| Responses to these questions have been from the Contact- | Education Service Center (ESC) Number: | District Number: | District Name:   |           |                      |  |  |  |  |
|--|--|------------------|------------------|-----------|----------------------|--|--|--|--|
| Intervention Information Tab                             | Region 18                              | 068901           | Ector County ISD | 068901042 | Bonham Middle School |  |  |  |  |

## **Needs Assessment Summary and Improvement Plan**

After your data analysis yields a summary of findings that results in a set of problem statements, the next step is to engage in the needs assessment process to identify root causes. The 5 steps of the root causes assessment include:

Definition / Step 1: Clarify and prioritize problem statements
Step 2: Establish the purpose of assessing root causes and establish the team
Step 3: Gather data
Step 4: Review data analysis
Step 5: Root cause analysis

The needs assessment process is intended to safeguard against planning or implementing strategies before the root cause of a problem is understood.

|  |       | Low performance of African American students in all tested areas: Social Studies, Science, Writing - 18%, Math- 20%, Reading- 30%.            | is occurring because of Root<br>Cause #1 | Root<br>Cause 1: | Lack of engaging, effective instructional strategies |
|--|-------|---|--|------------------|--|
|  |       | Low performance of economically disadvantaged in all tested areas: Reading- 36%, Writing- 40%, Science- 49%, Math - 38%, Social Studies- 16%. | is occurring because of Root<br>Cause #2 | Root<br>Cause 2: | Lack of engaging, effective instructional strategies |
| Problem Statements                               | PS 3: |   | is occurring because of Root<br>Cause #3 | Root<br>Cause 3: | <enter text=""></enter>                              |
| (PS):  | PS 4: |   | is occurring because of Root<br>Cause #4 | Root<br>Cause 4: | <enter text=""></enter>                              |
| Problem statements are carried over from         | PS 5: |   | is occurring because of Root<br>Cause #5 | Root<br>Cause 5: | <enter text=""></enter>                              |
| Section VI of the<br>Campus Data<br>Analysis tab | PS 6: |   | is occurring because of Root<br>Cause #6 | Root<br>Cause 6: | <enter text=""></enter>                              |
| OR Section VI of the District Data Analysis      | PS 7: |   | is occurring because of Root<br>Cause #7 | Root<br>Cause 7: | <enter text=""></enter>                              |
| Summary tab.                                     | PS 8: |   | is occurring because of Root<br>Cause #8 | Root<br>Cause 8: | <enter text=""></enter>                              |

| Responses to these questions have been from the Contact-   | Education S   | Service Center (ESC) Number:   | District  | Number:                      | E                                 | istrict Name:                     |   | C  | ampus Number:  | (               | Campus Name:                 |  |  |
|--|---|--|---|------------------------------|-----------------------------------|-----------------------------------|---|--|--|-----------------|------------------------------|--|--|
| Intervention Information Tab                               |   | Region 18  | 068   | 88901                        | Ec                                | tor County ISD                    |   |  | 068901042  | Bor             | nham Middle School           |  |  |
|  |   |  |   | Needs Assess                 | ment Summ                         | ary and Im                        | prover  | nent Pla   | an   |                 |                              |  |  |
|  | PS 9:   |  |   |                              | is occurr                         | ng because of Root<br>Cause #9    | Root<br>Cause 9:  | <enter text=""></enter>  |  |                 |                              |  |  |
|  | PS 10:  |  |   |                              |                                   | ng because of Root<br>Cause #10   | Root<br>Cause 10:   | <enter text=""></enter>  |  |                 |                              |  |  |
|  | e your root ca  | uses so that your improvement<br>te accountability, PBM, or R                | F system.   | d focused. Although a Ti     |                                   |                                   |   |  |  |                 | rovement plan is intend      | ded to address the specific  |  |
| Attestation  | statement:  | By checking the box, I   |   |                              |                                   |                                   |   |  |  |                 |                              | red appropriate. In addition, these  |  |
| Proble   | m Statement 1:  | Low performance of African Am 20%, Reading- 30%.                             | erican students in all tester   | ed areas: Social Studies, Sc | ence, Writing - 18%, Ma           | th-                               | Annual Goal: The expectation for African American students is 50% in all tested content areas on the 2017 STAAR test. |  |  |                 |                              |  |  |
|  | Root Cause 1:   | Lack of engaging, effective instr  | uctional strategies   |                              |                                   |                                   | Strategy  | other during   |  | ate a system    | of student progress monito   | nent and opportunities to support each<br>ring and TEK focused intervention  |  |
|  | Index Number:   | □ Not Applicable   | ☑ Index 1:  | : Student Achievement        | ☑ Index                           | 2: Student Progres                | ss 🗵  | Index 3:   | Closing Achievement                                    | Gaps            | □ Index 4:                   | Postsecondary Readiness  |  |
| Critical Success Factor ESEA Turnaround Print Major System | ciples (TPs)  | CSF 2-Quality II CSF 3-Leadersi CSF 4-Increase CSF 5-Family/C CSF 6-School C | Data to Drive Instruction/E<br>hip Effectiveness/ESEA T<br>ad Learning Time/ESEA TI |                              | form Instruction<br>ship<br>endar | impact the                        | dressing thi<br>e index/indic   |  | By increasing highly enga<br>all tested content areas. | ging, effective | instructional strategies, st | udents will increase their performance in  |  |
|  |   |  |   |                              |                                   | Interventions                     | by Quarte   | er   |  |                 |                              |  |  |
| Districts and 1st Ye                                       | Q1 (Aug, Sept, Oct) Districts and 1st Year IR campuses are required to provide, at a minimum, the interventions accomplished for quarter 1 (Q1).              |  |   |                              |                                   |                                   |   | Q3 (Feb  | o, Mar)  |                 | Q4                           | (April, May, June)   |  |
|  | Q1 Goal: By the end of Qtr 1, 100% of all teachers will incorporate writing tasks; minimum 2 per week.  Q2 Goal: By the end of Qtr 2, 100% of all their data. |  |   |                              | of all students will mon          | tor Q3 G                          | Goal:   |  | Qtr 3, specific TEKS-rela<br>d to all students.        | ted tutorials   | Q4 Goal:                     | By the end of Qtr 4, 100% of teachers will engage students by continuing to deliver highly effective instructional strategies. |  |
|  | Q1 Intervention   | 11 Interventions Q2 Interventions  |   |                              |                                   | Q3 Interventions Q4 Interventions |   |  |  | 4 Interventions |                              |  |  |
| 1)   | Meeting weekly common writing   | during PLC/iTeam to plan tasks.  | 1)  | ) Student learning report    |                                   |                                   | 1   | 1) Interventionists will form student groups based on data. 1) Lead4Ward |  |                 |                              | Lead4Ward  |  |

| Responses to these questions have been from the Contact- | Education Service Center (ESC) Number:        | District N  | lumber:                     | District No | ame:              | Campus Number:  |                       | Campus Name:         |                                       |  |  |  |
|--|---|---|-----------------------------|-------------|-------------------|---|-----------------------|----------------------|---------------------------------------|--|--|--|
| Intervention Information Tab                             | Region 18                                     | 068901  |                             | Ector Coun  | ty ISD            | 068901042   | Bor                   | nham Middle School   |                                       |  |  |  |
|  | Needs Assessment Summary and Improvement Plan |   |                             |             |                   |   |                       |                      |                                       |  |  |  |
| 2)   | Walk-throughs                                 | 2)  | 2) Student learning folders |             |                   | Interventionists will provide TEKS spec<br>based on academic needs for tutorial u | ific materials<br>se. | 2)                   | Cooperative Learning                  |  |  |  |
| 3)   | C.S.S- Region 18 Consultants                  | 3)  | Walk-throughs               |             | 3)                | Walk-throughs   |                       | 3)                   | Sheltered Instruction/AVID strategies |  |  |  |
| 4)   | 4)  |   | 4)                          |             | 4)                | 4)  |                       | 4)                   | Walk-throughs                         |  |  |  |
| What data will be co                                     | ollected to monitor interventions in Q1?      | What data will be collected to monitor interventions in Q2? |                             |             | What data will be | collected to monitor interventions in   | Q3?                   | What data was collec | eted to monitor interventions in Q4?  |  |  |  |

