

Accelerated Instruction PEIMS Form

This form shall be completed each time a change is made to a student's Accelerated Instruction. The original shall be retained by the campus specialist and a copy should be retained by the campus registrar/data entry clerk.

Student Name: _____ **Date of Birth:** _____

Student ID: _____ **Grade:** _____ **Campus:** _____

Academic School Year: _____

Accelerated Instruction Subject:

ACCELERATED-INSTRUCTION-SUBJECT indicates the subject in which the student is eligible to receive accelerated instruction.

- 01 – Reading/English**
- 02 – Math**
- 03 – Science**
- 04 – Social Studies**

Accelerated Instruction Participation:

STUDENT-ACCELERATED-INSTRUCTION-PARTICIPATION indicates whether or not the student participated in the prescribed accelerated instruction for the subject in which the student did not achieve satisfactory performance on an assessment instrument.

- 01 - Student Participates in Supplemental Accelerated Instruction**
- 02 - Student Does Not Participate – Parent opt out of Accelerated Instruction**
- 03 - Student Does Not Participate – Assigned TIA Teacher**
- 04 - Student Does Not Participate – Assigned Accelerated Instruction in Two Other Subjects**
- 05 - Student Does Not Participate – Retained**
- 06 - Local Education Agency Exempt from Providing Accelerated Instruction**

Assigned Instruction Hours: _____

ASSIGNED-HOURS-ACCELERATED-INSTRUCTION indicates the number of hours of accelerated instruction assigned to the student for a particular subject.

Year To Date (YTD) Hours Completed: _____

YTD-NUMBER-HOURS-COMPLETED indicates at the time of withdrawal from the school the number of hours of accelerated instruction completed for the subject.

Difference Reason Hours Accelerated Instruction: (IF NEEDED)

Indicates the reason the student did not complete the full number of assigned hours of accelerated instruction.

- 01 - Student Withdrew**
- 02 - Parent Opt Out After Initial Acceptance**
- 03 - Student Did Not Attend Assigned Hours**
- 04 - Failure To Meet Compulsory Attendance Requirements**
- 05 - Hours Not Completed Before Next Test Administration**
- 06 - Unexpected School Closure**
- 07 - Unable To Participate Homebound Or Other Off-Campus Instructional Arrangement (TEC §28.0211(i-1))**

Form Completed by: _____ **Date:** _____

*For students that reclassify and/or change between program types, it will require some code types to have start and end dates.

Form Enter into Student SIS b: _____ **Date:** _____