



2018-2019

Sarasota County Schools Title I Program
Title I Position/Contract: Show Thy Impact



Teacher Name	
Title I School	
Title I Position/Contract	

Please collect **SAMPLES** of the following documentation to submit at the end of services:

<input type="checkbox"/> 1 st Quarter	<input type="checkbox"/> 2 nd Quarter	<input type="checkbox"/> 3 rd Quarter	<input type="checkbox"/> 4 th Quarter
<input type="checkbox"/> Schedule of Services with Students/Student Groups <input type="checkbox"/> Email communications, forms, and/or meeting notes evidencing student selection process	<input type="checkbox"/> Meeting Agendas & Notes discussing student progress/information (Data Chat/ PLC/CPT/CARE/ SWST/MTSS)	<input type="checkbox"/> One Lesson Plan of Differentiated Instruction <i>OR narrative</i> of behavior, attendance, guidance and/or parent and family engagement support (i.e. service log)	<input type="checkbox"/> Progress Monitoring Data/Growth PRE-POST (academic, attendance, discipline, etc.)

In my Title I role, I work with	<input type="checkbox"/> Individual Students/One-on-One <input type="checkbox"/> Small Groups of Students <input type="checkbox"/> Parents and Families <input type="checkbox"/> Teachers
My focus is	<input type="checkbox"/> Academic/Targeted Intensive Instruction <input type="checkbox"/> Behavior <input type="checkbox"/> Attendance <input type="checkbox"/> Guidance <input type="checkbox"/> Parent and Family Engagement <input type="checkbox"/> Professional Development with Teachers/Training
Describe the services you provide. (What programs, strategies, and/or materials “above and beyond” core curriculum, instruction or support will you use?)	
Describe the selection process for students served in your Title I role (position/contract).	
Describe what information will be collected to monitor the quality of implementation.	
Describe HOW and WHEN you collaborate with colleagues to review student data, progress monitoring, interventions, next steps, outcomes of instruction/support, etc.	
Describe interim progress and performance milestones that can be tracked.	
Describe how the implementation of intervention works with other existing efforts. (In other words, how does your work support School Improvement Plan/Title I Schoolwide Plan goals?)	

At the end of services:	Describe what the information collected suggests about the success of the implementation.	
	Based on information, should this intervention continue as is, be modified, or be discontinued?	<input type="checkbox"/> Continue as is <input type="checkbox"/> Modify <i>Specify:</i> Click or tap here to enter text. <input type="checkbox"/> Discontinue <i>Specify:</i> Click or tap here to enter text.