**Part One: Summary of Current Status**

**Part One Directions:** Use this section to summarize the status of your progress on your SIP/SIG SMART Goals or approved ESEA Flex Interventions. After completing **Part Two** and reflecting on your progress for each Goal or Flex Intervention, rate your school red, orange, yellow, or green. If you have fewer than 4 approved Interventions or Goals, delete unused rows.

***Red*** *=No progress/major challenges, requires urgent attention. For Infrastructure, barriers at the district or state level impede major elements of implementation and there are no current plans to address them.*

***Orange****=Not progressing as we would expect at this point in time, requires attention and adjustment. For Infrastructure, barriers at the district or state level impede some elements of implementation and solutions are not yet identified.*

*Yellow= Progressing, may need minor tweaks. For Infrastructure, some barriers exist at the district or state level and solutions have been identified.*

***Green****= On track, having the impact we hoped, a highlight. For Infrastructure, no barriers at the district or state level impede implementation, or the district and/or RIDE are actively working to address them on a short timeline.*

|  |  |  |  |
| --- | --- | --- | --- |
| **SIP/SIG Goals (with ESEA Flex Interventions if applicable)** | **Self-Assessment (R/O/Y/G)**  Color each box (red, orange, yellow, or green) to assess implementation quality/status. | | |
| **Educator/Parent Practice** | **Student Outcomes** | **Infrastructure** |
| 1. [Goal]  * [Supporting intervention] |  |  |  |
| 1. [Goal]  * [Supporting intervention] |  |  |  |
| 1. [Goal]  * [Supporting intervention] |  |  |  |
| 1. [Goal]  * [Supporting intervention] |  |  |  |

**Part Two: Assess Current Status**

**Part Two Directions:** Use the most recent report you submitted as the basis of the following section. For each goal, complete the template below. Review the data you have collected and analyzed. Update the Learnings section, make revisions to the Data Plan as needed, and attach relevant data. Ensure that if you have approved ESEA waiver Interventions you include data and analysis related to their implementation and how they support your goals.

|  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- |
| **SIP/SIG Goal THIS MUST REMAIN THE SAME FROM QUARTER TO QUARTER.** | | | | | | |
|  | | | | | | |
| **Supporting ESEA Waiver Intervention or Interventions (if applicable) THIS MUST REMAIN THE SAME FROM QUARTER TO QUARTER** | | | | | | |
|  | | | | | | |
| **Learnings from the most recent quarter (2-3 bullet points) UPDATE EACH QUARTER. ATTACH RELEVANT DATA.**  *Include successes, internal challenges (not external barriers) and any key data points and plans to adjust strategies or prioritize different strategies. (see pages 4-8 and 15-17 in report guidance for strong examples)* | | | | | | |
|  | | | | | | |
| **Data Plan ATTACH DATA FROM THE MOST RECENT QUARTER RELATED TO THE PLAN BELOW. MAKE REVISIONS TO THIS PLAN AS NEEDED.** *Data should be aggregated to show trends and intersection between educator/parent practice and student outcomes. (see guidance p 3-8, 18-19 for examples)* | | | | | | |
|  | **What is your strategy for achieving your SMART goal and closing the achievement gap?** | **What are your adult behavior targets?** | **With what tool and how frequently will you monitor adult behavior?** | **What are your student outcome targets?** | **With what tool and how frequently will you monitor student outcomes?** | **If applicable, what is the Title I budget line item supporting the strategy?** |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |