

**IST Follow-Up Meeting Minutes Form**  
*Academic/Behavior Problems*

Student: \_\_\_\_\_ Grade/Room: \_\_\_\_\_

Meeting Date: \_\_\_\_\_ Start Time: \_\_\_\_\_ End Time: \_\_\_\_\_

Meeting Location: \_\_\_\_\_

Persons Attending:

Parent(s) \_\_\_\_\_

Classroom Teacher(s): \_\_\_\_\_

Facilitator: \_\_\_\_\_

Case Manager: \_\_\_\_\_

Recorder: \_\_\_\_\_

Data Specialist: \_\_\_\_\_

Additional Team Members: \_\_\_\_\_

\_\_\_\_\_

Support Staff Notified: \_\_\_\_\_

\_\_\_\_\_

## **Step 1: Evaluate the Student's Progress**

1A. Please check off *all* of the statements that best describe the student's progress:

EVALUATION STATEMENTS	Goal Attainment Score	Goal #		
		1	2	3
1. The student's target problem seems to be getting worse.	-2			
2. The student has made no progress, positive or negative.	-1			
3. The student is making some progress, but gains do not seem to be meaningful.	0			
4. The student is making progress and seems to be on target to reach his/her goal.	+1			
5. The student is making progress, seems to be on target to reach his/her goal, and seems to be catching up to the performance levels of typical, same-grade peers.	+2			

1B. Please consider the following *decision rules* prior to proceeding.

- **For scores of -2, -1, and/or 0**, Modify the Achievement/Behavior plan (Step 3).
- **For scores of 0**, check to see whether the student's goal needs to be adjusted prior to proceeding to Step 3. If the goal needs to be adjusted, Revise Goals & Objectives (Step 2).
- **For scores of +1 and +2**, maintain both the goal and the achievement/behavior support plan.

## **Step 2: Revise Goals & Objectives**

2A. Revise the originally established goals and/or objectives.

Revised Goal: \_\_\_\_\_  
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**Step 3: Modify the Achievement/Behavior Support Plan**

3A. Describe the modifications that will be placed within the student's achievement/behavioral support plan (in steps if possible):

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3B. Do any of the agreed upon modifications require changes to *where*, *when*, and *by whom* the intervention strategies will be implemented? If so, please provide details:

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3C. Are there any special instructional materials/resources, personnel, or training needed to implement the modifications? If so, please specify:

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3D. How acceptable is the support plan to the *classroom teacher*?

1	2	3	4	5
Low		Medium		High

Step 4: Regularly Monitor Student Progress

4A. Do any of the agreed upon modifications require changes to the student's progress monitoring plan? If so, please provide details:

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4B. When will the IST convene to evaluate the effectiveness of the achievement/behavior support plan?

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Step 5: Review

At the close of the meeting:

\_\_\_ The recorder reviews the main points of the follow-up meeting.

\_\_\_ The case manager plans a time for the following week to check in with the classroom teacher to see whether any questions or concerns have surfaced.