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| <b>Student Information</b><br><input type="checkbox"/> ELA-S<br><input checked="" type="checkbox"/> ELL<br><input type="checkbox"/> Special Education/504<br><input type="checkbox"/> Gifted and Talented | <b>STUDENT</b> (legal name) <u>Francisco</u> | <b>STUDENT NUMBER</b> _____  | <b>DOB</b> _____ |
| <b>GRADE</b> <u>1</u> <b>SCHOOL</b> _____                                                                                                                                                                 |                                              | <b>CONTACT TEACHER</b> _____ |                  |
| <b>DATE</b> <u>Oct. 8, 2008</u>                                                                                                                                                                           |                                              |                              |                  |

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| <b>Area(s) of Focus</b> (attach assessment summary for DRA2, DPS Benchmark, CELA, CBLA, SRI)<br>_____ Comprehension _____ Fluency<br><input checked="" type="checkbox"/> Phonics _____ Vocabulary<br><input checked="" type="checkbox"/> Phonemic Awareness _____ Other<br>_____ English Language Development | <b>SMART Goal Statement(s) for Intervention 1</b><br><u>Francisco will increase DRA2 independent reading level from Level <u>A</u> to Level <u>10</u> by <u>January 15, 2009</u> (date).</u><br><u>Francisco will improve his phonemic awareness skills to benchmark according to the Aimsweb spring screening in January 2009.</u> | <b>SMART Goal Statement(s) for Intervention 2</b> (if revised)<br>_____ will increase DRA2 independent reading level from Level _____ to Level _____ by _____ (date). |
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| Student will                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | Teachers will                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        | Interventions (see page 2)                                                                                                                                                                                                                                                                                                                                                                   |
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| <input type="checkbox"/> Set reading goals with teacher<br><input checked="" type="checkbox"/> Practice teacher-demonstrated reading strategies<br><input type="checkbox"/> Develop and monitor own progress using rubrics<br><input type="checkbox"/> Contribute to class discussion and activities<br><input checked="" type="checkbox"/> Ask teacher for help and support<br><input type="checkbox"/> Read daily ( _____ minutes/day) using strategies learned in class<br><input type="checkbox"/> Share school progress with parents<br><br><input type="checkbox"/> Other: _____<br><input type="checkbox"/> Other: _____<br><input type="checkbox"/> Other: _____ | <b>Resources</b><br><input checked="" type="checkbox"/> Provide reading materials that match student's independent and instructional levels<br><input type="checkbox"/> Offer significant time for student to read materials at independent level, including self-selected reading<br><input type="checkbox"/> Supplement textbooks and other grade-level resources with materials at a variety of reading levels<br><input type="checkbox"/> Provide technology support (research and publishing)<br><br><b>Targeted Instruction: Through modeling and guided practice in whole group, small group, and one-to-one instruction, provide targeted instruction in:</b><br><input type="checkbox"/> Concepts of print<br><input checked="" type="checkbox"/> Phonemic awareness (rhyming, segmenting, blending)<br><input checked="" type="checkbox"/> Phonics, decoding, and word analysis<br><input type="checkbox"/> Oral language and vocabulary development<br><input type="checkbox"/> Oral reading fluency<br><input type="checkbox"/> Phrasing and expression<br><input type="checkbox"/> Monitoring and self-correcting<br><input type="checkbox"/> Problem solving unknown words; using sight words<br><input checked="" type="checkbox"/> Comprehension<br><input checked="" type="checkbox"/> Retelling: sequence of events<br><input type="checkbox"/> Retelling: story elements and main idea and supporting details<br><input checked="" type="checkbox"/> Retelling: using vocabulary from reading<br><input type="checkbox"/> Responding: making connections and reflecting<br><input checked="" type="checkbox"/> ELL support in L <sub>1</sub> when appropriate and through sheltered instruction in L <sub>2</sub> | <input checked="" type="checkbox"/> Extra small group instruction targeting area of focus: _____<br><input type="checkbox"/> Tutoring (peer and teacher): _____<br><input type="checkbox"/> Mentoring: _____<br><input type="checkbox"/> After-school literacy program: _____<br><input type="checkbox"/> Intervention resources or programs: _____<br><input type="checkbox"/> Other: _____ |

