

*McDavid-Jones Elementary*

RtI Forms  
Problem Solving Teams  
(PST)

**2016-2017**

*These are the forms that are used to document  
the RTI/PST process for student interventions.*

Race: \_\_\_\_\_

Gender: \_\_\_\_\_

**Response to Instruction  
Cover Sheet  
2016-2017**

---

Student's Name

---

Teacher

---

Grade

---

Date

**Status at the end of the year:**

---

---

McDavid-Jones Elementary School  
16250 Hwy 45 South  
Citronelle, Alabama 36522

# RTI Checklist & Reminders

## 2016-2017

\_\_\_\_ Meeting dates (tentative) for the **PST team** are as follows. Snow's room. 11:30

- September 9
- October 26
- November 30
- January 26
- March 7

\_\_\_\_ Set up your binder. Hard copies of all forms are in your binder and sent electronically.

\_\_\_\_ Check the paperwork that was given to you from the previous grade level. It will provide information about who was in RTI and the interventions they were receiving. If you come across paperwork for a student who was retained, please send it back to the previous grade level. All packets from previous years will be located in Snow's room.

\_\_\_\_ Start your log at your first meeting or prior to. Your group can decide how you want to do this.

### Reminders

- Just because a child is in RTI does not mean they will be in **Tier 3** intervention; however, if a child is in **Tier 3** Intervention they *should* be in RTI.
- Students who have been *placed* in Special Education are not kept in RTI.
- Students who are *released* from Special Services should be in RTI "on watch".
- ELL or ESL students should not be in RTI, if language is the only barrier. They should be receiving services from the ESL resource teacher. They should be in RTI if they have other academic deficits.

### Codes

- Tier 2 is done by the classroom teacher in the classroom.
- Tier 3 is done by a resource teacher outside the general education classroom/classroom teacher.

### RTI Criteria ~ *Who should be in RTI? What is considered?*

- Students who are continued from the previous year
- Students who were not proficient on ACT Aspire.
- Students who performed below level on the Universal Screening (STAR)
- Teacher judgment overrides all data when necessary.
- Re-teaching /Retesting should occur prior to beginning RTI.

Grade Level: \_\_\_\_\_

School Year: 2016-2017

**McDavid-Jones Elementary ~ Response to Instruction Baseline Data Log**

<b>Student's Name</b>	<b>HR Teacher</b>	<b>R/M or Behavior or Attendance</b>	<b>Aspire Category</b>	<b>STAR Reading</b>	<b>STAR Math</b>	<b>DIBELS Level</b>	<b>Attendance Days Absent</b>

Please maintain a log of the students per grade level in Rtl as they move in/out of the process. Keep the log with the Rtl binder for your grade level. I will ask for it at least once a quarter to get information for a report. DS

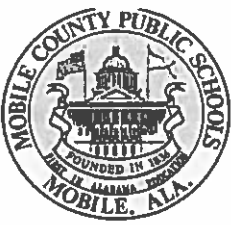
Grade Level: \_\_\_\_\_

School Year: 2016-2017

**McDavid-Jones Elementary ~ Response to Instruction Log**

Student's Name	HR Teacher	Race	Date Rtl Begins	Date Tier 3 Begins	Date Released or Withdrawn	Date Referred	R/M or Behavior or Attendance	Comments	Status at EOY

Please maintain a log of the students per grade level in Rtl as they move in/out of the process. Keep the log with the Rtl binder for your grade level. I will ask for it at least once a quarter to get information for a report. DS



# Mobile County Public School System

P.O. Box 180069 • Mobile, Alabama 36618

Jill Dickinson  
Principal  
[sdickinson@mcpss.com](mailto:sdickinson@mcpss.com)  
Fax 251-221-1513

*McDavid-Jones Elementary School*  
*16250 Hwy 45 S*  
*Citronelle, AL 36522*  
Ph: 251-221-1510 ~ Fax: 251-221-1513

