

Form 4 Intervention Fidelity and Progress Monitoring-Teacher Proof

This form should be filled out weekly to document intervention provided and student response. Each intervention provider should complete this form independently

The respondent's email (**null**) was recorded on submission of this form.

* Required

1. Email *

2. Date of Intervention (if for the week, note the Monday) *

Example: January 7, 2019

3. Minutes of intervention (avg) provided daily *

Mark only one oval.

5

10

15

20

25

30

45

60

4. Days intervention was provided this week

Check all that apply.

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday

5. Intervention Provider *

6. Brief Description of Interventions *

This question can be changed to a checklist by the PLC or CST reflective of the intervention plan so that the required interventions are documented on the same form used to track implementation and response.

7. Probe used to measure growth *

This can be changed on an individual basis to identify the limited number of probes chosen by the CST team

Mark only one oval.

- Acadience NWF
- Acadience Oral Reading Fluency (wcpm)
- Acadience accuracy
- Acadience Retell words
- Acadience Retell Quality
- Acadience MAZE
- Wonders Phonics Screener
- 95% Phonics Screener
- Rate of Behavior
- Other

8. Short description of probe and measurable numeric *

Examples include: Acadience oral reading fluency wcpm on process monitor, skill level mastered on phonics screener, digits correct per minute on a skill based, class wide math probe, number mastered in times table, correct digit sequences when writing, number spelled correctly in random probe of Frye first 100, rate of hitting peers per hour, etc. If the CST team chooses to amend the question above, the team can be very specific in the above question and eliminate the need for this question

9. Numeric performance data *

This should be numeric data only, for example 16 (wcpm), 3 (for mastered multiplication facts for the number 3), 56 (correct word sequences), 3 (times hit peers per hour). Only the number is typed. This too can be specified by the CST

10. Other anecdotal information

11. Date this was reviewed by PLC: Must be done no less than monthly.

Example: January 7, 2019

12. PLC Guidance Summary

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