| Parents/Guardians will                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |                                                                                                                                                                                                                                                                                                                                                                                       | Reading-Related Assessment Accommodations                                                                                                                                                                                                                                                       |
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| <input checked="" type="checkbox"/> Support student's schoolwork and homework<br><input type="checkbox"/> Discuss and ask questions<br><input type="checkbox"/> Set aside time and place for reading<br><input type="checkbox"/> Ensure student attends school daily and on time<br><input type="checkbox"/> Stay in contact with teachers (e.g., attend parent/teacher conferences, contact teachers when questions arise)<br><input type="checkbox"/> Listen to student read or retell stories<br><input type="checkbox"/> Monitor home reading regularly ( _____ minutes/day)<br><input type="checkbox"/> Other: _____ | <b>Progress Monitoring and Ongoing Assessment</b><br><input checked="" type="checkbox"/> Use and analyze ongoing formal and informal assessments (e.g., DRA2, DIBELS, running records, CBMs)<br><input checked="" type="checkbox"/> Support student in setting goals<br><input type="checkbox"/> Collaborate with student to develop rubrics<br><input type="checkbox"/> Other: _____ | <input type="checkbox"/> Extended time ( ___ R; ___ W; ___ M; ___ S)<br><input type="checkbox"/> Teacher-read directions ( ___ R; ___ W; ___ M; ___ S)<br><input type="checkbox"/> Oral presentation ( ___ W; ___ M; ___ S)<br><input type="checkbox"/> Oral translation ( ___ W; ___ M; ___ S) |
| <b>Parent/Guardian Signature</b> _____ <b>Date</b> _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                       | <b>Teacher Signature</b> _____ <b>Date</b> _____                                                                                                                                                                                                                                                |
| <b>Parent/Guardian Signature</b> _____ <b>Date</b> _____                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                  |                                                                                                                                                                                                                                                                                                                                                                                       | <b>Administrator Signature</b> _____ <b>Date</b> _____                                                                                                                                                                                                                                          |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                       | <b>Teacher Signature</b> _____ <b>Date</b> _____                                                                                                                                                                                                                                                |
|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                       | <b>Administrator Signature</b> _____ <b>Date</b> _____                                                                                                                                                                                                                                          |

Discontinue ILP. Student is reading on grade level (as evidenced by an Individual Reading Inventory and a body of evidence). Date \_\_\_\_\_

**BODY OF EVIDENCE  
RESPONSE TO INTERVENTION**

**STUDENT** (legal name) Francisco

**Identify Student’s Strengths**

*Eager to learn  
Good attendance*

**Identify Most Significant Concern**

*Identified as needing intensive intervention on fall Aimsweb screening according to baseline scores in Letter Sound Fluency (10), Phoneme Segmentation Fluency (8) and Nonsense Word Fluency (6).*

**Identify Contributing Factors for this Area of Concern (e.g., attendance, health, language, mobility)**

*Little exposure to phonemic awareness of English sounds. Only Spanish spoken at home*

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| <b>INTERVENTION 1</b> | <b>WHAT WILL WE TRY?</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>WHAT DID WE FIND OUT?</b>                                                                                                                                                                                                                                                                                                      |
|                       | <p><b>Intervention Plan</b> (include who, what, when, where, frequency, duration)</p> <p><i>Whole class Peer Assisted Learning Strategies (PALs) instruction three times per week for 30 minutes each session</i></p> <p><i>Double-dose of PALs instruction with an intervention paraprofessional five times per week for 20 minutes per day</i></p> <p><b>Progress-Monitoring Plan</b></p> <p><i>Use progress monitor probes in Phoneme Segmentation Fluency and Nonsense Word Fluency from Aimsweb bi-monthly</i></p> <p><input type="checkbox"/> Discontinue intervention—adequate progress<br/> <input type="checkbox"/> Continue intervention<br/> <input type="checkbox"/> Revise intervention</p> | <p><b>Progress-Monitoring Data</b> (e.g., DRA2, Word Analysis, DIBELS, Aimsweb, running records, CBMs) (<b>attach documentation</b>)</p> <p>Date/Data: _____ Date/Data: _____<br/>                 Date/Data: _____ Date/Data: _____<br/>                 Date/Data: _____ Date/Data: _____</p> <p><b>Additional Comments</b></p> |
| <b>INTERVENTION 2</b> | <b>WHAT WILL WE TRY?</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                 | <b>WHAT DID WE FIND OUT?</b>                                                                                                                                                                                                                                                                                                      |
|                       | <p><b>Intervention Plan</b> (include who, what, when, where, frequency, duration)</p> <p><b>Progress-Monitoring Plan</b></p> <p><input type="checkbox"/> Discontinue intervention—adequate progress<br/> <input type="checkbox"/> Continue intervention<br/> <input type="checkbox"/> Revise intervention</p>                                                                                                                                                                                                                                                                                                                                                                                            | <p><b>Progress-Monitoring Data</b> (e.g., DRA2, Word Analysis, DIBELS, Aimsweb, running records, CBMs) (<b>attach documentation</b>)</p> <p>Date/Data: _____ Date/Data: _____<br/>                 Date/Data: _____ Date/Data: _____<br/>                 Date/Data: _____ Date/Data: _____</p> <p><b>Additional Comments</b></p> |