Crystal City Independent School District

Special Programs Collaboration/Intensive Program of Instruction (IPI)

□ ESL □ SPED □ 504/Dyslexia □ At-Risk □ Migrant □ ECOD

Student: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ID \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade \_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_

Teacher(s): \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Subject: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
|  | 1st Grading period | 2nd Grading period | 3rd Grading period | 4th Grading period | 5th Grading period | 6th Grading period |
| Grades | Progress Report | Report Card | Progress Report | Report Card | Progress Report | Report Card | Progress Report | Report Card | Progress Report | Report Card | Progress Report | Report Card |
| ELAR |  |  |  |  |  |  |  |  |  |  |  |  |
| Math |  |  |  |  |  |  |  |  |  |  |  |  |
| Science |  |  |  |  |  |  |  |  |  |  |  |  |
| Soc. Studies |  |  |  |  |  |  |  |  |  |  |  |  |

Benchmark Dates: Results/Plan of Action\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Area for Acceleration (TEKS Student Expectation). Goal(s). Time (frequency, duration, location). Activity (ies) Please attach documentation of accommodations.

|  |  |
| --- | --- |
| 1stGrading periodDate:  |  |
| 2nd Grading periodDate:  |  |
| 3rd Grading periodDate:  |  |
| 4th Grading periodDate:  |  |
| 5th 6 WeeksDate:  |  |
| 6th 6 WeeksDate:  |  |

***Methods of EVALUATION:***

Did the differentiated practices/interventions or accommodations work? Yes/No.

|  |  |
| --- | --- |
| 1stGrading periodDate:  | Assessments/Results |
| 2nd Grading periodDate:  | Assessments/Results |
| 3rd Grading periodDate:  | Assessments/Results |
| 4th Grading periodDate:  | Assessments/Results |
| 5th Grading periodDate:  | Assessments/Results |
| 6th Grading periodDate:  | Assessments/Results |

***Progress Monitoring and/or RECOMMENDATIONS:***

How are you measuring the effectiveness of your instructional practices or accommodations?

|  |  |
| --- | --- |
| 1stGrading periodDate:  |  |
| 2nd Grading periodDate:  |  |
| 3rd Grading periodDate:  |  |
| 4th Grading periodDate:  |  |
| 5th Grading periodDate:  |  |
| 6th Grading periodDate:  |  |

What new instructional strategies will you be implementing? May begin Behavior Contract if needed.

|  |  |
| --- | --- |
| 1stGrading periodDate:  |  |
| 2nd Grading periodDate:  |  |
| 3rd Grading periodDate:  |  |
| 4th Grading periodDate:  |  |
| 5th Grading periodDate:  |  |
| 6th Grading periodDate:  |  |

For ELs, what linguistic accommodations or language supports did you implement to ensure content area instruction was accessible to ELs? For the Special Education students, what considerations if any, need to be addressed in the IEP?

|  |  |
| --- | --- |
| 1stGrading periodDate:  |  |
| 2nd 6 Grading periodDate:  |  |
| 3rdGrading periodDate:  |  |
| 4thGrading periodDate:  |  |
| 5thGrading periodDate:  |  |
| 6thGrading periodDate:  |  |

Special Program Collaboration/Intensive Plan of Instruction (IPI)/ARD: Date(s)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Committee members: Printed names and Signatures

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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\*A copy of this collaboration form will be provided to teachers, campus principals, and Program Directors and a copy will be maintained in student folders, as appropriate.