

# PROMOTION AND RETENTION OF STUDENTS

## ELEMENTARY AND MIDDLE SCHOOLS FLOW CHART

School \_\_\_\_\_  
Grade Level \_\_\_\_\_  
Date of enrollment (current year) \_\_\_\_\_  
Ethnic Code \_\_\_\_\_  
Student's primary language \_\_\_\_\_  
Parent's primary language \_\_\_\_\_

Student's name \_\_\_\_\_ Birth date \_\_\_\_\_

Teacher \* \_\_\_\_\_

Previous Retention \_\_\_\_\_

***If the process ~~should~~ **is** discontinued for any reason, please note the reason for discontinuance and date, and retain within the student's cumulative folder. All communication with the parent/guardian(s) must be in the parent's primary language and must be documented below.***

***Date discontinued:*** \_\_\_\_\_ ***(if applicable)***

***Reason*** \_\_\_\_\_

### TASKS

\_\_\_\_\_  
\_\_\_\_\_  
(date) Student manifests potential educational problems that may require retention; the teacher uses appropriate activities in Tier I of the Pyramid of Interventions

List classroom interventions or modifications implemented and dates: \_\_\_\_\_

\_\_\_\_\_  
(date) By the end of first quarter, teacher holds formal conference with parents to discuss student progress or concerns:

_____ Name (print)	_____ Signature	_____ Title
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_____ Name (print)	_____ Signature	_____ Title
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_____ Name (print)	_____ Signature	_____ Title
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_____ Name (print)	_____ Signature	_____ Title
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\_\_\_\_ Student is placed in Tier II of Pyramid of Interventions, if appropriate  
(date)

\_\_\_\_ Teacher writes an Individual Success Plan (ISP) for the student  
(date)

List Intervention(s) provided and date(s) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_ Teacher determines if student previously retained: (reasons, grades, dates)  
(date)

\_\_\_\_ Teacher determines if student previously considered for retention if documentation is  
(date) available: (reasons, grades, dates)

\_\_\_\_ By the end of 2<sup>nd</sup> quarter, ~~T~~ teacher refers student to failure prevention team (FPT)  
(date) ~~The FPT will provide assistance to teacher(s) through modified instructional materials or techniques; individual or group counseling; student behavioral management; parental involvement; and/or program modification. The FPT must include the SEI teacher for an LEP student, the REACH teacher for a gifted student; or the student's advocate and the school psychologist for a student with disabilities. A retention history will be formulated, if applicable. and the Individual Success Plan (ISP) is reviewed and modified as needed by the team. Consider placing student in Tier III of Pyramid of Interventions Goals will be set for the remainder of the school year.~~

\_\_\_\_ FPT Meeting date. Attendees sign below.

_____ Name (print)	_____ Signature	_____ Title
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_____ Name (print)	_____ Signature	_____ Title
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_____ Name (print)	_____ Signature	_____ Title
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_____ Name (print)	_____ Signature	_____ Title
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Failure Prevention Team membership  
Required members:

Teachers/Specialists  
Parents  
Administrator  
SEI teacher (if LEP student)

Other Representatives:

REACH teacher (if gifted student)  
If student is or could be considered disabled:  
Speech/Language Pathologist  
Special Education teacher  
School Psychologist  
504 coordinator

Failure Prevention Team  
Possible members

Audiologist  
~~General Education~~  
Nurse/Health  
Counselor  
Advocate  
Agency Representative  
LEA Representative  
Other \_\_\_\_\_

\_\_\_\_\_  
(date) ~~By February 1 Send progress report to principal; if warranted, include teacher/support staff input—~~Teacher meets with the principal to review assessment data and interventions, and to discuss student progress (Principal may utilize the Amphitheater Retention Questionnaire with the teacher during this discussion); they work on the formal written notification to parents.

\_\_\_\_\_  
(date) ~~Within one week following meeting with the principal Review assessment data, interventions and student progress.~~ Deadline to send formal progress report written notification to parent indicating possible potential educational problems that may require retention. Prior to reporting to parent, regular classroom teacher must collaborate:

- ~~with special education teacher, if special education student~~
- ~~with SEI/REACH teacher, if LEP student~~
- ~~with school psychologist, if applicable~~

\_\_\_\_\_  
~~March 15~~ Send permission form to parent for ~~only those students who require additional educational data collection from psychologist, LD teacher, SEI teacher and/or the lower quartile teacher.~~

\_\_\_\_\_  
(date) ~~March 31~~ By the end of 3<sup>rd</sup> quarter ~~Deadline for~~ Teacher holds another formal parent conference to communicate specific reasons for ~~student's lack of progress potential~~ possible retention and to review the Individual Success Plan (ISP) in place including data gathered through interventions. Conference should include teacher(s), ~~principal administrator~~; special education student advocate and school psychologist (if special education student); SEI teacher (if LEP student); REACH teacher (if gifted student); and other personnel as necessary. *Goals included in the Individual Success Plan (ISP) and any additional interventions will be set and/or modified for remainder of school year.*

\_\_\_\_\_  
(date) ~~By May 1 (First week—optional)~~ Re-administer appropriate assessments for state standards academic proficiency

\_\_\_\_\_  
(date) ~~May~~ (On/before last day of school) (Prior to the last five days of school) Parent ~~&~~ conference to report/discuss decision to promote/retain student. Conference should include teacher(s), ~~principal administrator~~; special education student advocate

and school psychologist (if special education student); SEI teacher (if LEP student); REACH teacher (if gifted student); and other personnel as necessary. Report shall include:

- All recommendations
- Retention rationale, **if applicable**
- Individual Success Plan (ISP) for **retained** student

\_\_\_\_\_  
(date) **Within 10 days after the last day of school** Send copy of Promotion/Retention Flow Chart and documentation (i.e. report cards, intervention services, Individual Success Plan and reasons it was not successful) to the **appropriate** Associate Superintendent along with the signed Retention Report and, if applicable, the parental appeal of the teacher's retention decision..

\_\_\_\_\_  
(date) Retain copy of Promotion/Retention Flow Chart, **documentation, and Retention Report** (if applicable) in student cumulative folder

~~\_\_\_\_\_  
\_\_\_\_\_  
If appropriate, Principal will forward parental appeal of a teacher's promotion/retention decision to Superintendent~~

Dated: \_\_\_\_\_

\_\_\_\_\_  
Principal

\* For purposes of this form, "teacher" in a middle school or departmentalized elementary setting may be the homeroom teacher, advocate, PLC member, grade level representative, special designee assigned to monitor a particular student's progress, etc. However, all the students' core teachers should be involved in discussing and developing the Individual Success Plan, monitoring of interventions, serving on the Failure Prevention Team, and participating in parent conferences.

All final retention information will be entered into the Student Information System by Central Office.