



Written Acceleration Plan

Student _____

Current Grade _____

Type of Acceleration

<input type="checkbox"/>	Subject (specify)
<input type="checkbox"/>	Grade (from – to)
<input type="checkbox"/>	Early Entrance
<input type="checkbox"/>	Early Graduation

Placement

From _____
Grade/Subject/Teacher

To _____
Grade/Subject/Teacher

Transition Period

Begins _____ Ends _____

Strategies to ensure a successful transition:

Strategies to ensure continuous progress following the transition period:

Requirements and procedures for earning high school credit prior to entering high school (if applicable):

Annual review of the placement and supporting comments:

Staff member assigned to monitor the implementation of this plan _____

Principal's Signature _____ Date _____

Current Teacher's Signature _____ Date _____

Placed Teacher's Signature _____ Date _____

Parent/Guardian Signature _____ Date _____