GOODHUE COUNTY EDUCATION DISTRICT #6051

*395 Guernsey Lane, Red Wing, MN 55066• Phone 651.388.4441• Fax 651.388.9557*

Member Districts:

Cannon Falls #252 • Goodhue #253 • Kenyon Wanamingo #2172 •  
Lake City #813 • Red Wing #256 • Zumbrota Mazeppa #2805

**Intake/Continual Learning Plan**

Student Name:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Grade:\_\_\_\_\_\_ Graduation Incentive (GI) Code:\_\_\_2\_\_\_

School:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Date Referred:\_\_\_\_\_\_\_\_\_\_\_By Whom:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Does the student have an IEP or 504? Y\*/N**

*\*If yes, ensure that the accommodations and/or modifications that the student is entitled to are in place.*

**Parent/Student Goals**

\_\_\_\_Credit Completion (list course(s) below):

**Indicators of Need (GI Code):**

\_\_x\_\_Is behind peers in satisfactorily completing coursework. (2)

Parent/Guardian Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date

School District Representative Signature\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date