

APPENDIX H

Monitoring Log For A Student In SAL

Name: _____ **Date of birth:** _____
Address: _____ **Telephone:** _____
Board/School: _____ **E-mail:** _____
SAL approval date: _____ **Primary contact:** _____
Other information: _____

Description of SALP activities

Date	Details
	<p>Type of contact:</p> <p> <input type="checkbox"/> <input type="checkbox"/> observation of student on location <input type="checkbox"/> <input type="checkbox"/> meeting in person <input type="checkbox"/> <input type="checkbox"/> e-mail <input type="checkbox"/> telephone call <input type="checkbox"/> <input type="checkbox"/> other: _____ </p> <p>Content of discussion: <input type="checkbox"/> <input type="checkbox"/> problem solving <input type="checkbox"/> <input type="checkbox"/> progress/assessment</p> <p><input type="checkbox"/> <input type="checkbox"/> other: _____</p> <p>Primary contact's initials: _____</p> <p>Comments:</p>