**(Insert School Name)**

**VTPBiS UNIVERSAL**

**(Insert Logo Here)**

**Staff Handbook**

**(Insert School Year)**

**Developed by the following school staff: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Revised Date: (Always update Date when revisions are made)**

The purpose of this Handbook is to share the critical features of what PBIS looks like in our school. This handbook will be updated on an annual basis and available to all members of our school’s faculty and staff.

**What is PBIS?** PBIS is a framework or approach for assisting school personnel in adopting and organizing evidence-based behavioral interventions into an integrated continuum that enhances academic and social behavior outcomes for all students. PBIS IS NOT a packaged curriculum, scripted intervention, or manualized strategy. PBIS IS a prevention-oriented way for school personnel to (a) organize evidence-based practices, (b) improve their implementation of those practices, and (c) maximize academic and social behavior outcomes for students. PBIS supports the success of ALL students. PBIS, often referred to as a Multi-Tiered System of Support for Behavior (MTSS-B), provides a framework for academic and behavioral support as indicated in the triangle below.

**School-wide Multi-Tiered System of Supports for Student**

**Academic and Behavioral Success**



**1-5% of Students may need Intensive Supports**

* **Individual Students**
* **Assessment-based**
* **High Intensity**

**10-15% of Students may need Targeted Supports**

* **Some students (at-risk)**
* **High efficiency**
* **Rapid response**

**Some**

**Few**

**ALL Students!**

**Universal Practices in place for 100% of students**

**80% of Students should be successful when accessing Universal Supports**

* **All settings, all students**
* **Preventive, proactive**

 **(Insert School Name) Statement of Purpose:**

**(INSERT SCHOOL STATEMENT OF PURPOSE)**

For Examples: <http://www.pbisvermont.org/resources/training-presentations-a-materials/vtpbis-universal-trainings>

**(Insert Logo)**

**Our school-wide expectations are…**

* **(Insert Expectation)**
* **(Insert Expectation)**
* **(Insert Expectation)**

**(Insert School Name)’s Working Smarter, Not Harder: Teaming Structure**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
| **Team/Committee/Initiative** **Related to School Climate** | **Purpose** | **Outcome** | **Target** **Group** | **Staff****Involved** | **What School Action Plan Goal does it address?** |
|  |  |  |  |  |  |
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**Questions about PBIS in our School? Want to join a Team meeting?**

**Below you’ll find a list of team members, roles and our monthly meeting schedule.**

|  |
| --- |
|  |
| **(Insert School Name and what you call your team)** |
|  **Team Member Name Building Role Team Member Role**  |
|  |  |  |
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|  |  |  |
| **Monthly Meeting Schedule:****When: (e.g. Every 3rd Wednesday)****Where: (e.g. Rm 320)****Time: (e.g. 3-4pm** |

**All Staff in our school are expected to actively participate in the following 4 Components of PBIS:**

**(Insert School Name) School-wide Expectations Teaching Matrix**

|  |  |
| --- | --- |
| ***Rule/ Expectation*** | ***Routine/Setting*** |
| **(Insert Locations)** |  |  |  |  |
| **(Insert Expectations)** |  |  |  |  |  |
|  |  |  |  |  |  |
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|  |  |  |  |  |  |

For Examples: <http://www.pbisvermont.org/resources/training-presentations-a-materials/vtpbis-universal-trainings>

**Guidelines for Teaching the Matrix of School-wide Behavior Expectations**

**(Adapted from St. Albans Town Educational Center Staff Handbook)**

**How long should it take to teach the behavior in the matrix?**

* Lessons will need to be taught frequently in the beginning and reinforced continually throughout the school year.
* Teach lessons repeatedly through the first two to three week of school

**How long should the lesson be?**

* Keep the short, 10-15 minutes per lesson.

**How do you “teach” behavior expectations?**

* Show, model, demonstrate and role-play the way you want kids to behave in relation to the expectation being taught
* Have student get up and practice exactly what you demonstrated for them.
* Give students feedback until students learn the behaviors.
* Team up with a colleague to plan and teach lessons.

**Where should I teach the lessons?**

* Teach the behavioral expectations in the area it is expected (e.g. Cafeteria, locker room, hallway, classroom, etc…)

**How is this different from teaching classroom rules?**

* Our school-wide expectations should be similar to our classroom rules, but it is important to teach the consistent school-wide expectations. We are teaching the students the importance of these values within our school community.

