**Meeting Agenda, Minutes and Problem-Solving Action Plan Form**

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| --- | --- | --- | --- | --- |
|  | **Date:** | **Time:** | **Location:** | **Norms:** |
|  |  |  |  |
|  |  |  |  |

**Team Members Present:**

|  |  |  |
| --- | --- | --- |
| **Today’s Agenda Items:** | **Additional Agenda Items:** | **Potential Problems Raised:** |
| 1.  2.  3.  4. |  | 1.  2.  3. |

|  |  |  |  |
| --- | --- | --- | --- |
| **Agenda Item** | **Discussion/Decision/Task (if applicable)** | **Who?** | **By When?** |
|  |  |  |  |
|  |  |  |  |

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Other Issues

**Evaluation of Team Meeting** (Mark your ratings with an “X”)

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| --- | --- | --- | --- |
|  | **Yes** | **So-So** | **No** |
| 1. Was today’s meeting a good use of our time? |  |  |  |
| 2. In general, did we do a good job of tracking whether we’re completing the tasks we agreed on at previous meet- ings? |  |  |  |
| 3. In general, have we done a good job of actually completing the tasks we agreed on at previous meetings? |  |  |  |
| 4. In general, are the completed tasks having the desired effects on student behavior? |  |  |  |

If some of our ratings are “So-So” or “No,” what can we do to improve things?