

Ironton City Schools

Academic Acceleration Plan

Student Name: \_\_\_\_\_ School:  IES  IMS  IHS Grade: \_\_\_\_\_

Type of Acceleration:

- Early Entrance to:  Kindergarten  First Grade
- Whole Grade Acceleration From Grade \_\_\_\_\_ to Grade \_\_\_\_\_
- Individual Subject Acceleration Specify Subject: \_\_\_\_\_

Placement:

From: \_\_\_\_\_  
 Grade/Subject \_\_\_\_\_ Teacher \_\_\_\_\_ Building \_\_\_\_\_

To: \_\_\_\_\_  
 Grade/Subject \_\_\_\_\_ Teacher \_\_\_\_\_ Building \_\_\_\_\_

Accelerated Placement Transition Period: \_\_\_\_/\_\_\_\_/\_\_\_\_ to \_\_\_\_/\_\_\_\_/\_\_\_\_  
 (Starting Date) (Ending Date)

Staff member responsible for ensuring successful implementation of the written acceleration plan and for monitoring the adjustment of the student to the accelerated setting:

\_\_\_\_\_

Strategies to support successful transition to the accelerated setting :

Additional Pages Attached.

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

Additional Pages Attached.

Signature of Academic Acceleration Plan Participants

\_\_\_\_\_  
(Principal)

\_\_\_\_\_  
(Monitoring Teacher)

\_\_\_\_\_  
(Parent/Guardian)

\_\_\_\_/\_\_\_\_/\_\_\_\_  
(Date)