## *Notice of Intervention*

Date: \_\_\_\_\_

Dear \_\_\_\_\_

All students in Alabama schools are provided with standards-based, research-validated core academic instruction accompanied by classroom behavioral supports. A tiered system of academic and/or behavioral assistance or intervention is provided based upon identified student needs. Intervention typically includes specialized, research-based teaching strategies provided within the classroom or in small-group settings. As required by the Alabama Department of Education, a problem-solving team consisting of teachers, administrators, and other support personnel reviews student data regarding need for assistance; recommends the type of assistance to be provided; reviews data reflecting progress being made by students; and informs parents of the progress and of any recommendations regarding changes in interventions.

The Mobile County Public Schools System is using the Renaissance Learning STAR Progress Monitoring System to check student performance in reading and math so we can provide help to students as needed. Based on the first assessment, we have determined that your child would benefit from assistance or intervention. We will be providing this assistance daily as scheduling allows, and will be checking your child's progress a minimum of twice a month. We will be sharing this information with you by sending you a progress report each month to inform you of your child's progress. Please sign the progress report and return to the teacher so she will know that you have been informed of progress. You can help by making sure that your child is present, all day, and on-time for school each day. Important instruction is missed when students are tardy, absent, or getting early dismissals.

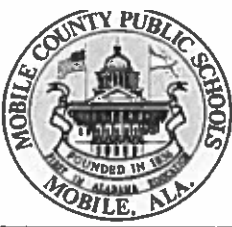
As school staff, we look forward to working with your child and are pleased to be able to provide this additional help. If you have questions, please feel free to contact your child's classroom teacher.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

\_\_\_\_\_  
Student

\_\_\_\_\_  
Homeroom/Course Teacher



# Mobile County Public School System

P.O. Box 180069 • Mobile, Alabama 36618

Jill Dickinson  
Principal  
[sdickinson@mcpss.com](mailto:sdickinson@mcpss.com)  
Fax 251-221-1513

*McDavid-Jones Elementary School*  
*16250 Hwy 45 S*  
*Citronelle, AL 36522*

Ph: 251-221-1510 ~ Fax: 251-221-1513

*Intervention Progress Report*

Date: \_\_\_\_\_

Dear \_\_\_\_\_,

We are providing \_\_\_\_\_ with extra assistance daily by using intervention strategies which target:

- \_\_\_\_\_ Reading comprehension skills
- \_\_\_\_\_ word-level reading skills
- \_\_\_\_\_ Math computation skills
- \_\_\_\_\_ Math reasoning and problem-solving skills
- \_\_\_\_\_ Behavior skills
- \_\_\_\_\_ other \_\_\_\_\_

We measure the progress being made regularly, and the results of these progress measurements are described in the report which is attached. Based on our progress measurements, we believe that, at this time your child is:

- \_\_\_\_\_ making *good progress* and we plan to continue interventions at this time.
- \_\_\_\_\_ making *some progress* and we plan to continue intervention at this time.
- \_\_\_\_\_ making *limited progress* and we plan to consider some changes in the intervention we are providing.
- \_\_\_\_\_ making *insufficient progress* and we are changing the intervention in an effort to assist your child in achieving academic success.

As a school staff, we are pleased to have this opportunity to provide your child with this needed help. If you have questions, please feel free to contact your child's homeroom teacher.

\_\_\_\_\_  
Parent Signature

\_\_\_\_\_  
Date

# PST Committee Referral Form Attendance

Student: \_\_\_\_\_ Date: \_\_\_\_\_

D.O.B. \_\_\_\_\_ Grade: \_\_\_\_\_ School: \_\_\_\_\_

Transportation: \_\_\_\_\_ Bus \_\_\_\_\_ Car Rider \_\_\_\_\_ Walker

Current Attendance: Total Absences \_\_\_\_\_ Unexcused Absences \_\_\_\_\_ Tardies \_\_\_\_\_

Does the student have a current chronic ailment letter on file? \_\_\_\_\_ Yes \_\_\_\_\_ No

