

**Innovations Academy Independent Study
CALENDAR OF LEARNING**

Learning Period: 1
ADA Possible: 19

Student: _____

I.A. Facilitator: _____

As the adult responsible for the daily monitoring / verification of subjects studied, this log accurately documents daily work completed by this student.

In my professional judgment, the student has completed work that has a value of _____ days.

Parent/Legal Guardian Signature Date

I.A. Teacher/Facilitator Signature Date

Use the calendar below to document the days on which your student participated in learning activities. Check the box to mark these days.

<input type="checkbox"/> Mon Aug 29	<input type="checkbox"/> Tues Aug 30	<input type="checkbox"/> Wed Aug 31	<input type="checkbox"/> Thurs Sept 1	<input type="checkbox"/> Fri Sept 2
<input type="checkbox"/> Mon Sept 5 HOLIDAY	<input type="checkbox"/> Tues Sept 6	<input type="checkbox"/> Wed Sept 7	<input type="checkbox"/> Thurs Sept 8	<input type="checkbox"/> Fri Sept 9
<input type="checkbox"/> Mon Sept 12	<input type="checkbox"/> Tues Sept 13	<input type="checkbox"/> Wed Sept 14	<input type="checkbox"/> Thurs Sept 15	<input type="checkbox"/> Fri Sept 16
<input type="checkbox"/> Mon Sept 19	<input type="checkbox"/> Tues Sept 20	<input type="checkbox"/> Wed Sept 21	<input type="checkbox"/> Thurs Sept 22	<input type="checkbox"/> Fri Sept 23

Use the chart below to document the concepts your student studied this learning period for each subject.

<u>Subjects</u> Language Arts: reading, writing, speaking, listening, spelling, grammar Math: computation, problem-solving, life skills, logic	Science: earth, physical, life Social Studies: history, geography, civics, economics, politics P.E.: physical activity, sports knowledge, health, nutrition
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LANGUAGE ARTS	MATH
SCIENCE	SOCIAL STUDIES

**Innovations Academy Independent Study
CALENDAR OF LEARNING**

Learning Period: 2
ADA Possible: 20

Student: _____

I.A. Facilitator: _____

As the adult responsible for the daily monitoring / verification of subjects studied, this log accurately documents daily work completed by this student.

In my professional judgment, the student has completed work that has a value of _____ days.

Parent/Legal Guardian Signature Date

I.A. Teacher/Facilitator Signature Date

Use the calendar below to document the days on which your student participated in learning activities. Check the box to mark these days.

<input type="checkbox"/> Mon Sept 26	<input type="checkbox"/> Tues Sept 27	<input type="checkbox"/> Wed Sept 28	<input type="checkbox"/> Thurs Sept 29	<input type="checkbox"/> Fri Sept 30
<input type="checkbox"/> Mon Oct 3	<input type="checkbox"/> Tues Oct 4	<input type="checkbox"/> Wed Oct 5	<input type="checkbox"/> Thurs Oct 6	<input type="checkbox"/> Fri Oct 7
<input type="checkbox"/> Mon Oct 10	<input type="checkbox"/> Tues Oct 11	<input type="checkbox"/> Wed Oct 12	<input type="checkbox"/> Thurs Oct 13	<input type="checkbox"/> Fri Oct 14
<input type="checkbox"/> Mon Oct 17	<input type="checkbox"/> Tues Oct 18	<input type="checkbox"/> Wed Oct 19	<input type="checkbox"/> Thurs Oct 20	<input type="checkbox"/> Fri Oct 21

Use the chart below to document the concepts your student studied this learning period for each subject.

<u>Subjects</u> Language Arts: reading, writing, speaking, listening, spelling, grammar Math: computation, problem-solving, life skills, logic	Science: earth, physical, life Social Studies: history, geography, civics, economics, politics P.E.: physical activity, sports knowledge, health, nutrition
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LANGUAGE ARTS	MATH
SCIENCE	SOCIAL STUDIES

**Innovations Academy Independent Study
CALENDAR OF LEARNING**

Learning Period: **3**
 ADA Possible: **19**

Student: _____

I.A. Facilitator: _____

As the adult responsible for the daily monitoring / verification of subjects studied, this log accurately documents daily work completed by this student.

In my professional judgment, the student has completed work that has a value of _____ days.

 Parent/Legal Guardian Signature Date

 I.A. Teacher/Facilitator Signature Date

Use the calendar below to document the days on which your student participated in learning activities. Check the box to mark these days.

