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| **Goal** |
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| **Indicators of Effectiveness** | | |
| Data Source  Include dates of implementation | Specific targets that will indicate the action plan is having a positive impact on student achievement or performance | Is the Indicator summative or formative? |
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| **Strategies** | |
| Name, describe and provide the rationale for each strategy selected to address the goal. (Min. of 1) | |
| **Strategy 1:** |  |
| **Strategy 2:** |  |
| **Strategy 3:** |  |

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| **Implementation Plan—Action Steps** | |
| Document the action steps that will be taken to implement the strategies in accomplishing the Goal: |

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| **Action Step 1:** | Description: | |  | | | | | | | |
| Implementation Start Date: | | |  | | Target Completion Date: | | |  | | |
| Person Responsible for Managing and Monitoring the Action Step | | | | |  | | | | | |
| Indicator of Implementation: Evidence that will indicate the Action Step has been implemented. | | | | |  | | | | | |
| Is this Action Step a *professional development* activity or initiative? (YES or NO)  If YES, you may complete the **optional** Professional Development Action Step Worksheet. | | | | | | | | | |  |
| **Optional Identification of Anticipated Costs** | | Year 1 | |  | Year 2 |  | Year 3 | |  | |

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| **Action Step 2:** | Description: | |  | | | | | | | |
| Implementation Start Date: | | |  | | Target Completion Date: | | |  | | |
| Person Responsible for Managing and Monitoring the Action Step | | | | |  | | | | | |
| Indicator of Implementation: Evidence that will indicate the Action Step has been implemented. | | | | |  | | | | | |
| Is this Action Step a *professional development* activity or initiative? (YES or NO)  If YES, you may complete the **optional** Professional Development Action Step Worksheet. | | | | | | | | | |  |
| **Optional Identification of Anticipated Costs** | | Year 1 | |  | Year 2 |  | Year 3 | |  | |

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| **Action Step 3:** | Description: | |  | | | | | | | |
| Implementation Start Date: | | |  | | Target Completion Date: | | |  | | |
| Person Responsible for Managing and Monitoring the Action Step | | | | |  | | | | | |
| Indicator of Implementation: Evidence that will indicate the Action Step has been implemented. | | | | |  | | | | | |
| Is this Action Step a *professional development* activity or initiative? (YES or NO)  If YES, you may complete the **optional** Professional Development Action Step Worksheet. | | | | | | | | | |  |
| **Optional Identification of Anticipated Costs** | | Year 1 | |  | Year 2 |  | Year 3 | |  | |

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| **Action Step 4:** | Description: | |  | | | | | | | |
| Implementation Start Date: | | |  | | Target Completion Date: | | |  | | |
| Person Responsible for Managing and Monitoring the Action Step | | | | |  | | | | | |
| Indicator of Implementation: Evidence that will indicate the Action Step has been implemented. | | | | |  | | | | | |
| Is this Action Step a *professional development* activity or initiative? (YES or NO)  If YES, you may complete the **optional** Professional Development Action Step Worksheet. | | | | | | | | | |  |
| **Optional Identification of Anticipated Costs** | | Year 1 | |  | Year 2 |  | Year 3 | |  | |

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| **Action Step 5:** | Description: | |  | | | | | | | |
| Implementation Start Date: | | |  | | Target Completion Date: | | |  | | |
| Person Responsible for Managing and Monitoring the Action Step | | | | |  | | | | | |
| Indicator of Implementation: Evidence that will indicate the Action Step has been implemented. | | | | |  | | | | | |
| Is this Action Step a *professional development* activity or initiative? (YES or NO)  If YES, you may complete the **optional** Professional Development Action Step Worksheet. | | | | | | | | | |  |
| **Optional Identification of Anticipated Costs** | | Year 1 | |  | Year 2 |  | Year 3 | |  | |

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| **Action Step 6:** | Description: | |  | | | | | | | |
| Implementation Start Date: | | |  | | Target Completion Date: | | |  | | |
| Person Responsible for Managing and Monitoring the Action Step | | | | |  | | | | | |
| Indicator of Implementation: Evidence that will indicate the Action Step has been implemented. | | | | |  | | | | | |
| Is this Action Step a *professional development* activity or initiative? (YES or NO)  If YES, you may complete the **optional** Professional Development Action Step Worksheet. | | | | | | | | | |  |
| **Optional Identification of Anticipated Costs** | | Year 1 | |  | Year 2 |  | Year 3 | |  | |

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| **Action Step 7:** | Description: | |  | | | | | | | |
| Implementation Start Date: | | |  | | Target Completion Date: | | |  | | |
| Person Responsible for Managing and Monitoring the Action Step | | | | |  | | | | | |
| Indicator of Implementation: Evidence that will indicate the Action Step has been implemented. | | | | |  | | | | | |
| Is this Action Step a *professional development* activity or initiative? (YES or NO)  If YES, you may complete the **optional** Professional Development Action Step Worksheet. | | | | | | | | | |  |
| **Optional Identification of Anticipated Costs** | | Year 1 | |  | Year 2 |  | Year 3 | |  | |

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| **Action Step 8:** | Description: | |  | | | | | | | |
| Implementation Start Date: | | |  | | Target Completion Date: | | |  | | |
| Person Responsible for Managing and Monitoring the Action Step | | | | |  | | | | | |
| Indicator of Implementation: Evidence that will indicate the Action Step has been implemented. | | | | |  | | | | | |
| Is this Action Step a *professional development* activity or initiative? (YES or NO)  If YES, you may complete the **optional** Professional Development Action Step Worksheet. | | | | | | | | | |  |
| **Optional Identification of Anticipated Costs** | | Year 1 | |  | Year 2 |  | Year 3 | |  | |

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| **Action Step 9:** | Description: | |  | | | | | | | |
| Implementation Start Date: | | |  | | Target Completion Date: | | |  | | |
| Person Responsible for Managing and Monitoring the Action Step | | | | |  | | | | | |
| Indicator of Implementation: Evidence that will indicate the Action Step has been implemented. | | | | |  | | | | | |
| Is this Action Step a *professional development* activity or initiative? (YES or NO)  If YES, you may complete the **optional** Professional Development Action Step Worksheet. | | | | | | | | | |  |
| **Optional Identification of Anticipated Costs** | | Year 1 | |  | Year 2 |  | Year 3 | |  | |

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| **Action Step 10:** | Description: | |  | | | | | | | |
| Implementation Start Date: | | |  | | Target Completion Date: | | |  | | |
| Person Responsible for Managing and Monitoring the Action Step | | | | |  | | | | | |
| Indicator of Implementation: Evidence that will indicate the Action Step has been implemented. | | | | |  | | | | | |
| Is this Action Step a *professional development* activity or initiative? (YES or NO)  If YES, you may complete the **optional** Professional Development Action Step Worksheet. | | | | | | | | | |  |
| **Optional Identification of Anticipated Costs** | | Year 1 | |  | Year 2 |  | Year 3 | |  | |