



Below you will find an individualized Remote Learning Plan for your child. The Remote Learning Plan consists of staff providers, their email contact information, and a weekly schedule of instruction, support and contact via videoconferencing, phone, or email. It is important to note that this is a working document and will be adjusted accordingly and as needed for your child. Please contact us with any questions or concerns anytime.

## Remote Learning Plan

|                            |                                     |
|----------------------------|-------------------------------------|
| Student's name:            | Student's sending district:         |
| Teacher:                   | Teacher's e-mail:                   |
| Counselor:                 | Counselor's e-mail:                 |
| Speech/Language Therapist: | Speech/Language Therapist's e-mail: |
| ASL Specialist:            | ASL Specialist's e-mail:            |
| Audiologist:               | Audiologist's e-mail:               |
| Education Director:        | Education Director's e-mail:        |

## Schedule of Support and Contact

| Provider Name & Service                 | Monday  | Tuesday                  | Wednesday | Thursday                     | Friday   |
|---|---|--------------------------|-----------|------------------------------|----------|
| (TEACHER): Direct instruction           | 8:30 Daily schedule and assignments posted in Google Classroom (Variety of assignments) |                          |           |                              |          |
| (TEACHER) and (1:1): Direct instruction | Time TBD  | 1:00 Whole class meeting |           | 1:30 Small Group Instruction | Time TBD |
| Classroom staff                         | 11:00 sign of the day   |                          |           |                              |          |

|                           |                  |  |  |  |                                 |
|---------------------------|------------------|--|--|--|---------------------------------|
| Classroom staff           |                  |  |  |  | 11:00 Fun With Fingers Activity |
| NAME, Speech and Language | 1:1 session TBD* |  |  |  |                                 |
| NAME, Counselor           | 1:1 session TBD* |  |  |  |                                 |
| NAME, ASL                 | 1:1 session TBD* |  |  |  |                                 |

\*The session will be scheduled at the convenience of the student's family weekly.

*Abajo encontrara un Plan Individualizado de Aprendizaje Remoto para su hijo/a. El Plan de Aprendizaje Remoto consiste en proveedores del personal, el correo electrónico a contactarlos, un horario semanal de instrucción, apoyo y contacto vía video conferencia, llamada y correo electrónico. Es importante saber que este es un documento de trabajo puede ser ajustado en acorde y según sea necesario para su hijo/a. Por favor contáctenos si tiene alguna pregunta o preocupación.*

## Plan de Aprendizaje Remoto

|                                      |   |
|--------------------------------------|---|
| Nombre del estudiante:               | Distrito que envía al estudiante:   |
| Maestro/a:                           | Correo electrónico de la maestra:   |
| Consejero:                           | Correo electrónico del consejero:   |
| Maestra/Terapista Habla/Lenguaje:    | Correo electrónico de Maestra/Terapista Habla/Lenguaje:   |
| Maestra ASL:                         | Correo electrónico de Maestra ASL:  |
| Audióloga:                           | Correo electrónico de Audióloga e-mail:<br><a href="mailto:jguay@wrsdeaf.org">jguay@wrsdeaf.org</a> |
| Directora de Educación: Erika Kaftan | Correo electrónico de Directora de Educación:   |

## Horario de Apoyo y Contactos

| Nombre y Servicio del Proveedor       | lunes   | martes                   | miércoles | jueves                       | viernes                         |
|---------------------------------------|---|--------------------------|-----------|------------------------------|---------------------------------|
| TEACHER: Direct instruction           | 8:30 Daily schedule and assignments posted in Google Classroom (Variety of assignments) |                          |           |                              |                                 |
| TEACHER and (1:1): Direct instruction | Time TBD  | 1:00 Whole class meeting |           | 1:30 Small Group Instruction | Time TBD                        |
| Classroom staff                       | 11:00 sign of the day   |                          |           |                              |                                 |
| Classroom staff                       |   |                          |           |                              | 11:00 Fun With Fingers Activity |
| NAME, Speech and Language             | 1:1 session TBD*  |                          |           |                              |                                 |
| NAME, Counselor                       | 1:1 session TBD*  |                          |           |                              |                                 |
| NAME, ASL                             | 1:1 session TBD*  |                          |           |                              |                                 |

\*La sesión se programará a la conveniencia de la familia del estudiante semanalmente.