**How do I reinforce our School-wide Expectations?**

* Continue to remind and give positive feedback to students following the expectations throughout the year
* If consistent problems develop in a specific area, time of day, or specific re-teach the expectations in that setting.
* When a new student joins your class, re-teach the expectations to the whole group.

**Sample Teaching Strategies/Lesson Plan Ideas:**

* Classroom discussions
* Brainstorm a list of action that show each expectation
* Have students talk about a person or character from a book that uses one of the expectations
* Role play both appropriate and inappropriate (recommended that the Teacher role play the inappropriate behavior) behaviors in relation to the expectations
* Create posters that demonstrate the expectations
* Encourage students to create teaching videos for appropriate behaviors
* TEACH and PRACTICE procedures

**(Insert School Name) Lesson Plan Sample**

**Lesson Plan Template: 1**

Universal Expectation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Name of the Skill/Setting: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

|  |
| --- |
| Purpose of the lesson/why it is important:1.2. |

|  |
| --- |
| Teaching examples:1.2.3. |

|  |
| --- |
| Kid activities/modeling/role-plays:1.2.3. |

|  |
| --- |
| Follow-up reinforcement Activities:1.2.For Examples: <http://www.pbisvermont.org/resources/training-presentations-a-materials/vtpbis-universal-trainings>Adapted from the Illinois PBIS Network Training Manual, October 2006 |

**Lesson Plan Template: 2**

|  |
| --- |
| SETTING:  |
| PROCEDURES: |
|  |
| EXPECTATIONS: |
|  |  |  |
|    |    |    |
| TEACHING EXAMPLES:  |
| POSITIVE EXAMPLES: | NEGATIVE EXAMPLES: |
|  |  |
| STUDENT ACTIVITIES: |
|  |
| AFTER THE LESSON: |
|   |

**Lesson Plan Template: 3**

**Location:**

Grades: Time Required:

|  |
| --- |
| **Objectives**: |
| **Materials**: |
| **Preparation**:  |
| **Procedure**: *Direct Instruction* *Modeling* *Role-Play* |
| **Assessment**: |
| **Follow-up**: |

**Insert Additional Lesson Plans for all settings here:**

 **(Insert School Name)’s Schedule for Teaching School-wide Expectations**

For Examples:

<http://www.pbisvermont.org/resources/training-presentations-a-materials/vtpbis-universal-trainings>

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Date:** | **Lesson Taught:** | **Who’s Teaching:** | **Where:** | **Grades Involved:** |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  |  |  |  |

**(Insert School Name)’s Plan for Reinforcing School-wide Expected Behaviors for**

**Students and Staff**

|  |  |  |  |
| --- | --- | --- | --- |
|  | **Name of Reinforcer** | **Criteria for obtaining** **(insert name)\_\_**  | **Process for delivering Positive Feedback****(What, When, By Whom, How Often, How Many, Where)** |
| **EXAMPLE:*****School-wide Formal Reinforcement System\**** | ***“BEST Bucks”*** | ***When students follow expectations in ALL settings*** | **When a student demonstrates a specific positive behavior related to the School-wide Expectations, immediately give positive and explicit verbal feedback and hand the student a “BEST Buck”.** |
|
| **School-wide Formal Reinforcement System** |  |  |  |
| **Classroom Level Reinforcement system** |  |  |  |
| **Individual Student Level Reinforcement system** |  |  |  |
| **Staff Reinforcement system** |  |  |  |
| **Sustainability: What is the procedure to inform new staff/students of the various reward systems.** |
| **\*The Classroom, Individual and Staff Reinforcement System should intentionally connect to the established School-wide Reinforcement System** |

 **(Insert School Name) Minors and Majors**

|  |  |
| --- | --- |
| **MINOR** BEHAVIORS: | **MAJOR** BEHAVIORS: |
|  |  |

Defining Classroom-managed Behavior (minors) vs. Office-managed Behaviors (majors)

**(Insert School Name)’s Procedures for Discouraging Problem Behavior**

General Procedure for Dealing with Problem Behaviors

Observe problem

behavior

Problem solve

Determine

consequence

Follow procedure

documented

File necessary

documentation

Send

referral to

office

File necessary

documentation

Determine

consequence

Follow

through with

consequences

Problem solve

Follow

documented

procedure

Write referral &

Escort student to office

Is

behavior

major?