| Responses to these questions  | Education Service Center (ESC) Number:   | District :  | Number:  | District N        | lame:   | Campus Numb  | er:            | Campus Name:  |                         |
|---|--|---|--|-------------------|---|--|----------------|---|-------------------------|
| have been from the Contact-<br>Intervention Information Tab   | Region 18  | 068   | 3901   | Ector Cour        | nty ISD   | 068901042  | Во             | nham Middle School  | ]                       |
|   |  |   | Needs Assess   | sment Summary     | and Improver  | nent Plan  |                |   |                         |
| 1)  | Lesson plans   | 1)  | Eduphoria  |                   | 1)  | Eduphoria  |                | 1)  | HEAT Walkthrough form   |
| 2)  | PLC/ I-teams agendas   | 2)  | STAAR/ TELPAS results  |                   | 2)  | Stride/Think Through Ma  | th/Istation    | 2)  | Lesson plans            |
| 3)  | Walk-throughs  | 3)  | Stride/Think Through Mat   | h/Istation        | 3)  | 3) TEKS Resource System  |                | 3)  | STAAR results           |
| 4)  |  | 4)  | Unit/ Major assessments  |                   | 4)  | Unit/Major Assessments   |                | 4)  | TEKS Resource System    |
|   |  |   |  | End of Quarter Ro | eporting  |  |                |   |                         |
| Districts and 1st Year  | Q1 Report IR campuses are not required to complete the quarter 1 (Q1) report.                            | Q2 Report   |  |                   |   | Q3 Report  |                |   | Q4 Report               |
| Did you meet this quarter's goal?   | Select   | Did you meet this quarter's goal?   | Select   |                   | Did you meet this quarter's goal?   | Select   |                | Did you meet this quarter's goal?   | Select                  |
| Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>  | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>  |                   | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>  |                | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter> |
| Are you on track to meet the annual goal?   | Select   | Are you on track to meet the annual goal?   | Select   |                   | Are you on track to meet the annual goal?   | Select   |                | Did you meet your<br>annual goal?   | Select                  |
| What, if any, adjustments must be made in order to meet the annual goal?                                      |  | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?                             | <enter additional="" any="" info<="" th=""><th>rmation here&gt;</th><th>What, if any,<br/>adjustments must be<br/>made in order to meet<br/>the annual goal?</th><th><enter additional="" any="" info<="" th=""><th>ormation here&gt;</th><th><enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter></th></enter></th></enter> | rmation here>     | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?                             | <enter additional="" any="" info<="" th=""><th>ormation here&gt;</th><th><enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter></th></enter> | ormation here> | <enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter>                                  | rmation here>           |
|   |  |   |  | End of Year Rep   | oorting   |  |                |   |                         |
| Provide the data that supports your 4th quarter status of this annual goal.                                   | <enter text=""></enter>  | what do you attribute yo<br>success?  If you did not meet your  | meet your annual goal, to ou attribute your  Appropriate Strategy  I not meet your annual what do you attribute your   |                   |   | □ Other  |                | <enter text=""></enter>   |                         |
|   | how the identified elements and their impact<br>of success, will inform/influence your planning<br>year. | net   |  |                   |   |  |                |   |                         |

| Responses to these questions                                | Education -   | Service Center (ESC) Number:                                     | District            | Number:                         | District N                       | ame:              | C   | ampus Number:  | Campus Name:         |  |  |
|---|---|--|---------------------|---------------------------------|----------------------------------|-------------------|---|--|----------------------|--|--|
| have been from the Contact-<br>Intervention Information Tab |   | Region 18  | 068                 | 8901                            | Ector Cour                       | aty ISD           |   | 068901042  | Bonham Middle School | 7  |  |
|   |   |  |                     | Needs Assess                    | sment Summary                    | and Improve       | ment PI   | an   |                      | _  |  |
| Proble  | em Statement 2:   | Low performance of economical<br>Math - 38%, Social Studies- 169 |                     | ted areas: Reading- 36%, \      | Writing- 40%, Science- 49%,      | Annual Goal:      |   | tion for Economically Disadvan<br>50%, Reading - 60% and Writi |                      | AR test is as follows; SS - 50%, Science -   |  |
|   | Root Cause 2:   | Lack of engaging, effective instr                                | uctional strategies |                                 |                                  | Strategy:         | Strategy:  Providing teachers with well designed, researched-based professional development and opportunities to support earther during collaborative planning; create a system of student progress monitoring and TEK focused intervention supporting the implementation of high yield instructional strategies. |  |                      |  |  |
|   | Index Number:   | □ Not Applicable   | ☑ Index 1:          | : Student Achievement           | ☑ Index 2: Stu                   | dent Progress     | Index 3:  | Closing Achievement Gap  | s 🗆 Index            | 4: Postsecondary Readiness   |  |
| ESEA Turnaround Prin  | CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction  Critical Success Factors (CSFs)  CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction  CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership  CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar  CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagem  CSF 6-School Climate/ESEA TP: Improve School Environment  CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers |  |                     |                                 |                                  |                   |   | By increasing highly engaging performance in all tested cont   |                      | s, students will be expected to increase their   |  |
|   |   |  |                     |                                 | Inter                            | ventions by Quart | er  |  |                      |  |  |
| Districts and 1st Y   |   | Oct) are required to provide, plished for quarter 1 (Q1).        |                     | Q2 (Nov, Dec, Jan)              |                                  |                   | Q3 (Fe  | b, Mar)  |                      | Q4 (April, May, June)  |  |
| Q1 Goal:  | By the end of Quincorporate writi   | tr 1, 100% of all teachers will<br>ng tasks; minimum 2 per week. | Q2 Goal:            | By the end of Qtr 2, 100% data. | 6 of students will monitor their | Q3 Goal:          |   | f Qtr 3, specific TEKS-related t<br>d to all students.         | utorials Q4 Goal:    | By the end of Qtr 4, 100% of teachers will engage students by continuing to deliver highly effective instructional strategies. |  |
|   | Q1 Intervention   | ons  |                     | Q2 Interventions                |                                  |                   | Q3 Inter  | ventions   |                      | Q4 Interventions   |  |
| 1)  | 1) Meeting weekly during PLC/iTeam to plan common writing tasks.  1) Student learning report  |  |                     |                                 |                                  |                   | ) Interventioni<br>data.  | sts will form student groups bas                               | sed on               | 1) Lead4Ward   |  |
| 2)  | 2) Walk-throughs 2) student learning folders  |  |                     |                                 |                                  | 2                 |   | sts will provide TEKS specific rademic needs for tutorial use. | naterials            | 2) Cooperative Learning  |  |
| 3)  | 3) C.S.S- Region 18 Consultants 3) Walk-throughs  |  |                     |                                 |                                  | 3                 | Walk-throug   | hs   |                      | 3) Sheltered Instruction/AVID strategies   |  |
| 4)  | 4)  |  |                     |                                 |                                  |                   | (·)   |  |                      | 4) TEKS Resource System  |  |

| Responses to these questions  | Education Service Center (ESC) Number:   | District I  | Number:  | District Na                     | ame:  | Campus Numb  | er:  | Campus Name:  | I                                    |
|---|--|---|--|---------------------------------|---|--|--|---|--------------------------------------|
| have been from the Contact-<br>Intervention Information Tab   | Region 18  | 068   | 3901   | Ector Coun                      | ty ISD  | 068901042  | Во   | nham Middle School  | ]                                    |
|   |  | I   | Needs A  | Assessment Summary              | and Improver  | nent Plan  |  |   | -                                    |
| What data will be o   | ollected to monitor interventions in Q1?   | What data will  | be collected   | to monitor interventions in Q2? | What data will be   | e collected to monitor int   | erventions in Q3?  | What data was collect   | cted to monitor interventions in Q4? |
| 1)  | Lesson plans   | 1)  | Eduphoria  |                                 | 1)  | Eduphoria performance o  | lata   | 1)  | HEAT Walk-through form               |
| 2)  | PLC/ I-teams   | 2)  | STAAR/ TEL   | PAS results                     | 2) Stride/Think Through Math/Istation   |  |  | 2)  | Lesson plans                         |
| 3)  | Walk-throughs  | 3)  | Stride/Think   | Through Math /Istation          | 3)  | TEKS Resource System   |  | 3)  | STAAR results                        |
| 4)  |  | 4)  | Unit/ Major as   | ssessments                      | 4)  | 4) Unit/Major Assessments  |  |   | TEKS Resource System                 |
|   |  |   |  | End of Quarter Re               | eporting  |  |  |   |                                      |
| Districts and 1st Year  | Q1 Report R campuses are not required to complete the quarter 1 (Q1) report.                       |   | Q2   | Report                          |   | Q3 Report  |  |   | Q4 Report                            |
| Did you meet this quarter's goal?   | Select   |   | Did you meet this quarter's goal?  | Select                          |   | Did you meet this quarter's goal?  | Select   |   |                                      |
| Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>  | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>  |                                 | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>  |  | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>              |
| Are you on track to meet the annual goal?   | Select   | Are you on track to meet the annual goal?   | Select   |                                 | Are you on track to meet the annual goal?   | Select   |  | Did you meet your<br>annual goal?   | Select                               |
| What, if any, adjustments must be made in order to meet the annual goal?                                      | <enter additional="" any="" here="" information=""></enter>  | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?                             | <enter ad<="" any="" th=""><th>dditional information here&gt;</th><th>What, if any,<br/>adjustments must be<br/>made in order to meet<br/>the annual goal?</th><th><enter additional="" any="" info<="" th=""><th>ormation here&gt;</th><th><enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter></th></enter></th></enter> | dditional information here>     | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?                             | <enter additional="" any="" info<="" th=""><th>ormation here&gt;</th><th><enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter></th></enter> | ormation here>   | <enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter>                                  | rmation here>                        |
|   |  |   |  | End of Year Rep                 | orting  |  |  |   |                                      |
| Provide the data that<br>supports your 4th<br>quarter status of this<br>annual goal.                          | <enter text=""></enter>  | what do you attribute yo<br>success?<br>If you <u>did not</u> meet your                                       | Data Analysis Process  Data Quality  Data Quality  Appropriate Strategy  I not meet your annual what do you attribute your   |                                 | □ (Specific) Interventions □ Annual Goals □ CSF/ESEA Turnaround □ Training □ Other                            |  | Please provide<br>additional information<br>for the selection of<br>Other or for any<br>selected elements. | <enter text=""></enter>   |                                      |
|   | how the identified elements and their impact of success, will inform/influence your planning year. | <enter text=""></enter>   |  |                                 |   |  | _  |   |                                      |

