

Sponsored by

the Vermont Agency of Education

and the University of Vermont

**PBIS Intent to Implement Application**

**Instructions:**

Please complete this application and send or fax to Anne Dubie

by **January 1st for March Universal Training** or **April 1st for June Universal Training**:

* Implementation Partnership Agreement
* Implementation Readiness Checklist
* School Information Profile Form

Anne Dubie

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**Implementation Partnership Agreement**

**(*To be completed by Superintendent & Administrator*)**

**VTPBiS State Team - Supervisory Union/District Leadership Team - School Leadership Team**

By completing this Implementation Partnership Agreement, you are engaging in important steps necessary to implement with fidelity and sustain your effort. The following outlines the commitments of the VTPBiS State Team, the Supervisory Union/District and the School:

**VTPBiS State Team will:**

1. Provide technical assistance to Supervisory Unions/Districts and schools in the exploration phase of implementation
2. Ensure that SU/District and School Leadership Teams receive a sequence of trainings\*, including:
* Introductory Forums
* Readiness Trainings
* Team Leadership Trainings including:
	+ SU/District and School Coordinator Orientation
	+ Administrative Overview

\*All training activities will be face-to-face, webinar, or other technology.

1. Provide ongoing training and technical assistance to Supervisory Union/District Coordinators and building-level School Coordinators.
2. Coordinate ongoing professional development through a series of topic-based workshops and the BEST Summer Institute.
3. Facilitate access to data management systems for decision-making and reporting.
4. Assist Supervisory Unions/Districts with collecting, interpreting, and action planning around data.

**The Supervisory Union/District will:**

1. Develop and follow a long-range (3-5 year) plan for implementation with specific goals and strategies consistent with the framework presented by the State Team. This implementation plan should be aligned with other SU and school initiatives, and support implementation and sustainability of the intervention in all participating SU schools.
2. Ensure that the Implementation Readiness Checklist (attached) is complete and validated by the State Level [Technical Assistance person](http://www.uvm.edu/~cdci/best/pbswebsite/VTPBiSTAMap2016-2017.pdf) for your region.
3. Identify a .1 to .2 FTE Supervisory Union/District Coordinator for 1-7 schools. The SU/District Coordinator will:
* Establish a SU/District Leadership team
* Facilitate the use of data-based decision making tools for ongoing evaluation
* Communicate with local and state partners
* Access resources for schools needed for implementation
* Participate in ongoing SU/District Coordinators meetings

**The School will:**

1. Answer “yes” on all items on the Implementation Readiness Checklist
2. Participate in the PBIS Training Series and develop an action plan
	1. Intro Trainings
	2. Readiness Trainings (optional)
	3. Team Leadership Trainings
3. Identify a .1 FTE building-level School Coordinator. The School Coordinator will:
* Ensure the scheduling and facilitation of monthly leadership meetings
* Attend all SU/District and Regional School Coordinator meetings
* Support school leadership team in the completion of evaluation tools
* Communicate with local and state partners

**Partnership Agreement Signature Page:**

**Principal and Superintendent are to sign the Partnership Agreement below:**

I intend to work with my school and SU/District to fulfill the steps outlined above. I am aware that this involves a commitment to complete the Implementation Readiness Checklist with a score of 100% (yes to all items). My signature below indicates an understanding of this partnership agreement and the intention to dedicate adequate resources as outlined toward this effort.

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

Superintendent Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Superintendent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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

School Principal Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Principal Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**PBIS Implementation Readiness Checklist**

**(*To be completed by School Coordinator & Administrator*)**

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ SU: \_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_

