



LOS ANGELES UNIFIED SCHOOL DISTRICT
MEMORANDUM

REQUEST FOR APPROVAL TO OFFER INTERSESSION FOR
MULTITRACK SECONDARY SCHOOLS 2004-2005

School _____ Location Code _____ Local District _____

Contact Person _____ Phone Number: _____

Calendar: Concept 6 ____ 90/30 ____ Track: ____ (Check one) Intercession ____

This form is due 2 weeks prior to start of every intercession offered.

Grade	Date From	Date To	Estimated # of Classes	Hours of Program (start/end)	Total Instructional Hours	Total # of Days
6th						
7th						
8th						
9th						
10th						
11th						
12th						

(Date)

(Signature)

Norm:

- Grade 6 through 12 classes are scheduled for one period, 60 hours, or two periods, 120 hours, normed at 33:1

Intercession must be normed on day three. Fax copy of classification to Local District Standards-Based/Intervention Coordinator on the third day.

MAIL OR FAX THIS FORM TO YOUR LOCAL DISTRICT'S STANDARDS BASED PROGRAM COORDINATOR FOR APPROVAL. Allocation will be based on norm enrollment.

(Local District Office Use Only)

Number of Students _____ Norm Allocation _____ (to be completed on Norm Day)

(Date)

Approved: _____
(Local District Signature)

(Date)

Not approved: _____
(Local District Signature)

Forwarded to: Check box(s) ☐ Pupil Statistics ☐ Budget Services ☐ Beyond The Bell ☐ Other _____

Initial _____ Date _____ Local District _____ Contact phone# _____