directed Learner based on mastery, growth, motivation, and goal setting.

Teacher Name (print): _____

Signature: _____ **Date:** _____

Administrator Approval

Administrator Name (print): _____

Signature: _____ **Date:** _____

SECTION 6 — Attachments / Supporting Documentation

- ☐ Career Pathway / Student Learning Plan (Grades 8+)

- ☐ Personal Life Goals Statement (Grades 8+)
- ☐ Mastery-Based Portfolio
- ☐ Assessment Reports (Report cards, NWEA MAP, ISAT)
- ☐ Other Supporting Documents: _____

Policy History:

Adopted on:

Revised on:

Reviewed on: