



Academic Intervention Plan

Appendix AA

Student's Name _____ School Year _____

Date of Birth _____ Grade _____

The following areas that foster academic success for the student must be described in detail. If a particular area listed does not apply, enter "Not Applicable" next to the area. The completed plan is attached to the student's final report card and filed in the student's academic file. This plan must be reviewed and modified, if necessary, on a quarterly basis. Designated signatures as indicated at the bottom are to be included as part of the finalized plan.

- Curriculum Interventions
- Support Services
- Environmental Accommodations
- Lesson Accommodations
- Modified Assignments
- Organization and Study Skills
- Other

Required signatures:

- Parent(s) _____ Date _____
- Teacher(s) _____ Date _____
- Principal _____ Date _____