



INTERVENTION PLAN: EDUCATION IMPROVEMENT PROGRAM

DEPARTMENT OF PUBLIC INSTRUCTION
 SCHOOL APPROVAL AND ACCREDITATION
 SFN 54223 (Rev. 7/2009)

RETURN TO:
 Department of Public Instruction,
 School Approval and Accreditation
 600 East Boulevard Ave., Dept. 201
 Bismarck, ND 58505-0440

DUE: Within one month after receiving the External Team Chair Report. Duplicate form as needed. (Note: Boxes will expand to accommodate your information.)

School Name				City			
Contact Person				Telephone Number			
School's Vision Statement							
Target Area #1				Target Area #2			
Indicate assessment data used to determine Target Area #1 (e.g. NDSA, MAP, DIBELS, surveys, grades, etc.)				Indicate assessment data used to determine Target Area #2 (e.g. NDSA, MAP, DIBELS, surveys, grades, etc.)			
1.				1.			
2.				2.			
3.				3.			
4.				4.			
Expected Outcome (e.g., At the end of the week/month/year...)				Expected Outcome (e.g., At the end of the week/month/year...)			
List all Intervention Activities to be Implemented for Target Area #1	Persons Responsible	Timeframe (daily, weekly, monthly, quarterly)	Staff Development Activities	List all Intervention Activities to be Implemented for Target Area #2	Persons Responsible	Timeframe (daily, weekly, monthly, quarterly)	Staff Development Activities