



# SST / TIER 3 MEETING MINUTES

Date: \_\_\_\_\_

Student's Full Name: \_\_\_\_\_ DOB: \_\_\_\_\_ Grade: \_\_\_\_\_

School: \_\_\_\_\_ Teacher: \_\_\_\_\_

**Purpose of Meeting:**

**Discussion Summary:** (any information concerning the student that is not addressed in the Student Intervention Plan (SST), such as home factors, medical concerns, teachers observations, parent concerns):

**Decision:** (This section is NOT applicable to INITIAL SST meeting. To be completed at subsequent meetings).

The team reviewed all available data sources (including the Student Intervention Plan, progress monitoring data, teacher, parent, and other team members' input, student's rate of growth compared to grade level peers, etc.). In consideration of the goal specified on the Student Intervention Plan, the following conclusions were made:

- The student is making adequate progress toward goal.
- The student is NOT making adequate progress toward goal.
- Additional data is needed to determine the student's progress toward goal.

**Mark all that apply:**

- Continue current intervention.
- Move student back to Tier 2.
- Revise / change intervention (complete new Student Intervention Plan -- SST
- Complete SST / Tier 3 Checklist for Folder Review (SST 11).

Other:

**Team Members Present (Name / Title):**
