

Accelerated Learning Committee
[State of Texas Assessments of Academic Readiness (STAAR) or State of Texas Assessments of Academic Readiness A (STAAR Alt 2)]
End-of-Course Assessment

Student: _____ Date of Notice: _____
 Parent/Guardian: _____ Date of Meeting: _____
 Address: _____ Location: _____
 Phone: _____

Membership

	Member	Name
<input type="checkbox"/>	*Principal (or designee)	
<input type="checkbox"/>	*Teacher of (subject)	
<input type="checkbox"/>	Teacher of (subject)	
<input type="checkbox"/>	*Parent/Guardian	
<input type="checkbox"/>	Parent/Guardian	
<input type="checkbox"/>	LPAC/504 Representative (if applicable)	
<input type="checkbox"/>	Other	
<input type="checkbox"/>	Other	

*Required

I. Agenda

- Introduction
- Purpose of Meeting (HB 4545 Requirements)
- Review of Assessment Data
- Teacher Feedback and/or Questions
- Parent Feedback and/or Questions
- Develop Plan: How/When AI will occur, Roles of School, Student, and Parent
- Final Questions and Close

[STAAR/STAAR Alt 2]	Score Code (scored, absent, other)	Performed Satisfactorily (Approaches or higher)	
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	
		<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA	

II. Acceleration Learning Plan Below (or see the attached documentation.)

Notes (e.g. Frequency, Location of instruction, Staff member(s) responsible, Time of instruction before, after, during school)

IV. Signatures

Member	Signatures		
*Principal		<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
*Teacher of		<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
Teacher of		<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
*Parent/Guardian (circle one)		<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
Parent/Guardian (circle one)		<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
LPAC Representative (if applicable)		<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
Other		<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree
Other		<input type="checkbox"/> Agree	<input type="checkbox"/> Disagree

*Required