Grades: Reading \_\_\_\_\_ Lang Arts \_\_\_\_\_ Math \_\_\_\_\_ Social Studies \_\_\_\_\_  
Science \_\_\_\_\_ P.E. \_\_\_\_\_ Work Skills \_\_\_\_\_ Conduct \_\_\_\_\_  
Other: \_\_\_\_\_

## PST Committee Observation Information

Dates of Observation: From: \_\_\_\_\_ To: \_\_\_\_\_

## Parent Involvement

Have parents responded to requests for conferences? \_\_\_\_\_ Yes \_\_\_\_\_ No

Are parents actively engaged in student's education? \_\_\_\_\_ Yes \_\_\_\_\_ No

Can parents transport student to and from tutoring if needed? \_\_\_\_\_ Yes \_\_\_\_\_ No

Is the school aware of any allegations of abuse or neglect filed with DHR? \_\_\_\_\_ Yes \_\_\_\_\_ No

**Is the school aware of any other family circumstances that may be contributing to the student's lack of school success?**



**Services To Address Difficulties:** (Check all that apply)

\_\_\_ In School Intervention (M T W TH F) \_\_\_ Tutoring (M T W TH F)  
(Circle) \_\_\_ Transportation Provided

\_\_\_ Extended Day Program (M T W TH F)  
\_\_\_ Transportation Provided

\_\_\_ Counseling \_\_\_ Mentoring \_\_\_ Uniforms \_\_\_

\_\_\_ Parent Contacts \_\_\_\_\_

\_\_\_ Parent Conferences \_\_\_\_\_

\_\_\_ Other Services: \_\_\_\_\_

Give specifics about what you, as the classroom teacher, are doing to address the attendance needs of the student.

**School Incentives for Attendance:**

\_\_\_ Weekly Class Incentives \_\_\_ Daily Classroom Incentives  
\_\_\_ 20-Day Rewards \_\_\_ Weekly Classroom Incentives  
\_\_\_ Quarterly Awards \_\_\_ 100<sup>th</sup> Day Perfect Attendance

**PST Committee Members**

Name:

Position:

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

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

# Behavior Report Card



**McDavid-Jones Elementary School**

**16250 Hwy 45 S.**

**Citronelle, AL 36522**

**Ph: 221-1510**

**Fax: 221-1513**

*Jill Dickinson, Principal*

*Connie Krist, Assistant Principal*

\_\_\_\_\_  
Student Name

\_\_\_\_\_  
Date

\_\_\_\_\_  
Teacher's Name

\_\_\_\_\_  
Grade Level

## Response to Instruction Behavior Progress

### Rating Scale:

Good day = 3

Mixed day = 2

Will try harder tomorrow = 1

Points Possible: \_\_\_\_\_

Points Earned: \_\_\_\_\_

% of points: \_\_\_\_\_

Goal = \_\_\_\_\_%

Goal Achieved? Yes      No

Goals	Monday	Tuesday	Wednesday	Thursday	Friday
Be Respectful					
Be Resourceful					
Be Responsible					

Teacher Signature/Comments:

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

Parent Signature/Comments: \_\_\_\_\_

**Appendix K-1**

**PROBLEM SOLVING TEAM (PST) STUDENT INTERVENTION PLAN FORM**

**SECTION I. FACTORS CONSIDERED IN DETERMINING NEED FOR INTERVENTION**

Student's Name: \_\_\_\_\_ Sex: \_\_\_\_\_ Race: \_\_\_\_\_ Date: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_ Age: \_\_\_\_\_ DOB: \_\_\_\_\_

Vision/Hearing Screening Date: \_\_\_\_\_ Pass: \_\_\_\_\_ Fail: \_\_\_\_\_

List/Attach specific screening/benchmark data (e.g., STAR data)

1. \_\_\_ Reading: \_\_\_\_\_

2. \_\_\_ Math: \_\_\_\_\_

3. \_\_\_ Behavior: \_\_\_\_\_

**SECTION II. INTERVENTION PLAN REVIEW**

Select area(s) of concern.

