

Documentation of Annual Progress

	ALP/ALCP Request Form	Justification	ALP or ALCP (signed by Educator)	Plan of Study	For Testing Out	For Program of Study
Year 1	✓	✓	✓	✓		
Year 2	✓			✓	✓ Praxis PASSED or Transcript for 3 semester hours PASSED during Year 1	✓ Transcript for 3 semester hours PASSED during Year 1
Year 3	✓			✓	✓ Praxis PASSED or Transcript for 6 semester hours PASSED during Year 2	✓ Transcript for 6 semester hours PASSED during Year 2