<input type="checkbox"/> Mon Oct 24	<input type="checkbox"/> Tues Oct 25	<input type="checkbox"/> Wed Oct 26	<input type="checkbox"/> Thurs Oct 27	<input type="checkbox"/> Fri Oct 28
<input type="checkbox"/> Mon Oct 31	<input type="checkbox"/> Tues Nov 1	<input type="checkbox"/> Wed Nov 2	<input type="checkbox"/> Thurs Nov 3	<input type="checkbox"/> Fri Nov 4
<input type="checkbox"/> Mon Nov 7	<input type="checkbox"/> Tues Nov 8	<input type="checkbox"/> Wed Nov 9	<input type="checkbox"/> Thurs Nov 10	Fri Nov 11 HOLIDAY
<input type="checkbox"/> Mon Nov 14	<input type="checkbox"/> Tues Nov 15	<input type="checkbox"/> Wed Nov 16	<input type="checkbox"/> Thurs Nov 17	<input type="checkbox"/> Fri Nov 18

Use the chart below to document the concepts your student studied this learning period for each subject.

<u>Subjects</u> Language Arts: reading, writing, speaking, listening, spelling, grammar Math: computation, problem-solving, life skills, logic	Science: earth, physical, life Social Studies: history, geography, civics, economics, politics P.E.: physical activity, sports knowledge, health, nutrition
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LANGUAGE ARTS	MATH
SCIENCE	SOCIAL STUDIES

**Innovations Academy Independent Study
CALENDAR OF LEARNING**

Learning Period: **4**
 ADA Possible: **15**

Student: _____

I.A. Facilitator: _____

As the adult responsible for the daily monitoring / verification of subjects studied, this log accurately documents daily work completed by this student.

In my professional judgment, the student has completed work that has a value of _____ days.

 Parent/Legal Guardian Signature Date

 I.A. Teacher/Facilitator Signature Date

Use the calendar below to document the days on which your student participated in learning activities. Check the box to mark these days.

Mon Nov 21 HOLIDAY	Tues Nov 22 HOLIDAY	Wed Nov 23 HOLIDAY	Thurs Nov 24 HOLIDAY	Fri Nov 25 HOLIDAY
<input type="checkbox"/> Mon Nov 28	<input type="checkbox"/> Tues Nov 29	<input type="checkbox"/> Wed Nov 30	<input type="checkbox"/> Thurs Dec 1	<input type="checkbox"/> Fri Dec 2
<input type="checkbox"/> Mon Dec 5	<input type="checkbox"/> Tues Dec 6	<input type="checkbox"/> Wed Dec 7	<input type="checkbox"/> Thurs Dec 8	<input type="checkbox"/> Fri Dec 9
<input type="checkbox"/> Mon Dec 12	<input type="checkbox"/> Tues Dec 13	<input type="checkbox"/> Wed Dec 14	<input type="checkbox"/> Thurs Dec 15	<input type="checkbox"/> Fri Dec 16

Use the chart below to document the concepts your student studied this learning period for each subject.

<u>Subjects</u> Language Arts: reading, writing, speaking, listening, spelling, grammar Math: computation, problem-solving, life skills, logic	Science: earth, physical, life Social Studies: history, geography, civics, economics, politics P.E.: physical activity, sports knowledge, health, nutrition
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LANGUAGE ARTS	MATH
SCIENCE	SOCIAL STUDIES

**Innovations Academy Independent Study
CALENDAR OF LEARNING**

Learning Period: 5
ADA Possible: 13

Student: _____

I.A. Facilitator: _____

As the adult responsible for the daily monitoring / verification of subjects studied, this log accurately documents daily work completed by this student.

In my professional judgment, the student has completed work that has a value of _____ days.

Parent/Legal Guardian Signature Date

I.A. Teacher/Facilitator Signature Date

Use the calendar below to document the days on which your student participated in learning activities. Check the box to mark these days.