 Does

student

have 3?

NO

YES

NO

YES

Find a place to talk with student(s)

Ensure safety

**Insert Procedural Flow Chart here:**

General Procedure for Dealing with Problem Behaviors

No

Yes

For Examples: <http://www.pbisvermont.org/resources/training-presentations-a-materials/vtpbis-universal-trainings>

Is behavior major?

Does student have 3?

Yes

No

**(Insert School Name)’s Office Discipline Referral Form (ODR)**

**EXAMPLE A:**

##### Office Referral Form

**Name:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Location**

**Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_ **Time:** \_\_\_\_\_\_\_\_ Playground Library

**Teacher:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Cafeteria Bathroom

**Grade:** K 1 2 3 4 5 6 7 8 Hallway Arrival/Dismissal

**Referring Staff:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Classroom Other \_\_\_\_\_\_\_\_

|  |  |  |
| --- | --- | --- |
| **Minor Problem Behavior** | **Major Problem Behavior** | **Perceived Motivation** |
| * Inappropriate language
* Physical contact
* Defiance
* Disruption
* Dress Code
* Property misuse
* Tardy
* Electronic Violation
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_
 | * Abusive language
* Fighting
* Physical aggression
* Defiance/Disrespect
* Harassment
* Bullying
* Dress Code
* Inappropriate Display Aff.
* Electronic Violation
* Lying/ Cheating
* Skipping class
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 | * Obtain peer attention
* Obtain adult attention
* Obtain items/activities
* Avoid Peer(s)
* Avoid Adult
* Avoid task or activity
* Don’t know
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |
| **Action Taken** |
| * Loss of privilege
* Time in office
* Conference with student
* Parent Contact
 | * Individualized instruction
* In-school suspension (\_\_\_\_hours/ days)
* Out of school suspension (\_\_\_\_\_ days)
* Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
 |

**Others involved in incident:** None Peers Staff Teacher Substitute

 Unknown Other

**Other comments:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 I need to talk to the student(s) teacher I need to talk to the administrator

**Parent Signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**All minors are filed with classroom teacher. Three minors equal a major. All majors require administrator consequence, parent contact, and signature.**

|  |
| --- |
| **SWIS**TM **OFFICE DISCIPLINE REFERRAL FORM** |
| **Student(s) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Referring Staff \_\_\_\_\_\_\_\_\_\_\_\_\_ Grade Level \_\_\_\_ Date \_\_\_\_\_\_ Time \_\_\_** |
| **Location**Classroom Playground****Commons/common areaHallway/ breezeway   East West North South | ****Cafeteria Bathroom/restroomGymLibrary | Bus loading zone****Parking lot****On busSpecial event/assembly/ field trip  | Other **\_\_\_\_\_\_\_\_\_\_** |
| **Problem Behaviors (check the most intrusive)** |
| **MINOR** Inappropriate lang.Physical contactDefiance/disrespect/ non-complianceDisruption Dress CodeTechnology violationProperty misuseTardyOther \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | **MAJOR**Abusive lang./ inappropriate language FightingPhysical aggression Defiance/disrespect/ insubordination/non-complianceHarassment/ tease/ taunt ability religious racial gender sexual  DisruptionInappropriate Display of  AffectionTechnology Violation | TardySkip classForgery/ theftDress code violationLying/cheatingTobaccoAlcohol/drugsCombustibles | Off School  LocationVandalism  Property damageBomb threatArson  Weapons Other **\_\_\_\_\_\_\_\_\_\_** |
| **Perceived Motivation**  Obtain peer attention Avoid tasks/activities Don’t knowObtain adult attention Avoid peer(s) Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Obtain items/ activities Avoid adult(s) |
| **Others Involved**None Peers Staff Teacher Substitute UnknownOther \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| **Action Taken**Time in office Detention  Saturday School  In-school suspension **Days** \_\_\_\_\_\_  Loss of privilege Parent contact  Individualized instruction Out-of-school suspension **Days** \_\_\_\_\_ Conference with student Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  |
| **Comments:** |

