

Plan III
ASSISTANCE PHASE – PLAN OF ASSISTANCE PROGRESS FORM
(Form to be completed by the administrator)

Teacher _____ Date _____

Meeting Dates _____

Review of Plan (Methods and Strategies used to date):

Indicators of Progress:

Resources/Support Utilized to Date:

Comments:

- Concern is resolved - return to Plan II
- Concern is partially resolved – continue on Assistance Phase
- Move to Disciplinary Phase

Next Meeting Date:

Teacher(s) Signature _____ Date _____

Administrator Signature _____ Date _____

cc: Human Resources and BCEA

Form 3E