| Responses to these questions have been from the Contact- | Education S                           | Service Center (ESC) Number:  | District N  | lumber:                  | District N           | lame:                     | (                       | Campus Number:           |      | Campus Name:          |                                     |
|--|---------------------------------------|---|---|--------------------------|----------------------|---------------------------|-------------------------|--------------------------|------|-----------------------|-------------------------------------|
| Intervention Information Tab                             |                                       | Region 18   | 0689  |                          | Ector Cour           |                           |                         | 068901042                | Boi  | nham Middle School    |                                     |
|  |                                       |   | 1   | Needs Asses              | sment Summary        | and Improven              | nent Pl                 | an                       |      |                       |                                     |
| Proble   | m Statement 3:                        |   |   |                          |                      | Annual Goal:              | <enter text=""></enter> |                          |      |                       |                                     |
|  | Root Cause 3:                         | <enter text=""></enter>   |   |                          |                      | Strategy:                 | <enter text=""></enter> |                          |      |                       |                                     |
|  | Index Number:                         | □ Not Applicable  | □ Index 1:  | Student Achievement      | □ Index 2: Stu       | dent Progress             | Index 3                 | : Closing Achievement    | Gaps | □ Index 4:            | Postsecondary Readiness             |
|  |                                       | □ CSF 1-Improve Acade   | emic Performance / ESEA                           | TP: Strengthen the Scho  | ol's Instruction     |                           |                         |                          |      |                       |                                     |
|  |                                       | □ CSF 2-Quality Data to   | Drive Instruction/ESEA TR                         | P: Use of Data to Inform | Instruction          |                           |                         |                          |      |                       |                                     |
| Critical Success Fact                                    |                                       |   | ectiveness/ESEA TP: Prov                          |                          |                      | How will addressing this  | root cause              |                          |      |                       |                                     |
| ESEA Turnaround Prin                                     |                                       |   | ning Time/ESEA TP: Rede                           |                          |                      | impact the index/indicate |                         | <enter text=""></enter>  |      |                       |                                     |
| Major Systen   | ns                                    |   | nity Engagement/ESEA TF                           |                          |                      |                           |                         |                          |      |                       |                                     |
|  |                                       |   | /ESEA TP: Improve Schoo                           |                          |                      |                           |                         |                          |      |                       |                                     |
|  |                                       | 2 COL / Todoliol Quality  | eacher Quality/ESEA TP: Ensure Effective Teachers |                          |                      | rventions by Quarte       | er                      |                          |      |                       |                                     |
|  | Q1 (Aug, Sept, 0                      | required to provide, Q2 (Nov, Dec, Jan)   |   |                          |                      |                           |                         |                          |      |                       |                                     |
| Districts and 1st You at a minimum, the inte             | ear IR campuses a<br>erventions accom | g, Sept, Oct) mpuses are required to provide, ss accomplished for quarter 1 (Q1). |   | Q2 (Nov, Dec, Jan)       |                      |                           | Q3 (Fe                  | eb, Mar)                 |      | Q4 (                  | (April, May, June)                  |
| Q1 Goal:   |                                       |   | Q2 Goal:  |                          |                      | Q3 Goal:                  |                         |                          |      | Q4 Goal:              |                                     |
|  | Q1 Interventio                        | ns  |   | Q2 Interventions         |                      |                           | Q3 Inter                | ventions                 |      | Q                     | 4 Interventions                     |
| 1)   |                                       |   | 1)  |                          |                      | 1)                        |                         |                          |      | 1)                    |                                     |
| 2)   |                                       |   | 2)  |                          |                      | 2)                        |                         |                          |      | 2)                    |                                     |
| 3)   |                                       |   | 3)  |                          |                      | 3)                        |                         |                          |      | 3)                    |                                     |
| 4)   |                                       |   | 4)  |                          |                      | 4)                        |                         |                          |      | 4)                    |                                     |
| What data will be co                                     | ollected to monit                     | tor interventions in Q1?  | What data will                                    | be collected to monitor  | interventions in Q2? | What data will be         | e collected to          | monitor interventions in | Q3?  | What data was collect | ted to monitor interventions in Q4? |
| 1)   |                                       |   | 1)  |                          |                      | 1)                        |                         |                          |      | 1)                    |                                     |
| 2)   |                                       |   | 2)  |                          |                      | 2)                        |                         |                          |      | 2)                    |                                     |
| 3)   |                                       |   | 3)  |                          |                      | 3)                        |                         |                          |      | 3)                    |                                     |
| 4)   |                                       |   | 4)  |                          |                      | 4)                        |                         |                          |      | 4)                    |                                     |

| Responses to these questions have been from the Contact-  |  |  | Number:   | District N   | lame:  | Campus Numb   | er:                     | Campus Name:   |   |                         |
|---|--|--|---|--|--|---|-------------------------|--|---|-------------------------|
| Intervention Information Tab  |  | Region 18  |   | 3901   | Ector Cour   |   | 068901042               | Bo   | nham Middle School  |                         |
|   |  |  |   | Needs Assess   | sment Summary  | and Improven  | nent Plan               |  |   |                         |
|   |  |  |   |  | End of Quarter Ro  | eporting  |                         |  |   |                         |
| Districts and 1st Year I  | Q1 Report<br>IR campuses are r<br>quarter 1 (Q1) re  | not required to complete the port.                             |   | Q2 Report  |  |   | Q3 Report               |  | Q4 Report   |                         |
| Did you meet this quarter's goal?   | Select   |  | Did you meet this quarter's goal?   | Select   |  | Did you meet this quarter's goal?   | Select                  |  | Did you meet this quarter's goal?   | Select                  |
| Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>  |  | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal.                               | <enter text=""></enter>  |  | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter> |  | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter> |
| Are you on track to meet the annual goal?   | Select   |  | Are you on track to meet the annual goal?   | Select   |  | Are you on track to meet the annual goal?   | Select                  |  | Did you meet your annual goal?  | Select                  |
| What, if any, adjustments must be made in order to meet the annual goal?                                      | <enter addit<="" any="" th=""><th>tional information here&gt;</th><th>What, if any,<br/>adjustments must be<br/>made in order to meet<br/>the annual goal?</th><th><enter additional="" any="" info<="" th=""><th>rmation here&gt;</th><th colspan="3">What, if any, adjustments must be made in order to meet the annual goal?</th><th><enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter></th></enter></th></enter> | tional information here>                                       | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?   | <enter additional="" any="" info<="" th=""><th>rmation here&gt;</th><th colspan="3">What, if any, adjustments must be made in order to meet the annual goal?</th><th><enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter></th></enter> | rmation here>  | What, if any, adjustments must be made in order to meet the annual goal?                                      |                         |  | <enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter>                                  | rmation here>           |
|   | End of Year Reporting  |  |   |  |  |   |                         |  |   |                         |
| Provide the data that supports your 4th quarter status of this annual goal.                                   | <enter text=""></enter>  |  | If you <u>did</u> meet your ann what do you attribute yo success? If you <u>did not</u> meet your goal, to what do you attriack of success? | r annual   | Data Quality  Appropriate Strategy  Identification of Root Cause  Quarterly Planning Process | □ Annual □ CSF/ES □ Training □ Other  | EA Turnaround           | Please provide<br>additional information<br>for the selection of<br>Other or for any<br>selected elements. | <enter text=""></enter>   |                         |
|   | of success, will i   | ed elements and their impact<br>inform/influence your planning | <enter text=""></enter>   |  |  |   |                         |  |   |                         |
| Proble  | em Statement 4:  |  |   |  |  | Annual Goal:  | <enter text=""></enter> |  |   |                         |
|   | Root Cause 4:  | <enter text=""></enter>  |   |  |  | Strategy:   | <enter text=""></enter> |  |   |                         |
|   | Index Number:  | □ Not Applicable   |   | Student Achievement  |  | dent Progress   | Index 3: Closing A      | chievement Gaps  | □ Index 4:  | Postsecondary Readiness |
| Critical Success Fact   | CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction  CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction  Critical Success Factors (CSFs)  CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership  |  |   |  |  |   |                         |  |   |                         |

| Responses to these questions                                | Education Sonia  | e Center (ESC) Number: | : District Number: District Name |  |                                   | Campus              | : Number:                | Campus Name:                      | I                                    |  |
|---|--|------------------------|----------------------------------|--|-----------------------------------|---------------------|--------------------------|-----------------------------------|--------------------------------------|--|
| have been from the Contact-<br>Intervention Information Tab |  | Region 18              |                                  | 3901 Ector Coul                              |                                   |                     |                          | nham Middle School                | 1                                    |  |
| increasion injornation rab                                  |  | togon 10               | l                                | Needs Assessment Summary                     |                                   |                     | 0.012                    | aado conco                        | l                                    |  |
|   | <u> </u>   |                        |                                  | -  | How will addressing this          | root cauco          |                          |                                   |                                      |  |
| ESEA Turnaround Prin  |  |                        | rning Time/ESEA TP: Red          |  | impact the index/indicate         | or/CSF?             | er text>                 |                                   |                                      |  |
| Major Syster  | ms   |                        |                                  | P: Ongoing Family and Community Engagement   |                                   |                     |                          |                                   |                                      |  |
|   |  | CSF 6-School Climate   | e/ESEA TP: Improve Scho          | ol Environment                               |                                   |                     |                          |                                   |                                      |  |
|   |  | CSF 7-Teacher Qualit   | ty/ESEA TP: Ensure Effec         | tive Teachers                                |                                   |                     |                          |                                   |                                      |  |
|   |  |                        |                                  | Inte   | rventions by Quarte               | er                  |                          |                                   |                                      |  |
|   | Q1 (Aug, Sept, Oct)<br>'ear IR campuses are r<br>terventions accomplish                              | equired to provide,    |                                  | Q2 (Nov, Dec, Jan)                           |                                   | Q3 (Feb, Mai        | ·)                       | Q4 (April, May, June)             |                                      |  |
| Q1 Goal:  |  |                        | Q2 Goal:                         |  | Q3 Goal:                          |                     |                          | Q4 Goal:                          |                                      |  |
|   | Q1 Interventions Q2 Interventions  |                        |                                  |  |                                   | Q3 Intervention     | ns                       | Q4 Interventions                  |                                      |  |
| 1)  | 1)   |                        |                                  |  | 1)                                |                     |                          | 1)                                |                                      |  |
| 2)  |  |                        | 2)                               |  | 2)                                |                     |                          | 2)                                |                                      |  |
| 3)  |  |                        | 3)                               |  | 3)                                |                     |                          | 3)                                |                                      |  |
| 4)  |  |                        | 4)                               |  | 4)                                |                     |                          | 4)                                |                                      |  |
| What data will be c   | ollected to monitor i  | nterventions in Q1?    | What data will                   | be collected to monitor interventions in Q2? | What data will be                 | e collected to moni | tor interventions in Q3? | What data was collect             | cted to monitor interventions in Q4? |  |
| 1)  |  |                        | 1)                               |  | 1)                                |                     |                          | 1)                                |                                      |  |
| 2)  |  |                        | 2)                               |  | 2)                                |                     |                          | 2)                                |                                      |  |
| 3)  |  |                        | 3)                               |  | 3)                                |                     |                          | 3)                                |                                      |  |
| 4)  | 4)   |                        |                                  |  | 4)                                |                     |                          | 4)                                |                                      |  |
|   |  |                        |                                  | End of Quarter R                             | eporting                          |                     |                          |                                   |                                      |  |
| Districts and 1st Year                                      | Q1 Report Districts and 1st Year IR campuses are not required to complete the quarter 1 (Q1) report. |                        | Q2 Report                        |  |                                   | Q3 Report           | oort                     |                                   | Q4 Report                            |  |
| Did you meet this quarter's goal?                           |  |                        |                                  | Select                                       | Did you meet this quarter's goal? | Select              |                          | Did you meet this quarter's goal? | Select                               |  |

| Responses to these questions  | Education S   | Gervice Center (ESC) Number:                                  | District I  | Number:  | D  | istrict Na               | ame:  |  | Campus Numb     | er:  | Campus Name:  | I                       |
|---|---|---|---|--|--|--------------------------|---|--|-----------------|--|---|-------------------------|
| have been from the Contact-<br>Intervention Information Tab   |   | Region 18   | 068   | 901  | Ec   | tor Count                | ty ISD  |  | 068901042       | Bo   | nham Middle School  | 1                       |
|   |   |   |   | Needs  | Assessment Summ  | arv                      | and Improven  | nent P   | lan             |  |   | 1                       |
| Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>   |   | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>  |  |                          | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text<="" th=""><th></th><th></th><th>Provide the data or<br/>evidence that supports<br/>meeting or making<br/>progress toward this<br/>quarterly goal.</th><th><enter text=""></enter></th></enter> |                 |  | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter> |
| Are you on track to meet the annual goal?   | Select  |   | Are you on track to meet the annual goal?   | Select   |  |                          | Are you on track to meet the annual goal?   | Select   |                 |  | Did you meet your annual goal?  | Select                  |
| What, if any, adjustments<br>must be made in order to<br>meet the annual goal?                                | <enter additi<="" any="" th=""><th>onal information here&gt;</th><th>What, if any,<br/>adjustments must be<br/>made in order to meet<br/>the annual goal?</th><th><enter a<="" any="" th=""><th>dditional information here&gt;</th><th></th><th>What, if any,<br/>adjustments must be<br/>made in order to meet<br/>the annual goal?</th><th><enter any<="" th=""><th>additional info</th><th>ormation here&gt;</th><th><enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter></th></enter></th></enter></th></enter> | onal information here>  | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?                             | <enter a<="" any="" th=""><th>dditional information here&gt;</th><th></th><th>What, if any,<br/>adjustments must be<br/>made in order to meet<br/>the annual goal?</th><th><enter any<="" th=""><th>additional info</th><th>ormation here&gt;</th><th><enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter></th></enter></th></enter> | dditional information here>  |                          | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?                             | <enter any<="" th=""><th>additional info</th><th>ormation here&gt;</th><th><enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter></th></enter>                                       | additional info | ormation here>   | <enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter>                                  | rmation here>           |
| End of Year Reporting   |   |   |   |  |  |                          |   |  |                 |  |   |                         |
| Provide the data that supports your 4th quarter status of this annual goal.                                   | ovide the data that poorts your 4th arter status of this nual goal.  Senter text>  If yo goal lack  |   |   | ual goal, to<br>ur<br>annual<br>ibute your   | Data Analysis Proces  Data Quality  Appropriate Strategy  Identification of Root  Quarterly Planning P  Ongoing Monitoring a | Cause                    | □ Annual 0 □ CSF/ES □ Training □ Other  | s) Intervention  |                 | Please provide<br>additional information<br>for the selection of<br>Other or for any<br>selected elements. | <enter text=""></enter>   |                         |
|   | of success, will i  | rd elements and their impact<br>nform/influence your planning | <enter text=""></enter>   |  |  |                          |   |  |                 |  |   |                         |
| Proble  | em Statement 5:   |   |   |  |  |                          | Annual Goal:  | <enter text<="" th=""><th>&gt;</th><th></th><th></th><th></th></enter>   | >               |  |   |                         |
|   | Root Cause 5:   | <enter text=""></enter>                                       |   |  |  |                          | Strategy:   | <enter text<="" th=""><th>&gt;</th><th></th><th></th><th></th></enter>   | >               |  |   |                         |
|   | Index Number:   | □ Not Applicable  |   | Student Ac   |  | 2: Stud                  | dent Progress □   | Index  | 3: Closing A    | chievement Gaps  | □ Index 4:  | Postsecondary Readiness |
|   |   | ·   |   | _  | en the School's Instruction  |                          |   |  |                 |  |   |                         |
| Critical Success Fact   | CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction  |   |   |  |  |                          |   |  |                 |  |   |                         |
| ESEA Turnaround Prin  |   |   |   | ·  |  | How will addressing this |   | <enter text:<="" th=""><th></th><th></th><th></th></enter>   |                 |  |   |                         |
|   | Major Systems  CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement   |   |   |  |  |                          | impact the index/indicate   | or/CSF?  |                 |  |   |                         |
| , 2,000   | □ CSF 6-School Climate/ESEA TP: Improve School Environment  |   |   |  |  |                          |   |  |                 |  |   |                         |
|   |   |   | y/ESEA TP: Ensure Effec   |  |  |                          |   |  |                 |  |   |                         |
|   |   |   |   |  |  | Inter                    | ventions by Quarte  | r  |                 |  |   |                         |

| Responses to these questions have been from the Contact-  | Education Service Center (ESC) Number:   | District I  | District Number: District Na |                   |   | campus Number:          |                       |   |                         |
|---|--|---|------------------------------|-------------------|---|-------------------------|-----------------------|---|-------------------------|
| Intervention Information Tab  | Region 18  | 068   |                              | Ector Cour        |   | 068901042               | Во                    | nham Middle School  |                         |
|   |  | I   | Needs Assess                 | ment Summary      | and Improven  | nent Plan               |                       |   |                         |
|   | Q1 (Aug, Sept, Oct) ear IR campuses are required to provide, erventions accomplished for quarter 1 (Q1).         |   | Q2 (Nov, Dec, Jan)           |                   |   | Q3 (Feb, Mar)           |                       | Q4  | (April, May, June)      |
| Q1 Goal:  |  | Q2 Goal:  |                              |                   | Q3 Goal:  |                         |                       | Q4 Goal:  |                         |
|   | Q1 Interventions   |   | Q2 Interventions             |                   |   | Q3 Interventions        |                       | C   | Q4 Interventions        |
| 1)  |  | 1)  |                              |                   | 1)  |                         |                       | 1)  |                         |
| 2)  |  | 2)  | 2)                           |                   | 2)  |                         |                       | 2)  |                         |
| 3)  |  | 3)  | 3)                           |                   | 3)  |                         |                       | 3)  |                         |
| 4)  |  | 4)  |                              | 4)                |   |                         | 4)                    |   |                         |
| What data will be c   | What data will be collected to monitor interventions in Q1? What data will be collected to monitor interventions |   | nterventions in Q2?          | What data will be | e collected to monitor interventions in   | Q3?                     | What data was collect | ted to monitor interventions in Q4?   |                         |
| 1)  |  | 1)  |                              |                   | 1)  |                         |                       | 1)  |                         |
| 2)  |  | 2)  |                              |                   | 2)  |                         |                       | 2)  |                         |
| 3)  |  | 3)  |                              |                   | 3)  |                         |                       | 3)  |                         |
| 4)  |  | 4)  |                              |                   | 4)  |                         |                       | 4)  |                         |
|   |  |   |                              | End of Quarter Re | eporting  |                         |                       |   |                         |
| Districts and 1st Year  | Q1 Report<br>R campuses are not required to complete the<br>quarter 1 (Q1) report.                               |   | Q2 Report                    |                   |   | Q3 Report               |                       |   | Q4 Report               |
| Did you meet this quarter's goal?   | Select   | Did you meet this<br>quarter's goal?  | ,                            | Select            | Did you meet this<br>quarter's goal?  | Select                  |                       | Did you meet this<br>quarter's goal?  | Select                  |
| Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>  | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | e<br>n<br>p                  |                   | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter> |                       | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter> |
| Are you on track to meet the annual goal?   | Select   | Are you on track to meet the annual goal?   |                              |                   | Are you on track to meet the annual goal?   |                         |                       | Did you meet your annual goal?  | Select                  |

| Responses to these questions<br>have been from the Contact-<br>Intervention Information Tab | Education S  | Service Center (ESC) Number:  Region 18   | District N   |   | District N   |   | Campus Numb<br>068901042   | er:   | Campus Name:  Bonham Middle School   |                         |
|---|--|---|--|---|--|---|--|---|--|-------------------------|
| intervention information rub  |  | region to   |  |   | sment Summary  |   |  |   | Bornam made Golloo   |                         |
| What, if any, adjustments<br>must be made in order to<br>meet the annual goal?              | <enter addit<="" any="" th=""><th>ional information here&gt;</th><th>What, if any,<br/>adjustments must be<br/>made in order to meet<br/>the annual goal?</th><th><enter additional="" any="" info<="" th=""><th>-</th><th>What, if any,<br/>adjustments must be<br/>made in order to meet<br/>the annual goal?</th><th><enter additional="" any="" info<="" th=""><th>ormation here&gt;</th><th><enter additional="" any="" infor<="" th=""><th>mation here&gt;</th></enter></th></enter></th></enter></th></enter> | ional information here>   | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?  | <enter additional="" any="" info<="" th=""><th>-</th><th>What, if any,<br/>adjustments must be<br/>made in order to meet<br/>the annual goal?</th><th><enter additional="" any="" info<="" th=""><th>ormation here&gt;</th><th><enter additional="" any="" infor<="" th=""><th>mation here&gt;</th></enter></th></enter></th></enter> | -  | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal? | <enter additional="" any="" info<="" th=""><th>ormation here&gt;</th><th><enter additional="" any="" infor<="" th=""><th>mation here&gt;</th></enter></th></enter> | ormation here>  | <enter additional="" any="" infor<="" th=""><th>mation here&gt;</th></enter> | mation here>            |
|   |  |   |  |   | End of Year Rep  | orting  |  |   |  |                         |
| Provide the data that<br>supports your 4th<br>quarter status of this<br>annual goal.        | r 4th  |   | If you did meet your anni<br>what do you attribute you<br>success?  If you did not meet your<br>goal, to what do you attri<br>lack of success? | annual -  | Data Analysis Process  Data Quality  Appropriate Strategy  Identification of Root Cause  Quarterly Planning Process  Ongoing Monitoring and Interest | □ Annual C □ CSF/ES □ Training □ Other  | EA Turnaround  | Please provide<br>additional informat<br>for the selection of<br>Other or for any<br>selected elements. |  |                         |
|   | of success, will i   | ed elements and their impact<br>nform/influence your planning   |  |   |  |   | ·  |   |  |                         |
| Problem Statement 6:  |  |   |  |   |  | Annual Goal:  | <enter text=""></enter>  |   |  |                         |
|   | Root Cause 6:  | <enter text=""></enter>   |  |   |  | Strategy:   | <enter text=""></enter>  |   |  |                         |
|   | Index Number:  | □ Not Applicable  | □ Index 1:   | Student Achievement   | □ Index 2: Stu   | dent Progress   | Index 3: Closing Ad  | chievement Gaps   | □ Index 4:   | Postsecondary Readiness |
| Critical Success Fact<br>ESEA Turnaround Prin<br>Major Syster                               | nciples (TPs)  | □ CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction □ CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction □ CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership □ CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar □ CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement □ CSF 6-School Climate/ESEA TP: Improve School Environment □ CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers |  |   |  | How will addressing this root cause impact the index/indicator/CSF?               |  |   |  |                         |
| Interventions by Quarter  |  |   |  |   |  |   | r  |   |  |                         |
| Districts and 1st Y   | Q1 (Aug, Sept, Ger IR campuses erventions accom  | Oct)<br>are required to provide,<br>uplished for quarter 1 (Q1).  |  | Q2 (Nov, Dec, Jan)  |  |   | Q3 (Feb, Mar)  |   | Q4 (   | April, May, June)       |
| Q1 Goal:  |  |   | Q2 Goal:   |   |  | Q3 Goal:  |  |   | Q4 Goal:   |                         |
|   | Q1 Interventio   | ns  |  | Q2 Interventions  |  |   | Q3 Interventions   |   | Q  | 4 Interventions         |

| Responses to these questions  | Education Service Center (ESC) Number:  | District I   | Number:                 | District Na   | me:   | Campus Numbe   | er:   | Campus Name:  |                                     |
|---|---|--|-------------------------|---|---|--|---|---|-------------------------------------|
| have been from the Contact-<br>Intervention Information Tab   | Region 18   | 068  | 901                     | Ector County  | y ISD   | 068901042  | Bo  | nham Middle School  |                                     |
|   |   | I  | Needs A                 | Assessment Summary  | and Improven  | nent Plan  |   |   | •                                   |
| 1)  |   | 1)   |                         |   | 1)  |  |   | 1)  |                                     |
|   |   | -  |                         |   |   |  |   | -   |                                     |
| 2)  |   | 2)   |                         |   | 2)  |  |   | 2)  |                                     |
| 3)  |   | 3)   |                         |   | 3)  |  |   | 3)  |                                     |
| 4)  |   | 4)   |                         |   | 4)  |  |   | 4)  |                                     |
| What data will be co  | ollected to monitor interventions in Q1?                                      | What data will   | be collected            | to monitor interventions in Q2?   | What data will be   | e collected to monitor into  | erventions in Q3?   | What data was collec  | ted to monitor interventions in Q4? |
| 1)  |   | 1)   |                         |   | 1)  |  |   | 1)  |                                     |
| 2)  |   | 2)   |                         |   | 2)  |  |   | - 2)  |                                     |
| 2)  |   | -  |                         |   | 2)  |  |   | -   |                                     |
| 3)  |   | 3)   |                         |   | 3)  |  |   | 3)  |                                     |
| 4)  |   | 4)   |                         |   | 4)  |  |   | 4)  |                                     |
|   | End of Quarter Reporting  |  |                         |   |   |  |   |   |                                     |
| Districts and 1st Year I  | Q1 Report IR campuses are not required to complete the quarter 1 (Q1) report. |  | Q2                      | Report  |   | Q3 Report  |   |   | Q4 Report                           |
| Did you meet this quarter's goal?   | Select  | Did you meet this quarter's goal?  | Select                  |   | Did you meet this quarter's goal?   |  |   | Did you meet this quarter's goal?   | Select                              |
| Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>   | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal.  | <enter text=""></enter> |   | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. |  |   | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>             |
| Are you on track to meet the annual goal?   | Select  | Are you on track to meet the annual goal?  | Select                  |   | Are you on track to meet the annual goal?   | Select   |   | Did you meet your annual goal?  | Select                              |
| What, if any, adjustments<br>must be made in order to<br>meet the annual goal?                                | <enter additional="" any="" here="" information=""></enter>                   | adjustments must be made in order to meet <enter additional="" any="" here="" information=""></enter>  |                         |   | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?                 | <enter additional="" any="" info<="" td=""><td>rmation here&gt;</td><td colspan="2"><enter additional="" any="" here="" information=""></enter></td></enter> | rmation here>   | <enter additional="" any="" here="" information=""></enter>   |                                     |
|   |   |  |                         | End of Year Repo  | orting  |  |   |   |                                     |
| Provide the data that supports your 4th quarter status of this annual goal.                                   | <enter text=""></enter>   | If you did meet your anni what do you attribute you success?  If you did not meet your attribute you attribute your attribute you attribute yo | ur<br>annual            | <ul> <li>□ Data Analysis Process</li> <li>□ Data Quality</li> <li>□ Appropriate Strategy</li> <li>□ Identification of Root Cause</li> </ul> | □ Annual  | EA Turnaround  | Please provide<br>additional information<br>for the selection of<br>Other or for any<br>selected elements | <enter text=""></enter>   |                                     |

| Responses to these questions have been from the Contact- Intervention Information Tab             | Education Se  | ervice Center (ESC) Number: | District Numbe                                  | er:                    | District N.  |  |                                | pus Number:             |          | Campus Name:         |                                     |  |
|---|---|-----------------------------|---|------------------------|--|--|--------------------------------|-------------------------|----------|----------------------|-------------------------------------|--|
|   |   |                             | Nee   | eds Assess             | ment Summary   | and Improven                                     | nent Plai                      | า                       | <u>I</u> |                      |                                     |  |
|   |   |                             | goal, to what do you attribute lack of success? |                        | Quarterly Planning Process Ongoing Monitoring and Inte | □ Other erventions                               |                                | Selected en             | amento.  |                      |                                     |  |
| Provide information as to how<br>on your success, or lack of su<br>for the 2016-2017 school year. | uccess, will in   |                             | <enter text=""></enter>                         |                        |  |  |                                |                         |          |                      |                                     |  |
| Problem S   | Statement 7:  |                             |   |                        |  | Annual Goal: <enter text=""></enter>             |                                |                         |          |                      |                                     |  |
| Ro  | oot Cause 7:  | <enter text=""></enter>     |   |                        |  | Strategy:  | ategy: <enter text=""></enter> |                         |          |                      |                                     |  |
| Inde  | dex Number:   | □ Not Applicable            | □ Index 1: Stud                                 | lent Achievement       | □ Index 2: Stud  | dent Progress                                    | Index 3: C                     | osing Achievement       | Gaps     | □ Index 4:           | Postsecondary Readiness             |  |
| Critical Success Factors (<br>ESEA Turnaround Principle<br>Major Systems                          | und Principles (TPs)  CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar |                             |   |                        |  | How will addressing this impact the index/indica |                                | Enter text>             |          |                      |                                     |  |
|   |   |                             |   |                        | Inter  | ventions by Quarte                               | r                              |                         |          |                      |                                     |  |
| Q1 (<br>Districts and 1st Year II<br>at a minimum, the interve                                    |   | re required to provide,     |   | Q2 (Nov, Dec, Jan)     |  |  | Q3 (Feb,                       | Mar)                    |          | Q4 (                 | (April, May, June)                  |  |
| Q1 Goal:  | Q1 Goal:  |                             |   |                        |  | Q3 Goal:   |                                |                         |          | Q4 Goal:             |                                     |  |
| Q1 Interventions Q2 Interventi  |   |                             | Q2 Interventions                                |                        |  | Q3 Interve                                       | ntions                         |                         | Q        | 4 Interventions      |                                     |  |
| 1)  | 1)  |                             |   |                        |  | 1)   |                                |                         |          | 1)                   |                                     |  |
| 2)  | 2)  |                             |   |                        |  | 2)   |                                |                         |          | 2)                   |                                     |  |
| 3)  | 3)  |                             |   |                        |  | 3)   |                                |                         |          | 3)                   |                                     |  |
| 4)  |   |                             |   | 4)                     |  |  |                                | 4)                      |          |                      |                                     |  |
| What data will be collec  | cted to monito  | or interventions in Q1?     | What data will be co                            | ollected to monitor in | terventions in Q2?                                     | What data will be                                | collected to m                 | onitor interventions in | Q3?      | What data was collec | ted to monitor interventions in Q4? |  |

| Responses to these questions  | Education Service Center (ESC) Number:  | District N  | Number:  | District N   | ame:  | Campus Numb  | er:  | Campus Name:  | I   |  |  |
|---|---|---|--|--|---|--|--|---|---|--|--|
| have been from the Contact-<br>Intervention Information Tab   | Region 18   | 068   | 901  | Ector Coun   | ty ISD  | 068901042  | Bo   | nham Middle School  | 1   |  |  |
|   |   | ı   | Needs Asses  | sment Summary  | and Improven  | nent Plan  | •  |   | •   |  |  |
| 1)  |   | 1)  |  |  | 1)  |  |  | 1)  |   |  |  |
| 2)  |   | 2)  | 2)   |  | 2)  |  |  | 2)  |   |  |  |
| 3)  |   | 3)  |  |  | 3)  |  |  | 3)  |   |  |  |
| 4)  |   | 4)  |  |  | 4)  |  |  | 4)  |   |  |  |
|   |   |   |  | End of Quarter Re  | porting   |  |  |   |   |  |  |
|   | Q1 Report<br>R campuses are not required to complete the<br>quarter 1 (Q1) report.                      |   | Q2 Report  |  |   | Q3 Report  |  |   | Q4 Report   |  |  |
| Did you meet this quarter's goal?   | Select  | Did you meet this quarter's goal?   | Select   |  | Did you meet this quarter's goal?   | Select   |  | Did you meet this quarter's goal?   | Select  |  |  |
| Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>   | evidence that supports meeting or making progress toward this   |  |  | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>  |  | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>                                     |  |  |
| Are you on track to meet the annual goal?   | Select  | Are you on track to meet the annual goal?   | Select   |  | Are you on track to meet the annual goal?   | Select   |  | Did you meet your annual goal?  | Select  |  |  |
| What, if any, adjustments<br>must be made in order to<br>meet the annual goal?                                | <enter additional="" any="" here="" information=""></enter>   | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?   | <enter additional="" any="" inf<="" th=""><th>ormation here&gt;</th><th>What, if any,<br/>adjustments must be<br/>made in order to meet<br/>the annual goal?</th><th colspan="3">ents must be order to meet &lt;- Enter any additional information here&gt;</th><th colspan="3"><enter additional="" any="" here="" information=""></enter></th></enter> | ormation here>   | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?                             | ents must be order to meet <- Enter any additional information here> |  |   | <enter additional="" any="" here="" information=""></enter> |  |  |
|   |   |   |  | End of Year Rep  | orting  |  |  |   |   |  |  |
| Provide the data that supports your 4th quarter status of this annual goal.                                   | <enter text=""></enter>   | If you did meet your annown what do you attribute you success?  If you did not meet your goal, to what do you attriback of success? | ur = = = = = = = = = = = = = = = = = = =   | Data Quality  Appropriate Strategy  Identification of Root Cause  Quarterly Planning Process | □ Annual C □ CSF/ESI □ Training □ Other   | EA Turnaround  | Please provide<br>additional information<br>for the selection of<br>Other or for any<br>selected elements. | <enter text=""></enter>   |   |  |  |
|   | now the identified elements and their impact<br>if success, will inform/influence your planning<br>ear. | <enter text=""></enter>   |  |  |   |  |  |   |   |  |  |
| Proble  | m Statement 8:  |   |  |  | Annual Goal:  | <enter text=""></enter>  |  |   |   |  |  |

