Student Name		DOB		Date	

SST Process

First SST Meeting:

- ☐ Student's general education teacher & SST facilitator complete a Student Study Team Referral Form
- ☐ SST meeting called to discuss the student's educational progress
- ☐ SST facilitator sends out meeting invitation to SST members:
  - ☐ General education teacher ☐ Counselor ☐ ELD Specialist (if student is an ELL)
  - ☐ Teachers who work with student ☐ Student (when appropriate) ☐ Title 1 &/or LAP (if academic concern)
  - ☐ Other general education colleagues ☐ Nurse (if issue is medical)
  - ☐ Administrator ☐ Parent/Guardian (parent/guardian unable to attend, document contact attempts):

____/____/____ ____/____/____

(Date/time/method) (Date/time/method)

- ☐ *Student Study Team Minutes taken during meeting*
- ☐ The team:
  - ☐ Brainstorms accommodation and interventions related to the area(s) of concern
  - ☐ Determines the intervention(s) to use for the next 6 weeks (minimum)
  - ☐ Determines person(s) responsible for implementation
  - ☐ Determines tracking method and person(s) responsible for tracking data
  - ☐ Sets follow-up date to discuss outcomes:

    Date/time for next team meeting: ____/____

    (If interventions are effective, the team may decide to cancel/reschedule meeting)

- ☐ *Student Study Team Minutes distributed to all teachers/specialists who work with the student*
- ☐ Intervention data will be collected and summarized/graphed for next meeting

Second SST Meeting:

- ☐ SST meeting called to discuss student's educational progress & response to interventions
- ☐ Summarized/graphed data (minimum of 6 weeks of progress monitoring) distributed to team prior to meeting
- ☐ SST facilitator sends meeting invitation to SST members:
  - ☐ General education teacher ☐ Counselor ☐ ELD Specialist (if student is an ELL)
  - ☐ Teachers who work with student ☐ Student (when appropriate) ☐ Title 1 &/or LAP (if academic concern)
  - ☐ Other general education colleagues ☐ Nurse (if issue is medical)
  - ☐ Administrator ☐ Parent/Guardian (parent/guardian unable to attend, document contact attempts):

2/4/25 / 3:00 / in-person ____/____/____

(Date/time/method) (Date/time/method)

- ☐ *Student Study Team Minutes taken during meeting*
- ☐ Based on intervention data & team input (written input from absent team members), team determines to:
  - ☐ Alter interventions by adjusting frequency/intensity/duration
    - ☐ Track data for the next 3 weeks (minimum)
    - ☐ Determine person(s) responsible for implementation
    - ☐ Determines tracking method & person(s) responsible for tracking data
    - ☐ Set follow-up date to discuss outcomes

      Date/time for next team meeting: ____/____

      (If interventions are effective, the team may decide to cancel/reschedule meeting)
    - ☐ Intervention data will be collected and summarized/graphed for next meeting
  - ☐ Choose alternative intervention
    - ☐ Brainstorms accommodations/interventions related to area(s) of concern
    - ☐ Track data for the next 6 weeks (minimum) for new interventions
    - ☐ Determines person(s) responsible for implementation
    - ☐ Determines tracking method & person(s) responsible for tracking data
    - ☐ Set follow-up date to discuss outcomes

      Date/time for next team meeting: ____/____

      (If interventions are effective, the team may decide to cancel/reschedule meeting)
    - ☐ Intervention data will be collected and summarized/graphed for next meeting
- ☐ *Student Study Team Minutes distributed to all teachers/specialists who work with the student*

Third SST Meeting:

☐ SST meeting called to discuss student's educational progress & response to interventions

- ☐ SST facilitator sends meeting invitation to SST members:
  - ☒ General education teacher ☐ Counselor ☐ ELD Specialist (if student is an ELL)
  - ☐ Teachers who work with student ☐ Student (when appropriate) ☐ Title 1 &/or LAP (if academic concern)
  - ☐ Other general education colleagues ☐ Nurse (if issue is medical) ☐ SLP/OT/PT (if therapy related concerns)
  - ☐ Administrator ☐ Parent/Guardian (parent/guardian unable to attend, document contact attempts):
  - ☐ School Psychologist ____/____/____ ____/____/____

    (Attendance required if SpEd Referral is anticipated) *(Date/time/method) (Date/time/method)*
- ☐ *Student Study Team Minutes taken during meeting*

☐ Based on intervention data & team input (written input from absent team members), team determines to:

- ☐ Alter interventions by adjusting frequency/intensity/duration
  - ☐ Track data for the next 3 weeks (minimum)
  - ☐ Determine person(s) responsible for implementation
  - ☐ Determines tracking method and person(s) responsible for tracking data
  - ☐ Set follow-up date to discuss outcomes

    Date/time for next team meeting: ____/____

    (If interventions are effective, the team may decide to cancel/reschedule meeting)
  - ☐ Intervention data will be collected and summarized (graphed) for the next meeting
- ☐ Choose alternative intervention
  - ☐ Brainstorms accommodation and interventions related to the area(s) of concern
  - ☐ Track data for the next 6 weeks (minimum) for new interventions
  - ☐ Determines person(s) responsible for implementation
  - ☐ Determines tracking method and person(s) responsible for tracking data
  - ☐ Set follow-up to discuss outcomes

    Date/time for next team meeting: ____/____

    (If interventions are effective, the team may decide to cancel/reschedule meeting)
  - ☐ Intervention data will be collected and summarized/graphed for next meeting
- ☐ Consider referral for a Section 504 determination meeting due to suspected:
  - Physical or mental impairment that substantially affects a major life activity and a need for an accommodation plan
- ☐ Request Special Education Referral due to suspected:
  - Identified disability
  - Adverse educational impact due to the disability
  - Need for specially designed instruction

☐ Student Study Team Minutes distributed to all teachers/specialists who work with student (indicating team decision and next steps as appropriate):

- ☐ Additional SST date indicated above

☐ SST meeting minutes & SST Referral Form given to building Section 504 contact person to set determination meeting

☐ SST meeting minutes & SST Referral Form given to School Psychologist for special education referral