

**CULMINATING PROJECT—CHECK SHEET
FOR ALTERNATIVE LEARNING EXPERIENCE**

Student Name _____

Student # _____

<i>Date Completed</i>	<i>Project Component/Forms to be Completed</i>
	Form F-9 Statement of Intent - Parent/Guardian Consent
	Form F-10 Culminating Project Outline
	Form F-11 Culminating Project Reflective Summary/Report
	Form F-14A Culminating Project ~ Independent Process Written Student Learning Plan
	Form F-14B Culminating Project ~ Alternative Learning Experience/Statement of Understanding
	Form F-15 Culminating Project Mentor Agreement Form
	Presentation Outline
	Presentation
	Documentation of hours
	All Components of the Culminating Project Completed

Student Signature

Date

Project Coordinator/Teacher

Date