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| **Targeted and/or Intensive Team Roster** | | |
| **School Name: Grades:**  **Town/City: Supervisory Union:**  **Team Norms:** | | |
| ***Implementation Team – Systems Level***  **Team Member Name Building Role Team Member Role** | | |
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| **Dates and Times of Monthly Meetings:** | | |
| ***Individual Student Level Team***  **Team Member Name Building Role Team Member Role** | | |
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| **Dates and Times of Weekly Meetings:** | | |

**Team Profile and Meeting Schedule – TARGETED/INTENSIVE**