

**Tier 2
Intervention Plan
Review Meeting**

Student's Name: _____	Student ID Number: _____
Date of Birth: _____	
Age: _____	Grade: _____
Teacher: _____	

Student Support Team Meeting Date: _____

Attendance

Representative

General Education Teacher	_____
Instructional Specialist (content area)	_____
Special Education Teacher	_____
Parent	_____
Administrator	_____
Related Services Specialist	_____
Counselor	_____
School Psychologist/LSSP	_____
Nurse	_____
Behavior Specialist	_____

Data Review

The team reviewed the Individual Intervention Plan dated _____.
Intervention Monitoring Data (attached)
Student Response Data (attached)
Additional data (attached):

Data Analysis Summary

The intervention was implemented appropriately

- Yes** The team will review student response data to inform decision making
- No** The team recommends the following changes in **methods of implementing the current intervention**. Committee will continue to monitor implementation and student progress and reconvene on _____ at _____ to review data.

Barringer, 2006 This is a SAMPLE form. Forms for each district or campus should accurately document the RTI process as implemented. Each district /campus is responsible for the content of any forms utilized and for training staff in appropriate, ethical use of the form and implementation of any RTI processes documented by the form. This sample form is meant to provide a template to be modified as appropriate for the district/campus.

Skill

**Present Level
of Performance**

**Goal Level
of Performance**

Discussion Notes:

Decision

- ↑ Goals have been met. Student no longer requires individual intervention plan. Return to Tier 1 interventions with monitoring by general education teacher.
- ↑ Goals have been met. Student requires continued intervention with new goals. Continue implementation of intervention. Revised Tier 2 plan, with new goal performance level, attached.
- ↑ Data, including Slope of Improvement, indicates goal **can** be attained through continued implementation of the current intervention, **without modifications**. Continue to implement Tier 2 intervention plan. Committee will meet on _____ at _____ to review progress.
- ↑ Slope of Improvement indicates goal can be attained through continued implementation of the current intervention, **with modifications**. Implement revised Tier 2 intervention plan (attached).
- ↑ Data **does not** predict goal attainment through continued implementation of the current intervention. Team has identified another intervention (intervention plan attached).
- ↑ Data **does not** predict goal attainment through continued implementation of the current intervention. **Multiple intervention plans have been implemented** without adequate response. Student is referred for Tier 3 interventions.
- ↑ In general education
- ↑ Special education referral

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