| Responses to these questions have been from the Contact-   | Service Center (ESC) Number: | District No          | umber:                     | District N          | ame:                 | Campus Number:                        | Campus Name:            | I                                    |  |  |  |
|--|------------------------------|----------------------|----------------------------|---------------------|----------------------|---------------------------------------|-------------------------|--------------------------------------|--|--|--|
| Intervention Information Tab   | Region 18                    | 0689                 | 01                         | Ector Coun          | ty ISD               | 068901042                             | Bonham Middle School    | ]                                    |  |  |  |
|  |                              | N                    | leeds Assess               | ment Summary        | and Improven         | nent Plan                             |                         |                                      |  |  |  |
| Root Cause 8   | : <enter text=""></enter>    |                      |                            |                     | Strategy:            | <enter text=""></enter>               |                         |                                      |  |  |  |
| Index Number   | : □ Not Applicable           | □ Index 1: \$        | Student Achievement        | □ Index 2: Stud     | dent Progress        | Index 3: Closing Achievement (        | Gaps □ Index 4          | : Postsecondary Readiness            |  |  |  |
| CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction  CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction  CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership  ESEA Turnaround Principles (TPs)  Major Systems  CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar  CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement  CSF 6-School Climate/ESEA TP: Improve School Environment  CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers |                              |                      |                            |                     |                      |                                       |                         |                                      |  |  |  |
|  | Interventions by Quarter     |                      |                            |                     |                      |                                       |                         |                                      |  |  |  |
| Q1 (Aug, Sept,<br>Districts and 1st Year IR campuses<br>at a minimum, the interventions accor  | are required to provide,     |                      | Q2 (Nov, Dec, Jan)         |                     |                      | Q3 (Feb, Mar)                         | Q                       | Q4 (April, May, June)                |  |  |  |
| Q1 Goal:   |                              | Q2 Goal:             |                            |                     | Q3 Goal:             |                                       | Q4 Goal:                |                                      |  |  |  |
| Q1 Interventi  | ons                          | Q2 Interventions     |                            |                     |                      | Q3 Interventions                      |                         | Q4 Interventions                     |  |  |  |
| 1)<br>2)<br>3)<br>4)   |                              | 1)<br>2)<br>3)<br>4) |                            |                     | 1)<br>2)<br>3)<br>4) |                                       | 3                       | )                                    |  |  |  |
| What data will be collected to mon   | nitor interventions in Q1?   | What data will b     | pe collected to monitor in | nterventions in Q2? | What data will be    | collected to monitor interventions in | Q3? What data was colle | cted to monitor interventions in Q4? |  |  |  |
| 2)   | 2)                           |                      |                            | 2)                  | 2)                   |                                       | )                       |                                      |  |  |  |
| 4)   |                              | 4)                   |                            | End of Quarter Re   | 4)<br>eporting       |                                       | 4                       | ) <u> </u>                           |  |  |  |

| Responses to these questions have been from the Contact-   | Education S   | Service Center (ESC) Number:                                  | District I   | Number:   | District N     | lame:   | Campus Numbe   | er:             | Campus Name:  |                         |
|--|---|---|--|---|----------------|---|--|-----------------|---|-------------------------|
| Intervention Information Tab   |   | Region 18   | 068  |   | Ector Cour     | •   | 068901042  | Во              | nham Middle School  |                         |
|  |   |   |  | Needs Assess  | ment Summary   | and Improven  | nent Plan  |                 |   |                         |
| Districts and 1st Year   | Q1 Report<br>IR campuses are r<br>quarter 1 (Q1) re | not required to complete the port.                            |  | Q2 Report   |                | Q3 Report   |  |                 |   | Q4 Report               |
| Did you meet this quarter's goal?  | Select  |   | Did you meet this quarter's goal?  |   |                |   | Select   |                 | Did you meet this quarter's goal?   | Select                  |
| Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal.  | <enter text=""></enter>                             |   | Provide the data or evidence that supports meeting or making progress toward this quarterly goal.  |   |                | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>  |                 | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter> |
| Are you on track to meet the annual goal?  | Select  |   | Are you on track to meet the annual goal?  |   |                | Are you on track to meet the annual goal?   | Select   |                 | Did you meet your annual goal?  | Select                  |
| What, if any, adjustments must be made in order to meet the annual goal?   |   | ional information here>                                       | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?  | <enter additional="" any="" inform<="" th=""><th>mation here&gt;</th><th>What, if any,<br/>adjustments must be<br/>made in order to meet<br/>the annual goal?</th><th><enter additional="" any="" info<="" th=""><th>rmation here&gt;</th><th colspan="2"><enter additional="" any="" here="" information=""></enter></th></enter></th></enter> | mation here>   | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?                             | <enter additional="" any="" info<="" th=""><th>rmation here&gt;</th><th colspan="2"><enter additional="" any="" here="" information=""></enter></th></enter> | rmation here>   | <enter additional="" any="" here="" information=""></enter>   |                         |
|  | End of Year Reporting                               |   |  |   |                |   |  |                 |   |                         |
| Provide the data that supports your 4th quarter status of this annual goal.  | <enter text=""></enter>                             |   | If you did meet your annual goal, to what do you attribute your success?  If you did not meet your annual goal, to what do you attribute your annual goal, to what do you attribute your lack of success?  Data Analysis Process  Appropriate Strategy  If you did not meet your annual goal, to what do you attribute your lack of success?  Quarterly Planning Process  Ongoing Monitoring all |   |                | Annual CSF/ES Training Other  | □ Annual Goals □ CSF/ESEA Turnaround additional information for the selection of Other or for any selected elements.   |                 |   |                         |
|  | of success, will i                                  | ed elements and their impact<br>nform/influence your planning | <enter text=""></enter>  | ·   |                |   |  |                 |   |                         |
| Proble   | em Statement 9:                                     |   |  |   |                | Annual Goal:  | <enter text=""></enter>  |                 |   |                         |
|  | Root Cause 9:                                       |   |  |   |                | Strategy:   | <enter text=""></enter>  |                 |   |                         |
| Index Number:   Not Applicable  Index 1: Student Achievement  Index 2:   |   |   |  |   | □ Index 2: Stu | dent Progress □   | Index 3: Closing Ad  | chievement Gaps | □ Index 4:  | Postsecondary Readiness |
| CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction  CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction  Critical Success Factors (CSFs) |   |   |  |   |                |   |  |                 |   |                         |
| ESEA Turnaround Principles (TPs)  CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar  |   |   |  | How will addressing this root cause impact the index/indicator/CSF?   |                |   |  |                 |   |                         |

| Responses to these questions  | Education :  | Service Center (ESC) Number: | District Number: District Na  |  | lame:   | C                       | Campus Number:               | Campus Name:  |                                     |
|---|--|------------------------------|---|--|---|-------------------------|------------------------------|---|-------------------------------------|
| have been from the Contact-<br>Intervention Information Tab   | Eddodion   | Region 18                    | 068   |  |   |                         |                              | nham Middle School  |                                     |
|   |  |                              | l   | Needs Assessment Summary                     | and Improven  | nent Pl                 | an                           |   | l                                   |
| Major Syster  | ns   | □ CSF 5-Family/Commu         |   | P: Ongoing Family and Community Engagement   |   |                         |                              |   |                                     |
|   |  | □ CSF 6-School Climate       | e/ESEA TP: Improve Scho   | ol Environment                               |   |                         |                              |   |                                     |
|   | □ CSF 7-Teacher Qualit                             | y/ESEA TP: Ensure Effec      | ive Teachers  |  |   |                         |                              |   |                                     |
|   |  |                              |   | Inte   | rventions by Quarte   | er                      |                              |   |                                     |
| Q1 (Aug, Sept, Oct)  Districts and 1st Year IR campuses are required to provide, at a minimum, the interventions accomplished for quarter 1 (Q1). |  |                              | Q2 (Nov, Dec, Jan)  |  | Q3 (Fe  | b, Mar)                 | Q4                           | (April, May, June)  |                                     |
| Q1 Goal:  |  |                              | Q2 Goal:  |  | Q3 Goal:  |                         |                              | Q4 Goal:  |                                     |
|   | Q1 Intervention                                    | ons                          |   | Q2 Interventions                             |   | Q3 Inter                | ventions                     | C   | 4 Interventions                     |
| 1)  |  |                              | 1)  |  | 1)  |                         |                              | 1)  |                                     |
|   |  |                              |   |  | - 2)  |                         |                              | -   |                                     |
| 2)  | 2)   |                              |   | 2)   |   |                         |                              | 2)  |                                     |
| 3)  |  |                              | 3)  | 3)   |   |                         | 3)                           |   |                                     |
| 4)  |  |                              | 4)  |  | 4)  |                         |                              | 4)  |                                     |
| What data will be c   | ollected to moni                                   | itor interventions in Q1?    | What data will  | be collected to monitor interventions in Q2? | What data will be   | collected to            | monitor interventions in Q3? | What data was collect   | ted to monitor interventions in Q4? |
| 1)  |  |                              | 1)  |  | 1)  |                         |                              | 1)  |                                     |
| 2)  |  |                              | 2)  |  | 2)  |                         |                              | 2)  |                                     |
| 3)  |  |                              | 3)  |  | 3)  | 3)                      |                              | 3)  |                                     |
| 4)  | 4) 4)  |                              |   | 4)   |   |                         | 4)                           |   |                                     |
|   |  |                              | End of Quarter F  |  |   |                         |                              |   |                                     |
| Districts and 1st Year I  | Q1 Report<br>R campuses are i<br>quarter 1 (Q1) re | not required to complete the | Q2 Report   |  |   | Q3 R                    | eport                        |   | Q4 Report                           |
| Did you meet this quarter's goal?   | Select   |                              | Did you meet this quarter's goal?   | Select                                       | Did you meet this quarter's goal?   | Select                  |                              | Did you meet this quarter's goal?   | Select                              |
| Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal.                                     | <enter text=""></enter>                            |                              | Provide the data or evidence that supports meeting or making progress toward this quarterly goal. |  | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter> |                              | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>             |

