**Required Form (Sample)**

**Student Success Initiative**

**Grade Placement Committee Meeting Minutes**

***[State of Texas Assessments of Academic Readiness (STAAR)/State of Texas Assessments of Academic Readiness (STAAR) Spanish]***

**Second Administration of the  *[Grade 5/Grade 8]* Mathematics Assessment**

***[Insert name of school district/campus]***

Student: ***[Insert name]*** Date of Notice: ***[Insert date of notice]***

Parent/Guardian: ***[Insert name]*** Date of Meeting: ***[Insert date of meeting]***

Address: ***[Insert address]*** Location: ***[Insert location]***

Phone: ***[Insert phone #]***

##### Membership

|  |  |  |
| --- | --- | --- |
| **✓** | **Member** | **Name** |
|  | Principal (or designee) |  |
|  | Mathematics Teacher |  |
|  | Parent/Guardian |  |
|  | Parent/Guardian |  |
|  | LPAC Representative (if applicable) |  |
|  | District Designee acting on behalf of student because no parent/guardian could be located |  |
|  | Other |  |

**Purpose/Role**

1. Review assessment and accelerated instruction history
2. Prescribe required accelerated instruction

**I. Review Assessment Reports** (Confidential Student Report, which includes results for each reporting category and for the assessment overall)

|  |  |  |
| --- | --- | --- |
| ***[STAAR/STAAR Spanish]*** | **Score Code (scored, absent, other)** | **Significant improvement from the**  **1st administration** |
| 2nd administration |  | Yes  No |

**II. Accelerated Instruction Plan** (See attached documentation.)

***[Insert local options]***

Tutorials

Extended School Year (Summer School)

Other      \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Notes**

|  |
| --- |
|  |

##### Signatures

|  |  |
| --- | --- |
| **Member** | Name |
| Principal (or designee) |  |
| Mathematics Teacher |  |
| Parent/Guardian  (circle one)\* |  |
| Parent/Guardian  (circle one)\* |  |
| LPAC Representative  (if applicable) |  |
| Other |  |

\* I acknowledge that if my child changes residence after this meeting, it is my obligation to notify the new school that my child must receive accelerated instruction before the third administration of the ***[STAAR/STAAR Spanish]***  mathematics assessment on ***[Insert date]***.