

# RMDLS Student Learning Plan -- ADULT Graduation Program

Rocky Mountain Distributed Learning School (SD06) ~ 1850 Warren Ave, Kimberley, BC ~ PH: 250.427.5308 ~ FAX: 250.342.6966

Student Name: _____	Male
DOB: _____ PEN: _____	Female

[Graduation Requirements](#): 20 Credits – see details below

**My Situation** (Check all that apply)

**My Educational Goals** (Check all that apply)

<input type="checkbox"/> <b>Not working</b> <input type="checkbox"/> <b>Working:</b> Part time            Full time <input type="checkbox"/> <b>Travelling:</b> In BC            Around Canada            Internationally <b>Who will support your learning?</b> _____	<input type="checkbox"/> <b>Complete my current grade</b> <input type="checkbox"/> <b>Take 1-2 courses at RMDLS in addition to those at my school</b> <input type="checkbox"/> <b>Complete high school – If so, what year?</b> _____ <input type="checkbox"/> <b>Enter Post Secondary -- Program:</b> _____
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**Part I – Prerequisites**

Students may require credits or upgrading in these areas before working on **Required Courses**:

	Level	Course	Final Grade	Date - Notes
Language Arts				
Language Arts				
Language Arts				
Language Arts				
Mathematics				
Mathematics				
Mathematics				
Mathematics				

**Part II – Required Courses –**

20 Credits: Must have a minimum of 12 credits of ministry developed courses at the Grade 12 level, including Language Arts 12 for 4 credits

	GR level	Course	Credits	Final Grade	Date - Notes
Language Arts	12		4		
Mathematics	11/12		4		
<b>Option ONE: Social Studies 11 or BC First Nations 12 + 2 other ministry developed courses at the Grade 12 level</b>					
Social Studies	11		4		
Elective	12		4		
Elective	12		4		
<b>Option TWO: 3 ministry developed courses at the Grade 12 level</b>					
Elective	12		4		
Elective	12		4		
Elective	12		4		
Total:			20		

\*\*Your Typed Name Can Act As Your Signature\*\*

<b>Commitment to Learning</b>	
As a student I make a formal commitment to completing this educational plan.	_____
	Student Signature
	_____
	Date
As a RMDLS teacher and/or academic advisor I certify that this plan is in accordance with BC Ministry of Education standards, policies and regulations.	_____
	RMDLS Teacher or Principal Signature
	_____
	Date