



Student Support and Progress Team Follow-Up Meeting Notes

Student Name: _____ Student ID #: _____

School: _____ Local District: _____ Date: _____

SSPT Members Present at Meeting:

Name	Position/Relationship to Student
Name	Position/Relationship to Student
Name	Position/Relationship to Student
Name	Position/Relationship to Student
Name	Position/Relationship to Student

Tiered Instruction: Tier 1 Tier 2 Tier 3

Progress:

Priority Goal #1: Response to Intervention:
Progress as indicated by data collection:
Priority Goal #2: Response to Intervention:



Progress as indicated by data collection:

Priority Goal #3: Response to Intervention:

Progress as indicated by data collection:

Additional Support Needed for Teacher or Student:

Evidence Shows:

1. ___ Student is making progress, continue the interventions as outlined in the Intervention Plan.
2. ___ Modify the intervention (i.e., goals, strategy, program, grouping, duration, frequency, etc.)
3. ___ Adjust the level of tiered support, based on student outcome data.
4. ___ Review and consider a Section 504 Plan.
5. ___ Student is being recommended for reclassification.
6. ___ Exit the SSPT Process and make data-based decisions regarding educational needs and next steps.

Was the student recommended to move to a new tier? Yes ____ No ____

Indicate newly recommended tier: Tier 1 Tier 2 Tier 3

Next SSPT Follow-up Meeting Date/Time: _____