Tier 3 Student File Set-Up Checklist

Complete and update this checklist at each action team meeting.

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| 1. Student File Information | 2. Team Member Information | | | |
| Student: | Name | Role | Email | Access |
| Implementation Status: |  |  |  |  |
| Starting \_\_\_/\_\_\_/\_\_\_ |  |  |  |  |
| Progressing \_\_\_/\_\_\_/\_\_\_ |  |  |  |  |
| Not Progressing \_\_\_/\_\_\_/\_\_\_ |  |  |  |  |
| Needs Revision \_\_\_/\_\_\_/\_\_\_ |  |  |  |  |
| Fade/Graduate \_\_\_/\_\_\_/\_\_\_ |  |  |  |  |
| Coordinator: | Additional Interventions Provided:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_/\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_/\_\_\_ | | \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_/\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_/\_\_\_ | |

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| 3. FBA/BIP Assessment and Documents Reference | |
| Assessment Documents  *(Interviews, Adapted FACTS, Observation Recording Form)* |  |
| Plan Documents  *(BIP [all versions], Implementation Review Form, Social Validity Form)* |  |
| Communication |  |
| Data and Artifacts  *(DPRs, Progress Graphs, Observation Data)* |  |

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| 4. Fidelity Measure(s) | | | | | |
| Name: | | Description: | | | |
| Times: ☐ \_\_ minutes ☐ \_\_ period  ☐ \_\_ day ☐ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Data Collection Schedule: ☐ daily  ☐ weekly ☐ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Collection Method: ☐ face-face  ☐ e-form ☐ data sheet  Compiled by: | |
| Goals: > ≥ = ≤ < Target: \_\_\_\_\_ | | Start Date: | | End Date: | |
| 5. Outcome Measure(s) | | | | | |
| Name: | | Description: | | | |
| Times: ☐ \_\_ minutes ☐ \_\_ period  ☐ \_\_ day ☐ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Data Collection Schedule: ☐ daily  ☐ weekly ☐ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Collection Method:  Compiled by: | |
| Goals: > ≥ = ≤ < Target: \_\_\_\_\_ | | Start Date: | | End Date: | |
| Week 1 Date | Total | Week 2 Date | Total | Week 3 Date | Total |
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| Total for week: |  | Total for week: |  | Total for week: |  |

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| 6. Outcome Measure(s) | | | | | |
| Name: | | Description: | | | |
| Times: ☐ \_\_ minutes ☐ \_\_ period  ☐ \_\_ day ☐ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Data Collection Schedule: ☐ daily  ☐ weekly ☐ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | | Collection Method:  Compiled by: | |
| Goals: > ≥ = ≤ < Target: \_\_\_\_\_ | | Start Date: | | End Date: | |
| Week 1 Date | Total | Week 2 Date | Total | Week 3 Date | Total |
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| Total for week: |  | Total for week: |  | Total for week: |  |