**EXAMPLE B:**

**EXAMPLE C:**

**Time Out of Classroom Form:**

**Name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Grade: \_\_\_\_\_ Date: \_\_\_\_\_**

**Referring Person: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_Time: \_\_\_\_\_\_\_\_**

**Others involved:**  no one peers teacher staff substitute

  unknown

**Issue of Concern Location** **Perceived Motivation**

**Major Problem Behaviors**

 Abusive lang  Playground Attention from peer(s)

 Fighting

Physical agg  Cafeteria  Attention from adult(s)

 Harassment  Hall  Avoid peer(s)

 Defiance/Disrespect  Bathroom  Avoid adult(s)

 Tardy  Entrance  Avoid work

 Dress code  Classroom  Obtain item(s)

 Electronic violation  Commons  Don’t know

Disruption  Other \_\_\_\_\_\_\_\_  Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_

Other \_\_\_\_\_\_\_\_\_\_\_\_\_

**What happened?**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Action Taken**

 time out/detention  loss of privilege\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 conference w/ student  in-school suspension **days \_\_\_\_\_\_**

 parent contact  out-of-school suspension **days \_\_\_\_\_\_\_**

 other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Follow up Agreement**

**Name**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **Date**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. **What rule(s) did you break**? (Circle)

**Be Safe Be Respectful Be Responsible**

2. **What will you do differently next time?**

**Student signature:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Adult signature(s)**: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**INSERT your Office Discipline Referral Form (ODR) here**

**(Insert School Name)’ Plan for Rolling-out to Staff**

**Date:**

**Time:**

**Location:**

**Materials Required** (check or list all that apply**):**

Agenda \_\_\_\_ Handouts \_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Technology Supports** LCD \_\_\_\_ TV/DVD/VIDEO \_\_\_\_\_ Screen \_\_\_\_\_\_ Easel \_\_\_\_\_\_ Chart Paper \_\_\_\_\_\_ Markers \_\_\_\_\_\_ Other \_\_\_\_\_\_\_

**Presenters:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ;

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Activities (attach work sheets, if needed) Amount of Time**

1. \_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_

4. \_\_\_\_\_\_\_\_\_\_\_\_

**Evaluation/ Feedback Method** (check all that apply)

**Survey \_\_\_\_\_ Process Activity \_\_\_\_\_ Interview \_\_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**\_\_\_\_\_\_\_\_\_\_

**(Insert School Name)’s Plan for Rolling-out to Students**

**Date:**

**Time:**

**Location:**

**Materials Required** (check or list all that apply**):**

Agenda \_\_\_\_ Handouts \_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Technology Supports** LCD \_\_\_\_ TV/DVD/VIDEO \_\_\_\_\_ Screen \_\_\_\_\_\_ Easel \_\_\_\_\_\_ Chart Paper \_\_\_\_\_\_ Markers \_\_\_\_\_\_ Other \_\_\_\_\_\_\_

**Presenters:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ;

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Activities (attach work sheets, if needed) Amount of Time**

1. \_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_

4. \_\_\_\_\_\_\_\_\_\_\_\_

**Evaluation/ Feedback Method** (check all that apply)

**Survey \_\_\_\_\_ Process Activity \_\_\_\_\_ Interview \_\_\_\_\_\_ Other \_**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**(Insert School Name)’s Plan for Rolling-out to Families and Community**

**Date:**

**Time:**

**Location:**

**Materials Required** (check or list all that apply**):**

Agenda \_\_\_\_ Handouts \_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Technology Supports** LCD \_\_\_\_ TV/DVD/VIDEO \_\_\_\_\_ Screen \_\_\_\_\_\_ Easel \_\_\_\_\_\_ Chart Paper \_\_\_\_\_\_ Markers \_\_\_\_\_\_ Other \_\_\_\_\_\_\_

**Presenters:** \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ;

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ ; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_; \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Activities (attach work sheets, if needed) Amount of Time**

1. \_\_\_\_\_\_\_\_\_\_\_\_

2. \_\_\_\_\_\_\_\_\_\_\_\_

3. \_\_\_\_\_\_\_\_\_\_\_\_

4. \_\_\_\_\_\_\_\_\_\_\_\_

**Evaluation/ Feedback Method** (check all that apply)

**Survey \_\_\_\_\_ Process Activity \_\_\_\_\_ Interview \_\_\_\_\_\_ Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**