



# Request to Enroll in Madera Unified's Option for Independent Study K-8

Resident School: \_\_\_\_\_ Grade: \_\_\_\_\_ ID#: \_\_\_\_\_  
 Last Name: \_\_\_\_\_ First Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Age: \_\_\_\_\_  
 Address: \_\_\_\_\_ City: Madera Zip: 9363  
 Cell Phone: \_\_\_\_\_ Parent email: \_\_\_\_\_

\_\_\_\_\_ I understand that if my student is enrolled in Dual Language Instruction or MTEC, he/she cannot continue in that program if the option for Independent Student is chosen.

\_\_\_\_\_ My student is not enrolled in Dual Language Instruction or MTEC.

\_\_\_\_\_ I understand that if my student receives special education, related services, and any other services required by a pupil's individualized education program pursuant to Section 56341, admittance into Independent Study is contingent on my student's IEP specifying Independent Study as an instructional method EC51745(c). I must inform my school administrator so an IEP team meeting can be scheduled.

\_\_\_\_\_ My student does not receive special education, related services, or any other services required by an individualized education program.

\_\_\_\_\_ My student does receive special education, related services, or any other services required by an individualized education program.

\_\_\_\_\_ I understand that if my student has a 504 plan, admittance into Independent Study is contingent on my student's 504 specifying Independent Study as an instructional method. I must inform my school administrator so a 504 team meeting can be scheduled.

\_\_\_\_\_ My student does not have a 504 plan.

\_\_\_\_\_ My student does have a 504 plan.

\_\_\_\_\_ I understand that if my student receives designated and integrated instruction in English language development pursuant to Section 11300 of Title 5 of the California Code of Regulations for English learners, he/she will continue with this instruction, including assessment of English language proficiency, support to access curriculum, the ability to reclassify as fully English proficient.

\_\_\_\_\_ My student does not receive designated and integrated instruction in English language development.

\_\_\_\_\_ My student does receive designated and integrated instruction in English language development.

\_\_\_\_\_ I understand that the minimum amount of work my student must complete each day is as follows:

- Kindergarten: 180 minutes
- 1st-3rd: 230 minutes, plus 200 PE minutes per 10 school days
- 4th-6th: 240 minutes, plus 200 PE minutes per 10 school days
- 7th-8th: 400 minutes, plus 200 PE minutes per 10 school days

\_\_\_\_\_ I understand that my student must be supervised at home during school hours every school day.

\_\_\_\_\_ I understand that my student must interact with the teacher every school day (Weekly Meetings, Daily Office Hours, phone call, Grade level meetings, etc.), **and** that my student must complete work that can be checked by the teacher each school day. I understand that my student will need to be brought to school for Weekly Meetings that are not conducted remotely and all assessments.

I am requesting Independent Study for my student. I understand that I must meet with the Independent Study Teacher and administrator before my student will be accepted into the Madera Unified Option for Independent Study. I further understand that my student may need to come to the school site to turn in/pick up work, or to meet with the teacher, and/or to complete standardized testing. I am responsible for my student's transportation to and from the school site.

ParentGuardian/Caregiver Signature: \_\_\_\_\_ Date: \_\_\_\_\_

### OFFICE USE ONLY

|                                  |                                  |    |
|----------------------------------|----------------------------------|----|
| Meeting with Teacher or Team on: | Parents Accept Independent Study |    |
|                                  | Yes                              | No |
| Administrator Signature:         |                                  |    |