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| **Documents / Evidence Complete?** |  | **Steps to Implementation Readiness**  |
| **YES** | **NO** | 1. A school action plan exists, or is being developed, to include PBIS as one of the top three school goals.
	1. **Attach a copy of your School Action Plan Goals page.**
 |
| **YES** | **NO** | 1. A building-level Leadership Team is formed and has broad representation (i.e. a team member with expertise in behavior, administrator(s), school counselor, regular and special education teachers, community member, parent, and school support staff).
	1. **List the Leadership Team members and their school titles.**
 |
| **YES** | **NO** | 1. The Principal or Assistant Principal with decision making authority commits to active participation on the Leadership Team and agrees to attend ***all*** team trainings ***and*** team meetings.
	1. **List participating Administrator(s).**
 |
| **YES** | **NO** | 1. The Principal commits to the implementation of the intervention and is aware that implementing an intervention is a 3-5 year process that will require ongoing training and/or revisions of the school’s Implementation Plan.
	1. **Obtain Principal’s Signature of Agreement on Partnership Agreement Form.**
 |
| **YES** | **NO** | 1. The Leadership Team agrees to commit to (at least) monthly meetings to analyze and problem solve using school-wide data.
	1. **Describe when the Leadership Team will meet throughout the school year (days, location, and time).**
 |
| **YES** | **NO** | 1. The Leadership Team has participated in an awareness presentation on PBIS.
	1. **Record the date and location of presentation and the presenter’s name(s).**
 |
| **YES** | **NO** | 1. The school has allocated/secured funding from the SU to support PBIS implementation.
	1. **Identify funding source (BEST/Act 230 grant, etc.).**
 |
| **YES** | **NO** | 1. An individual at the SU level has been identified as the Supervisory Union Coordinator at least .1 FTE (4 hours per week) depending on number of schools implementing PBIS. See Implementation Partnership Agreement for SU/District Coordinator responsibilities.
	1. **Record your SU Coordinator’s name and SU title.**
 |
| **YES** | **NO** | 1. A building-level School Coordinator has been identified to actively participate in PBIS, and is assigned a .1 FTE (4 hours per week) responsibility per school for this work. See Implementation Partnership Agreement for the building level School Coordinator responsibilities.
	1. **Record your building-level School Coordinator’s name and school title.**
 |
| **YES** | **NO** | 1. The school uses, or agrees to develop, work products, practices and procedures that can be used to make data-based decisions regarding PBIS.
2. **Attach a copy of a work product example, which will assist you making data-based decisions.**
 |
| **YES** | **NO** | 1. The school has, or agrees to develop, systems and processes to sustain PBIS implementation.
	1. **Describe this process for your school.**
 |
| **YES** | **NO** | 1. Data entry time is allocated and scheduled to ensure that data will be current to within a week at all times.
	1. **Describe this process for your school.**
 |
| **YES** | **NO** | 1. The school/SU will cover necessary costs or secure funds to cover costs (e.g., substitutes, food, lodging, etc.) for Leadership Team to participate in trainings.
* **Confirm: Yes OR No**
 |
| **YES** | **NO** | 1. The Leadership Team has provided an awareness presentation on PBIS to the school’s entire faculty and support staff ***(all school employees***) prior to voting to support PBIS implementation.
	1. **Indicate date of the presentation.**
 |
| **YES** | **NO** | 1. At least 80% of your faculty, staff, and administration show interest in implementing PBIS.
	1. **Indicate the date and method of obtaining staff buy-in and results (i.e., percentage or range of faculty committed).**
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Please explain why you think implementing PBIS will help your school:

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What data have you used to support this?

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| **School Information Form** |  |

**Instructions:** If your school has, or is in the process of, implementing Positive Behavior Interventions & Support, please complete this form.

Required fields are marked with an asterisk (\*).

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| **School Information** |  |  |  |
| **\*School Name:** | **\*District Name:** | **County:** |  |
| **\*Mailing Address:** | **\*City:** | **\*State/Province:** | **\*Zip/Postal Code:** |
| **Physical Address:** *(if different)* | **City:** | **State/Province:** | **Zip/Postal Code:** |
| **\*Phone:** | **Fax:** | **Web Address:** |
| **\*Grade Levels:** *(check all that apply)*

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| **PrePreK** | **PreK** | **K** | **1** | **2** | **3** | **4** | **5** | **6** | **7** | **8** | **9** | **10** | **11** | **12** | **Post12** |
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 |
| **\*School Administrator:** | **Phone:** | **\*Email:** |
| **\*PBIS School Coordinator Name:** | **Phone:** | **\*Email:** |
| **\*PBIS SU/District Coordinator Name:** | **Phone:** | **\*Email:** |
| **State PBIS Technical Assistant (TA):** | **Phone:** | **\*Email:** |

**Additional School Information:**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Private School?** | **Juvenile Justice** | **Other Alternative?** | **Alternative Behav Prog?** | **Early Childhood Prog?** |
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| **Yes** | **No** |
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| **Yes** | **No** |
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| **Yes** | **No** |
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| **Yes** | **No** |
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| --- | --- |
| **Yes** | **No** |
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