Save

St. Francis Area Schools

Curriculum & Instruction
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Student Intervention Team Plan Evaluation

Student Name: _____ Student ID _____ Date: _____

This intervention began on _____ and continued through_____ .

Total number of sessions received: _____ Total number of data points being considered: _____

Attach student progress data

1. As a result of this intervention implementation:
   - ☐ Goal was met
   - ☐ Student has made acceptable progress towards goal
   - ☐ Student has not made acceptable progress toward goal
   - ☐ Student has fallen further behind

2. Narrative regarding plan evaluation decision:

3. The next steps for the team will be to:
   - ☐ Discontinue intervention plan – goal met
   - ☐ Maintain or generalize current intervention plan
   - ☐ Modify current intervention plan (ie, frequency, duration)
   - ☐ Change intervention strategy

Next SIT review meeting date: _____
(If no additional meeting is needed, SIT forms should be placed in the student's cumulative record.)