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EUROPEAN SCHOOL ALICANTE

INDIVIDUAL LEARNING PLAN FOR MODERATE SUPPORT

(Fill in the	relevant	parts/boxes)
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Pupil

Name		Home address	
Date of birth	1 1	Nationality	
Date of entry to the school	1 1	Section and class	
Parent's name		Parent's name	
Home address		Home address	
Telephone number		Telephone number	
Email address		Email address	

Language history

Languages spoken at home	
Dominant language (L1)	
Second language	
Section language	
Additional information	



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If this pupil has a medical/psychological/psycho-eduplease state the diagnosis contained therein:	ıcational and/or multi-disciplinary report,
Name of the expert and date of the report:	
School history	Medical needs
(schools attended, repeating a year etc.) 1.	(for allergies, diabetes etc.)
2.	
3.	
Description of the main barriers to learning faced needs:	by the pupil/pupil's special educational



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Strengths (academic, social/ emotional/ personality/ extra-curricular)	
Challenges (weaknesses, difficulties)	
Pupil's interests and learning profile	
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SUPPORT

Objectives of support (Specify what aspect(s) of the subject/learning area is/are being targeted?)	Persons responsible	Accommodations, Resources and methods (Which resources and methods are used to reach the objectives?)	Assessment (What methods/tools are used to assess progress?)			
1.				Date NYA / /	Date NA / /	Date A
2.				Date NYA	Date NA	Date A
3.				Date NYA	Date NA / /	Date A
4.				Date NYA / /	Date NA	Date A



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5.				Date NYA	Date NA / /	Date A
6.				Date NYA	Date NA	Date A
7.				Date NYA	Date NA	Date A
Individual Learning Plan is written by	:	1			,	
Name		Signat	ure			
Place						
Date						



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