Mon Dec 26 HOLIDAY	Tues Dec 27 HOLIDAY	Wed Dec 28 HOLIDAY	Thurs Dec 29 HOLIDAY	Fri Dec 30 HOLIDAY
Mon Jan 2 HOLIDAY	<input type="checkbox"/> Tues Jan 3	<input type="checkbox"/> Wed Jan 4	<input type="checkbox"/> Thurs Jan 5	<input type="checkbox"/> Fri Jan 6
<input type="checkbox"/> Mon Jan 9	<input type="checkbox"/> Tues Jan 10	<input type="checkbox"/> Wed Jan 11	<input type="checkbox"/> Thurs Jan 12	<input type="checkbox"/> Fri Jan 13
Mon Jan 16 HOLIDAY	<input type="checkbox"/> Tues Jan 17	<input type="checkbox"/> Wed Jan 18	<input type="checkbox"/> Thurs Jan 19	<input type="checkbox"/> Fri Jan 20

Use the chart below to document the concepts your student studied this learning period for each subject.

<u>Subjects</u> Language Arts: reading, writing, speaking, listening, spelling, grammar Math: computation, problem-solving, life skills, logic	Science: earth, physical, life Social Studies: history, geography, civics, economics, politics P.E.: physical activity, sports knowledge, health, nutrition
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LANGUAGE ARTS	MATH
SCIENCE	SOCIAL STUDIES

Innovations Academy Independent Study
PHYSICAL EDUCATION LOG

Required P.E. Minutes

K-6: 400 minutes per learning period

7-8: 800 minutes per learning period

Concepts addressed this learning period:

- Aerobic Conditioning
- Strength and Endurance Development
- Motor Development
- Knowledge Acquisition
- Health
- Nutrition
- Other:

Student: _____

Learning Period: 1 2 3 4 **5** 6 7 8 9 10

Parent Signature: _____ Date: _____

I.A. Teacher/Facilitator: _____ Date: _____

DATE	DURATION	DESCRIPTION OF ACTIVITY

**TOTAL NUMBER
OF PE MINUTES:**

Innovations Academy Independent Study CALENDAR OF LEARNING

Learning Period: 6
ADA Possible: 23

Student: _____

I.A. Facilitator: _____

As the adult responsible for the daily monitoring / verification of subjects studied, this log accurately documents daily work completed by this student.

In my professional judgment, the student has completed work that has a value of _____ days.

Parent/Legal Guardian Signature Date

I.A. Teacher/Facilitator Signature Date

Use the calendar below to document the days on which your student participated in learning activities. Check the box to mark these days.

<input type="checkbox"/> Mon Jan 23	<input type="checkbox"/> Tues Jan 24	<input type="checkbox"/> Wed Jan 25	<input type="checkbox"/> Thurs Jan 26	<input type="checkbox"/> Fri Jan 27
<input type="checkbox"/> Mon Jan 30	<input type="checkbox"/> Tues Jan 31	<input type="checkbox"/> Wed Feb 1	<input type="checkbox"/> Thurs Feb 2	<input type="checkbox"/> Fri Feb 3
<input type="checkbox"/> Mon Feb 6	<input type="checkbox"/> Tues Feb 7	<input type="checkbox"/> Wed Feb 8	<input type="checkbox"/> Thurs Feb 9	<input type="checkbox"/> Fri Feb 10
<input type="checkbox"/> Mon Feb 13	<input type="checkbox"/> Tues Feb 14	<input type="checkbox"/> Wed Feb 15	<input type="checkbox"/> Thurs Feb 16	Fri Feb 17 HOLIDAY
<input type="checkbox"/> Mon Feb 20 HOLIDAY	<input type="checkbox"/> Tues Feb 21	<input type="checkbox"/> Wed Feb 22	<input type="checkbox"/> Thurs Feb 23	Fri Feb 24

Use the chart below to document the concepts your student studied this learning period for each subject.

Subjects Language Arts: reading, writing, speaking, listening, spelling, grammar Math: computation, problem-solving, life skills, logic	Science: earth, physical, life Social Studies: history, geography, civics, economics, politics P.E.: physical activity, sports knowledge, health, nutrition
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LANGUAGE ARTS	MATH
SCIENCE	SOCIAL STUDIES

**Innovations Academy Independent Study
PHYSICAL EDUCATION LOG**

Required P.E. Minutes

K-6: 400 minutes per learning period

7-8: 800 minutes per learning period

Concepts addressed this learning period:

- Aerobic Conditioning
- Strength and Endurance Development
- Motor Development
- Knowledge Acquisition
- Health
- Nutrition
- Other:

Student: _____

Learning Period: 1 2 3 4 5 **6** 7 8 9 10

Parent Signature: _____ Date: _____

I.A. Teacher/Facilitator: _____ Date: _____

DATE	DURATION	DESCRIPTION OF ACTIVITY

**TOTAL NUMBER
OF PE MINUTES:**

**Innovations Academy Independent Study
CALENDAR OF LEARNING**

Learning Period: 7
ADA Possible: 20

Student: _____

I.A. Facilitator: _____

As the adult responsible for the daily monitoring / verification of subjects studied, this log accurately documents daily work completed by this student.

