



**MONITORING LOG
FOR A STUDENT IN
SUPERVISED ALTERNATIVE LEARNING (SAL)**

STUDENT INFORMATION

STUDENT:

ADDRESS:

SCHOOL:

SAL APPROVAL DATE:

OTHER INFORMATION:

DATE OF BIRTH:

PHONE:

EMAIL:

PRIMARY CONTACT:

DESCRIPTION OF SALP ACTIVITIES

DETAILS

DATE:

TYPE OF CONTACT:

Observation of student on location

Phone call

Meeting in person

Other: _____

Email

CONTENT OF DISCUSSION:

Problem solving

Progress/Assessment

Other: _____

PRIMARY CONTACT'S INITIALS _____

COMMENTS: