**Chetek-Weyerhaeuser Area Schools**

**Classroom Intervention Plan Form**

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| **Student:**       | **Grade:**      **Team Meeting Date:**       | [ ]  **Group** [ ]  **Individual** | [ ]  **Supplemental** [ ]  **Intensive** |
| **Area of Concern:**      **Expected Level of Performance:**       |
| **Data Indicating Need** **Assessment data indicates:**       |
| **Formative Assessment Plan****What Data will be collected and who will collect data?**      **How often will data be collected?****[ ]  Weekly** **[ ]  Bi-weekly** **[ ]  Other** **What materials will be used to collect data?**  |
| **Plan to Use Data for Decision Making****Who will monitor implementation?**[ ]  Reading Specialist [ ]  RtI Coordinator [ ]  Principal [ ]  Other      **What method will be used to monitor implementation? (attach data collection tool used)**[ ]  Direct Observation [ ]  Team completed Checklist [ ]  Other      **When will implementation be monitored?**       |
| **Date** | **Instructional Procedures** | **Group Size** | **Amount/Frequency** | **Person Responsible** |
|       |       |       |       |       |