



Follow-Up Rtl Meeting Tier 2

Student: _____ Teacher: _____

Meeting Date: _____ Subject: _____

Review the Previous Intervention

Did the intervention(s) result in student's progress? Yes No

Explain:

Rate the Results of the Intervention(s) Attempted

- High level of improvement
- Moderate level of improvement
- Slight level of improvement
- No improvement

Documentation

- Progress Monitoring Reports
 - DRA 2
 - EDL 2
- Class Work
- Assessments
 - CBA
 - Benchmark
 - Weekly Classroom
- Teacher Observations
- Fidelity Monitoring Form

Discussion

Placement Options

Exit Student from Rtl Process: Why _____

Refer to speech

Continue in Tier 2 with new Tier 2 Intervention Plan (Develop new Intervention Plan)

Student is referred to Tier 3 (Develop new Intervention Plan)

£ Data indicates that Dyslexia assessment is needed.*

£ Data indicates that Section 504 evaluation is needed. **

* If a referral is made to Dyslexia Program, have parent sign Parent Consent Assessment and Receipt of Rights for Rights pamphlet.

** If a referral is made to the 504 committee, have parent sign the Receipt of Rights and provide pamphlet. Provide parent the "Parent Information" section of the Section 504 packet.

- Rtl Team Leader** _____
- Principal/Administrator** _____
- Diagnostician** _____
- Teacher** _____
- Teacher** _____
- Teacher** _____
- *Speech Therapist** _____
- LPAC Representative** _____
- Dyslexia Teacher** _____
- Parent** _____
- Parent** _____

***Speech Therapist make be consulted rather than present.**