

STUDENT REMOTE LEARNING RECORD

STUDENT NAME: _____

WEEK: _____

DATE/TIME	CONTACT	SUBJECT/CLASS/TEACHER	PARTICIPATION	NOTES
MONDAY	<ul style="list-style-type: none"> <input type="radio"/> Email <input type="radio"/> Phone <input type="radio"/> Online <input type="radio"/> TV/other 	Length of Session:	<ul style="list-style-type: none"> <input type="radio"/> Participated <input type="radio"/> Listened <input type="radio"/> Responded <input type="radio"/> Did not Engage 	
TUESDAY	<ul style="list-style-type: none"> <input type="radio"/> Email <input type="radio"/> Phone <input type="radio"/> Online <input type="radio"/> TV/other 	Length of Session:	<ul style="list-style-type: none"> <input type="radio"/> Participated <input type="radio"/> Listened <input type="radio"/> Responded <input type="radio"/> Did not Engage 	
WEDNESDAY	<ul style="list-style-type: none"> <input type="radio"/> Email <input type="radio"/> Phone <input type="radio"/> Online <input type="radio"/> TV/other 	Length of Session:	<ul style="list-style-type: none"> <input type="radio"/> Participated <input type="radio"/> Listened <input type="radio"/> Responded <input type="radio"/> Did not Engage 	
THURSDAY	<ul style="list-style-type: none"> <input type="radio"/> Email <input type="radio"/> Phone <input type="radio"/> Online <input type="radio"/> TV/other 	Length of Session:	<ul style="list-style-type: none"> <input type="radio"/> Participated <input type="radio"/> Listened <input type="radio"/> Responded <input type="radio"/> Did not Engage 	
FRIDAY	<ul style="list-style-type: none"> <input type="radio"/> Email <input type="radio"/> Phone <input type="radio"/> Online <input type="radio"/> TV/other 	Length of Session:	<ul style="list-style-type: none"> <input type="radio"/> Participated <input type="radio"/> Listened <input type="radio"/> Responded <input type="radio"/> Did not Engage 	
WEEKEND	<ul style="list-style-type: none"> <input type="radio"/> Email <input type="radio"/> Phone <input type="radio"/> Online <input type="radio"/> TV/other 		<ul style="list-style-type: none"> <input type="radio"/> Participated <input type="radio"/> Listened <input type="radio"/> Responded <input type="radio"/> Did not Engage 	
Other Activities				

QUESTIONS? info@fcsn.org

Federation for Children with Special Needs – www.fcsn.org