

Pulaski County Intervention System (PCIS) Intervention Plan

School: _____

Student:	DOB:	Grade:	Date:
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1. List areas of concern for the student:

2. List goals for improvement:

Title of Intervention(s)	Frequency of Service	Amount of Time	Dates		Progress Monitoring	
			From	To	Weekly	Other

*** Interventions must be delivered by qualified personnel and in the regular education setting.**

Data Review Meetings (see key below)

Date								
Rating								

Progress Rating Key

- A. Student has achieved benchmarks/goals per school's decision making guide.
- B. Continue the plan because progress is evident although goals have not been met.
- C. Revise the plan because the goals have not been met and inadequate progress is being made.
- D. Student will be referred for additional assessment.
- E. Other: Indicate in Notes section below.

Notes (include list of attendees for each meeting):

Pulaski County Intervention System (PCIS) Intervention Plan

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Notes continued (include list of attendees for each meeting):

Pulaski County Intervention System (PCIS) Intervention Plan

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Notes continued (include list of attendees for each meeting):