



SPECIAL CREDIT PROJECT PROPOSAL TEMPLATE

(Note: This proposal must be completed and approved prior to the student beginning the Special Project Credit)

Sections 1-2: To be completed by the student.

Section 1: Student Information						
Last Name:			First N	ame:		
Grade:	Age:	Phone:				
School:						
Student's Email:						
Section 2: Project	Overview					
This section provides a	guidance on how t	to develop	a projec	t plan with guiding questions to		
help reflect upon your	learning.					
Project Title/Topic:				Course Level : □10□20□30		
1. What are you going	to do for your pro	oject?				
2. What do you hope t	o accomplish?					
3. Who or what organizations are going to be involved?						
4. Who will be supporting you during this project?						
5. How does your special project differ from or build upon what you have learned in school?						
6. Why are you interested in or passionate about this project?						
7. How will this project impact you and influence your future goals?						
8. In what ways will your project impact your community?						





SCHOOL DIVISION	101111255 1					
9. Do you have pervious experience in this are	ea of study? If yes, please describe.					
10. What do you hope to learn? What knowledge/skills will you acquire or improve by pursuing this project?						
11. How are you going to demonstrate that you have achieved your goals?						
12. How will you challenge yourself and target different ways of learning?						
13. What is the project timeline?						
14. What resources will your need? (basic tools)						
15. How often will you meet with the supervising teacher and/or mentor?						
16. How will you share your learning with others?						
Sections 3-5: To be completed by the Career Education Liaison in collaboration with the						
student, Grad Coach, and mentor.						
Section 3: Supervising Teacher/Grad Coach Information						
Last Name:	First Name:					
Phone Number	Email:					
Section 4: Project Mentor Information (if applicable)						
Last Name:	First Name:					
a).	a).					
b).	b).					
Phone	Email:					
Number: a).	a).					
b). b).						



Section 5: Monitoring, Assessments and Evidence of Learning

(Please refer to the student's statements in Section 2: Project Goals, Activities and Assessment. How will the project be monitored? What is the communication plan for reporting to ensure student, mentor, parent/guardian and teacher are informed? How will the learning be presented for assessment (video journal, photos, etc.?)

the rearring be presented for assessment (video journal, priotos) etc./				
Evidence of Learning:	Assessments:			
1.	1.			
2.	2.			
3.	3.			

Section 6: Distribution of Hours					
Learning Activity	Anticipated Hours	Actual Hours			
Totals:	100 hours				

Section 7: Approval of Proposal							
Signing below indicates you agree with the terms of this proposal.							
Role	Name	Signature	dd	mm	уууу		
Student							
Parent/Guardian							
Grad Coach							
/Supervising							
Teacher							
Project Mentor							
Principal							
Superintendent							



Section 8: Credit Attained							
Standing Granted (SG) Section 8: To be completed by principal and grad coach/supervising teacher.							
Credit granted for Special Project Credit Course Level: □10 □20 □30							
Student: Learning ID #:							
	dd	mm	уууу		dd	mm	уууу
Principal Signature				Grad Coach/Supervising Teacher Signature			

The signed proposal shall be kept on file for 5 years.