| Responses to these questions have been from the Contact-   | Education S        | Service Center (ESC) Number:                                    | District   | Number:   |             | District I  | lame:                               |  | Campus Numbe  | ər:  | Campus Name:                   |                         |
|--|--------------------|---|--|---|-------------|---|-------------------------------------|--|---|--|--------------------------------|-------------------------|
| Intervention Information Tab   |                    | Region 18   | 068  | 8901  |             | Ector Cou   | nty ISD                             |  | 068901042   | Во   | onham Middle School            |                         |
|  |                    |   |  | Needs A   | Assessı     | ment Summary  | and Impr                            | oven   | nent Plan   |  |                                |                         |
| Are you on track to meet the annual goal?  | Select             |   | Are you on track to meet the annual goal?  | Select  |             |   | Are you on track<br>meet the annual |  |   |  | Did you meet your annual goal? | Select                  |
| What, if any, adjustments<br>must be made in order to<br>meet the annual goal?   |                    | ional information here>   | What, if any,<br>adjustments must be<br>made in order to meet<br>the annual goal?  | <enter additional="" any="" here="" information=""></enter> |             | What, if any,<br>adjustments mu<br>made in order to<br>the annual goal?   | meet                                | <enter additional="" any="" here="" information=""></enter>  |   | <enter additional="" any="" info<="" th=""><th>rmation here&gt;</th></enter> | rmation here>                  |                         |
|  | <u> </u>           |   |  | <u> </u>  |             | End of Year Re  | porting                             |  | •   |  | <u> </u>                       |                         |
| Provide the data that supports your 4th quarter status of this annual goal.  |                    |   | If you did meet your ann what do you attribute yo success?  If you did not meet you goal, to what do you attribute of success? | our<br>r annual   |             | Data Analysis Process  Data Quality  Appropriate Strategy  Identification of Root Caus  Quarterly Planning Process  Ongoing Monitoring and In | s 🗆                                 | Annual Goals  CSF/ESEA Turnaround Training Other  Please provide additional information for the selection of Other or for any selected elements. |   | <enter text=""></enter>  | <enter text=""></enter>        |                         |
| on your success, or lack of for the 2016-2017 school y   | of success, will i | ed elements and their impact<br>nform/influence your planning   | <enter text=""></enter>  |   |             |   | Annual Go                           | pal:   | <enter text=""></enter>   |  |                                |                         |
|  | Root Cause 10:     | <enter text=""></enter>   |  |   |             |   | Strategy                            | <b>"</b> :   | <enter text=""></enter>   |  |                                |                         |
|  | Index Number:      | □ Not Applicable  |  | Student Achi  |             |   | ident Progress                      |  | Index 3: Closing Ac   | chievement Gaps  | □ Index 4:                     | Postsecondary Readiness |
| CSF 1-Improve Academic Performance / ESEA TP: Strengthen the School's Instruction  CSF 2-Quality Data to Drive Instruction/ESEA TP: Use of Data to Inform Instruction  CSF 3-Leadership Effectiveness/ESEA TP: Provide Strong Leadership  ESEA Turnaround Principles (TPs)  Major Systems  CSF 4-Increased Learning Time/ESEA TP: Redesigned School Calendar  CSF 5-Family/Community Engagement/ESEA TP: Ongoing Family and Community Engagement  CSF 6-School Climate/ESEA TP: Improve School Environment  CSF 7-Teacher Quality/ESEA TP: Ensure Effective Teachers |                    |   |  |   |             | struction   | How will addres impact the index    | sing this  | <pre>croot cause or/CSF?</pre> <pre><enter text=""></enter></pre> |  |                                |                         |
|  |                    |   |  |   |             | Inte  | rventions by                        | Quarte   | er  |  |                                |                         |
| Districts and 1st Y  |                    | Oct)<br>are required to provide,<br>plished for quarter 1 (Q1). |  | Q2 (Nov,  | , Dec, Jan) |   |                                     |  | Q3 (Feb, Mar)   |  | Q4                             | (April, May, June)      |

| Responses to these questions  | Education Service Center (ESC) Number:   | District I  | Number: District I                           | lame:   | Campus Number:  | Campus Name:  |                                     |
|---|--|---|--|---|---|---|-------------------------------------|
| have been from the Contact-<br>Intervention Information Tab   | Region 18  | 068   | 9901 Ector Cou                               | nty ISD   | 068901042 Be  | onham Middle School   |                                     |
|   |  |   | Needs Assessment Summary                     | and Improver  | nent Plan   |   | •                                   |
| Q1 Goal:  |  | Q2 Goal:  |  | Q3 Goal:  |   | Q4 Goal:  |                                     |
|   | Q1 Interventions   |   | Q2 Interventions                             |   | Q3 Interventions  | C   | 24 Interventions                    |
| 1)  |  | 1)  |  | 1)  |   | 1)  |                                     |
| 2)  |  | 2)  |  |   |   | 2)  |                                     |
| 3)  |  | 3)  |  | 3)  |   | 3)  |                                     |
| What data will be co  | ollected to monitor interventions in Q1?   | What data will  | be collected to monitor interventions in Q2? | What data will be   | e collected to monitor interventions in Q3?                 | What data was collec  | ted to monitor interventions in Q4? |
| 1)  |  | 1)  |  | 1)  |   | 1)  |                                     |
| 2)  |  | 2)  |  | 2)  | 2)  |   |                                     |
| 3)  |  | 3)  |  | 3)  |   | 3)  |                                     |
| 4)  |  | 4)  |  | 4)  |   | 4)  |                                     |
|   |  |   | End of Quarter R                             | eporting  |   |   |                                     |
| Districts and 1st Year II   | Q1 Report<br>R campuses are not required to complete the<br>quarter 1 (Q1) report. |   | Q2 Report                                    |   | Q3 Report   |   | Q4 Report                           |
| Did you meet this quarter's goal?   | Select   | Did you meet this quarter's goal?   | Select                                       | Did you meet this quarter's goal?   | Select  | Did you meet this quarter's goal?   | Select                              |
| Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>  | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>                      | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>                                     | Provide the data or<br>evidence that supports<br>meeting or making<br>progress toward this<br>quarterly goal. | <enter text=""></enter>             |
| Are you on track to meet the annual goal?   | Select   | Are you on track to meet the annual goal?   | Select                                       | Are you on track to meet the annual goal?   | Select  | Did you meet your annual goal?  | Select                              |
| What, if any, adjustments<br>must be made in order to<br>meet the annual goal?                                | st be made in order to <enter additional="" any="" here="" information=""></enter> |   |  |   | <enter additional="" any="" here="" information=""></enter> | <enter additional="" any="" info<="" td=""><td>rmation here&gt;</td></enter>                                  | rmation here>                       |
|   |  |   | End of Year Re                               | porting   |   |   |                                     |

| Responses to these questions have been from the Contact- | Education Service Center (ESC) Number:   | District Number:   |     | District Name:                   |       |           | Campus Number:  | :                            |                      | Campus Name:            |   |
|--|--|--|-----|----------------------------------|-------|-----------|-----------------|------------------------------|----------------------|-------------------------|---|
| Intervention Information Tab                             | Region 18  | 068901   |     | Ector County ISD                 |       |           | 068901042       |                              | Bonham Middle School |                         | I |
|  |  | Needs Ass  | ess | ment Summary and                 | d Imp | roven     | nent Plan       |                              |                      |                         |   |
|  |  |  | _   | Data Analysis Process            |       | (Specific | ) Interventions |                              |                      |                         |   |
|  |  | If you <u>did</u> meet your annual goal, to what do you attribute your     |     | Data Quality                     |       | Annual G  |                 | Please provid                | e                    |                         |   |
| Provide the data that supports your 4th                  | <enter text=""></enter>  | success?   |     | Appropriate Strategy             |       | CSF/ESE   | A Turnaround    | dditional information        |                      | <enter text=""></enter> |   |
| quarter status of this annual goal.                      |  | If you <u>did not</u> meet your annual goal, to what do you attribute your |     | Identification of Root Cause     |       | Training  |                 | Other or for a selected elem |                      |                         |   |
|  |  | lack of success?   |     | Quarterly Planning Process       |       | Other     |                 |                              |                      |                         |   |
|  |  |  |     | Ongoing Monitoring and Intervent | ons   |           |                 |                              |                      |                         |   |
|  | how the identified elements and their impact<br>of success, will inform/influence your planning<br>year. | <enter text=""></enter>  |     |                                  |       |           |                 |                              |                      |                         |   |

## FIR Sustainability Questions

If your campus is identified as formerly Improvement Required (FIR), please answer the following questions regarding the sustainability of strategies that led to your success.

| What strategies, processes, and/or systems has the campus identified as making the greatest impact in moving the campus to a Met Standard rating? | <enter text=""></enter> |
|---|-------------------------|
| What plans are in place to sustain these strategies, processes, and/or systems?   | <enter text=""></enter> |