**District Name**

**“Modified” Plan for Districts Identified for Significant Disproportionality in Identification – Due June 30th**

**Contacts:**

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| District Level Contact (Special Education Director) |

| Name | Phone Number | Email |
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| Intermediate School District Contact |

| Name | Phone Number | Email |
| --- | --- | --- |
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**Data Person(s)**

|  |  |  |
| --- | --- | --- |
| Name | Phone Number | Email |
|  |  |  |
|  |  |  |

**Initial Meetings to Discuss Process**

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| --- | --- | --- | --- |
| Person(s) Responsible | Date and Time | Individual or Group | Topics Discussed |
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**Schedule of Monthly Meetings**

|  |  |  |  |
| --- | --- | --- | --- |
| Month | Date | Time | Location |
| September 2018 |  |  |  |
| October 2018 |  |  |  |
| November 2018 |  |  |  |
| January 2019 |  |  |  |
| February 2019 |  |  |  |
| March 2019 |  |  |  |
| April 2019 |  |  |  |
| May 2019 |  |  |  |
| June 2019 |  |  |  |

Describe your plan for providing data on all students in the district, necessary for completing the root cause analysis and reflection.

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Describe your plan to provide data for monthly meetings.

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**Team Members**

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| --- | --- | --- | --- | --- |
| Name | Title | Role | Responsibilities | Contact Info |
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Describe your process for selecting participants to serve on the   
Team for Significant Disproportionality - Identification.

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Describe your process of accountability and engagement for team members.

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**Informing Stakeholders**

Describe your plan for disseminating information to staff, students and parents, following monthly meetings.

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**Addressing Disproportionality 2017-2018**

Describe any trainings, Professional Developments, book studies, district initiatives, etc. that the district has participated in during the 2017-2018 school year that addressed disproportionality. Include date(s) and presenter(s).

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