In my professional judgment, the student has completed work that has a value of _____ days.

Parent/Legal Guardian Signature Date

I.A. Teacher/Facilitator Signature Date

Use the calendar below to document the days on which your student participated in learning activities. Check the box to mark these days.

<input type="checkbox"/> Mon Feb 27	<input type="checkbox"/> Tues Feb 28	<input type="checkbox"/> Wed Mar 1	<input type="checkbox"/> Thurs Mar 2	<input type="checkbox"/> Fri Mar 3
<input type="checkbox"/> Mon Mar 6	<input type="checkbox"/> Tues Mar 7	<input type="checkbox"/> Wed Mar 8	<input type="checkbox"/> Thurs Mar 9	<input type="checkbox"/> Fri Mar 10
<input type="checkbox"/> Mon Mar 13	<input type="checkbox"/> Tues Mar 14	<input type="checkbox"/> Wed Mar 15	<input type="checkbox"/> Thurs Mar 16	<input type="checkbox"/> Fri Mar 17
<input type="checkbox"/> Mon Mar 20	<input type="checkbox"/> Tues Mar 21	<input type="checkbox"/> Wed Mar 22	<input type="checkbox"/> Thurs Mar 23	<input type="checkbox"/> Fri Mar 24

Use the chart below to document the concepts your student studied this learning period for each subject.

<u>Subjects</u> Language Arts: reading, writing, speaking, listening, spelling, grammar Math: computation, problem-solving, life skills, logic	Science: earth, physical, life Social Studies: history, geography, civics, economics, politics P.E.: physical activity, sports knowledge, health, nutrition
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LANGUAGE ARTS	MATH
SCIENCE	SOCIAL STUDIES

Innovations Academy Independent Study
PHYSICAL EDUCATION LOG

Required P.E. Minutes

K-6: 400 minutes per learning period
7-8: 800 minutes per learning period

Concepts addressed this learning period:

- Aerobic Conditioning
- Strength and Endurance Development
- Motor Development
- Knowledge Acquisition
- Health
- Nutrition
- Other:

Student: _____

Learning Period: 1 2 3 4 5 6 7 8 9 10

Parent Signature: _____ Date: _____

I.A. Teacher/Facilitator: _____ Date: _____

DATE	DURATION	DESCRIPTION OF ACTIVITY

**TOTAL NUMBER
OF PE MINUTES:**

**Innovations Academy Independent Study
CALENDAR OF LEARNING**

Learning Period: 8
ADA Possible: 14

Student: _____

I.A. Facilitator: _____

As the adult responsible for the daily monitoring / verification of subjects studied, this log accurately documents daily work completed by this student.

In my professional judgment, the student has completed work that has a value of _____ days.

Parent/Legal Guardian Signature Date

I.A. Teacher/Facilitator Signature Date

Use the calendar below to document the days on which your student participated in learning activities. Check the box to mark these days.

Mon Mar 27 HOLIDAY	Tues Mar 28 - HOLIDAY	Wed Mar 29 - HOLIDAY	Thurs Mar 30 HOLIDAY	Fri Mar 31 - HOLIDAY
Mon Apr 3 - HOLIDAY	<input type="checkbox"/> Tues Apr 4	<input type="checkbox"/> Wed Apr 5	<input type="checkbox"/> Thurs Apr 6	<input type="checkbox"/> Fri Apr 7
<input type="checkbox"/> Mon Apr 10	<input type="checkbox"/> Tues Apr 11	<input type="checkbox"/> Wed Apr 12	<input type="checkbox"/> Thurs Apr 13	<input type="checkbox"/> Fri Apr 14
<input type="checkbox"/> Mon Apr 17	<input type="checkbox"/> Tues Apr 18	<input type="checkbox"/> Wed Apr 19	<input type="checkbox"/> Thurs Apr 20	<input type="checkbox"/> Fri Apr 21

Use the chart below to document the concepts your student studied this learning period for each subject.

<u>Subjects</u> Language Arts: reading, writing, speaking, listening, spelling, grammar Math: computation, problem-solving, life skills, logic	Science: earth, physical, life Social Studies: history, geography, civics, economics, politics P.E.: physical activity, sports knowledge, health, nutrition
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LANGUAGE ARTS	MATH
SCIENCE	SOCIAL STUDIES

Innovations Academy Independent Study
PHYSICAL EDUCATION LOG

Required P.E. Minutes

K-6: 400 minutes per learning period

7-8: 800 minutes per learning period

Concepts addressed this learning period:

- Aerobic Conditioning
- Strength and Endurance Development
- Motor Development
- Knowledge Acquisition
- Health
- Nutrition
- Other:

Student: _____

Learning Period: 1 2 3 4 5 6 7 8 9 10

Parent Signature: _____ Date: _____

I.A. Teacher/Facilitator: _____ Date: _____

DATE	DURATION	DESCRIPTION OF ACTIVITY

**TOTAL NUMBER
OF PE MINUTES:**

**Innovations Academy Independent Study
CALENDAR OF LEARNING**

Learning Period: 9
ADA Possible: 20

Student: _____

I.A. Facilitator: _____

As the adult responsible for the daily monitoring / verification of subjects studied, this log accurately documents daily work completed by this student.

In my professional judgment, the student has completed work that has a value of _____ days.

Parent/Legal Guardian Signature Date

I.A. Teacher/Facilitator Signature Date

Use the calendar below to document the days on which your student participated in learning activities. Check the box to mark these days.

<input type="checkbox"/> Mon Apr 24	<input type="checkbox"/> Tues Apr 25	<input type="checkbox"/> Wed Apr 26	<input type="checkbox"/> Thurs Apr 27	<input type="checkbox"/> Fri Apr 28
<input type="checkbox"/> Mon May 1	<input type="checkbox"/> Tues May 2	<input type="checkbox"/> Wed May 3	<input type="checkbox"/> Thurs May 4	<input type="checkbox"/> Fri May 5
<input type="checkbox"/> Mon May 8	<input type="checkbox"/> Tues May 9	<input type="checkbox"/> Wed May 10	<input type="checkbox"/> Thurs May 11	<input type="checkbox"/> Fri May 12
<input type="checkbox"/> Mon May 15	<input type="checkbox"/> Tues May 16	<input type="checkbox"/> Wed May 17	<input type="checkbox"/> Thurs May 18	<input type="checkbox"/> Fri May 19

Use the chart below to document the concepts your student studied this learning period for each subject.

<u>Subjects</u> Language Arts: reading, writing, speaking, listening, spelling, grammar Math: computation, problem-solving, life skills, logic	Science: earth, physical, life Social Studies: history, geography, civics, economics, politics P.E.: physical activity, sports knowledge, health, nutrition
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LANGUAGE ARTS	MATH
SCIENCE	SOCIAL STUDIES

**Innovations Academy Independent Study
CALENDAR OF LEARNING**

Learning Period: **10**

ADA Possible: **14**

Student: _____

I.A. Facilitator: _____

As the adult responsible for the daily monitoring / verification of subjects studied, this log accurately documents daily work completed by this student.

In my professional judgment, the student has completed work that has a value of _____ days.

Parent/Legal Guardian Signature Date

I.A. Teacher/Facilitator Signature Date

Use the calendar below to document the days on which your student participated in learning activities. Check the box to mark these days.

<input type="checkbox"/> Mon May 22	<input type="checkbox"/> Tues May 23	<input type="checkbox"/> Wed May 24	<input type="checkbox"/> Thurs May 25	<input type="checkbox"/> Fri May 26
<input type="checkbox"/> Mon May 29 HOLIDAY	<input type="checkbox"/> Tues May 30	<input type="checkbox"/> Wed May 31	<input type="checkbox"/> Thurs June 1	<input type="checkbox"/> Fri June 2
<input type="checkbox"/> Mon June 5	<input type="checkbox"/> Tues June 6	<input type="checkbox"/> Wed June 7	<input type="checkbox"/> Thurs June 8	<input type="checkbox"/> Fri June 9

Use the chart below to document the concepts your student studied this learning period for each subject.

Subjects Language Arts: reading, writing, speaking, listening, spelling, grammar Math: computation, problem-solving, life skills, logic	Science: earth, physical, life Social Studies: history, geography, civics, economics, politics P.E.: physical activity, sports knowledge, health, nutrition
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LANGUAGE ARTS	MATH
SCIENCE	SOCIAL STUDIES