1. \_\_\_ Reading \_\_\_ Tier 2 \_\_\_ Tier 3

Specific Concern to be Addressed \_\_\_\_\_

Person Responsible for Intervention \_\_\_\_\_

Narrative of intervention strategies \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. \_\_\_ Math \_\_\_ Tier 2 \_\_\_ Tier 3

Specific Concern to be Addressed \_\_\_\_\_

Person Responsible for Intervention \_\_\_\_\_

Narrative of intervention strategies \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. \_\_\_ Behavior \_\_\_ Tier 2 \_\_\_ Tier 3

Specific Concern to be Addressed \_\_\_\_\_

Person Responsible for Intervention \_\_\_\_\_

Narrative of intervention strategies \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

McDavid-Jones Elementary School  
Problem Solving Team  
Meeting Minutes/Referral Form

Date: \_\_\_\_\_

Student: \_\_\_\_\_

R M B A

Referring Teacher: \_\_\_\_\_

---

Month 1: \_\_\_\_\_ Data: \_\_\_\_\_

Intervention Results: \_\_\_\_\_

Concerns: \_\_\_\_\_ No Change \_\_\_\_\_ Concerns \_\_\_\_\_ Worse

Progress/PST Recommendations: \_\_\_\_\_ Release \_\_\_\_\_ Continue Interventions \_\_\_\_\_ Referral  
\_\_\_\_\_ Try New Interventions Person Responsible: \_\_\_\_\_

Describe New Interventions: \_\_\_\_\_

PST Initials: \_\_\_\_\_

---

Month 2: \_\_\_\_\_ Data: \_\_\_\_\_

Intervention Results: \_\_\_\_\_

Concerns: \_\_\_\_\_ No Change \_\_\_\_\_ Concerns \_\_\_\_\_ Worse

Progress/PST Recommendations: \_\_\_\_\_ Release \_\_\_\_\_ Continue Interventions \_\_\_\_\_ Referral  
\_\_\_\_\_ Try New Interventions Person Responsible: \_\_\_\_\_

Describe New Interventions: \_\_\_\_\_

PST Initials: \_\_\_\_\_

---

Month 3: \_\_\_\_\_ Data: \_\_\_\_\_

Intervention Results: \_\_\_\_\_

Concerns: \_\_\_\_\_ No Change \_\_\_\_\_ Concerns \_\_\_\_\_ Worse

Progress/PST Recommendations: \_\_\_\_\_ Release \_\_\_\_\_ Continue Interventions \_\_\_\_\_ Referral  
\_\_\_\_\_ Try New Interventions Person Responsible: \_\_\_\_\_

Describe New Interventions: \_\_\_\_\_

PST Initials: \_\_\_\_\_

---

McDavid-Jones Elementary School  
Problem Solving Team  
Meeting Minutes/Referral Form

Date: \_\_\_\_\_

Month 4: \_\_\_\_\_ Data: \_\_\_\_\_

Intervention Results: \_\_\_\_\_

Concerns: \_\_\_\_\_ No Change \_\_\_\_\_ Concerns \_\_\_\_\_ Worse

Progress/PST Recommendations: \_\_\_\_\_ Release \_\_\_\_\_ Continue Interventions \_\_\_\_\_ Referral  
\_\_\_\_\_ Try New Interventions Person Responsible: \_\_\_\_\_

Describe New Interventions: \_\_\_\_\_

PST Initials: \_\_\_\_\_

Month 5: \_\_\_\_\_ Data: \_\_\_\_\_

Intervention Results: \_\_\_\_\_

Concerns: \_\_\_\_\_ No Change \_\_\_\_\_ Concerns \_\_\_\_\_ Worse

Progress/PST Recommendations: \_\_\_\_\_ Release \_\_\_\_\_ Continue Interventions \_\_\_\_\_ Referral  
\_\_\_\_\_ Try New Interventions Person Responsible: \_\_\_\_\_

Describe New Interventions: \_\_\_\_\_

PST Initials: \_\_\_\_\_

Month 6: \_\_\_\_\_ Data: \_\_\_\_\_

Intervention Results: \_\_\_\_\_

Concerns: \_\_\_\_\_ No Change \_\_\_\_\_ Concerns \_\_\_\_\_ Worse

Progress/PST Recommendations: \_\_\_\_\_ Release \_\_\_\_\_ Continue Interventions \_\_\_\_\_ Referral  
\_\_\_\_\_ Try New Interventions Person Responsible: \_\_\_\_\_

Describe New Interventions: \_\_\_\_\_

PST Initials: \_\_\_\_\_

Month 7: \_\_\_\_\_ Data: \_\_\_\_\_

Intervention Results: \_\_\_\_\_

Concerns: \_\_\_\_\_ No Change \_\_\_\_\_ Concerns \_\_\_\_\_ Worse

Progress/PST Recommendations: \_\_\_\_\_ Release \_\_\_\_\_ Continue Interventions \_\_\_\_\_ Referral  
\_\_\_\_\_ Try New Interventions Person Responsible: \_\_\_\_\_

Describe New Interventions: \_\_\_\_\_

PST Initials: \_\_\_\_\_

McDavid-Jones Elementary School  
Problem Solving Team  
Meeting Minutes/Referral Form

Date: \_\_\_\_\_

Month 8: \_\_\_\_\_ Data: \_\_\_\_\_

Intervention Results: \_\_\_\_\_

Concerns: \_\_\_\_\_ No Change \_\_\_\_\_ Concerns \_\_\_\_\_ Worse

Progress/PST Recommendations: \_\_\_\_\_ Release \_\_\_\_\_ Continue Interventions \_\_\_\_\_ Referral  
\_\_\_\_\_ Try New Interventions Person Responsible: \_\_\_\_\_

Describe New Interventions: \_\_\_\_\_

PST Initials: \_\_\_\_\_

Month 9: \_\_\_\_\_ Data: \_\_\_\_\_

Intervention Results: \_\_\_\_\_

Concerns: \_\_\_\_\_ No Change \_\_\_\_\_ Concerns \_\_\_\_\_ Worse

Progress/PST Recommendations: \_\_\_\_\_ Release \_\_\_\_\_ Continue Interventions \_\_\_\_\_ Referral  
\_\_\_\_\_ Try New Interventions Person Responsible: \_\_\_\_\_

Describe New Interventions: \_\_\_\_\_

PST Initials: \_\_\_\_\_

Team Members:

Principal/Designee	Counselor	Special Education
Teacher	Teacher	Teacher
Teacher	Teacher	Teacher
Teacher	Teacher	Teacher

What was the status of this student at the end of the year?

Withdrawn \_\_\_\_\_ Making Progress \_\_\_\_\_ Released \_\_\_\_\_ Retained \_\_\_\_\_

Promoted/Receiving Tier 3 \_\_\_\_\_ Promoted/Receiving Tier 2 \_\_\_\_\_

Comments:

*McDavid-Jones Elementary*

**PST Meetings**

---

---

**School-wide Meeting**

**Date:** \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_

11. \_\_\_\_\_

12. \_\_\_\_\_

*McDavid-Jones Elementary*

**PST Meetings**

---

---

**Grade Level Meeting:** \_\_\_\_\_ **Date:** \_\_\_\_\_

1. \_\_\_\_\_

2. \_\_\_\_\_

3. \_\_\_\_\_

4. \_\_\_\_\_

5. \_\_\_\_\_

6. \_\_\_\_\_

7. \_\_\_\_\_

8. \_\_\_\_\_

9. \_\_\_\_\_

10. \_\_\_\_\_

11. \_\_\_\_\_

12. \_\_\_\_\_