**Attendance Intervention Plan**

This intervention plan is designed to identify core reason or reasons for current attendance patterns as well as to document steps taken by a school in attempts to improve attendance as well as to develop plans to improve future attendance.

Plan Date: Click or tap here to enter text.

**Student and Family Information**

Student Name: Click or tap here to enter text.

School: Click or tap here to enter text.

Parent/Legal Guardian: Click or tap here to enter text.

Home Language: Click or tap here to enter text.

Home Phone: Click or tap here to enter text. Cell Phone: Click or tap here to enter text.

**Root Causes for Attendance Issue**

1. Summary of Attendance Concern (include number of days absent and other interventions that have been tried for this student.

Click or tap here to enter text.

1. Has the School Refusal Assessment Scale been completed?

[ ] Parent form [ ] Student Form

1. What are the likely core reasons for poor attendance?

|  |  |  |
| --- | --- | --- |
| Transportation Issues | Safety Issues | Health Issues |
| Distance from school [ ] Cost of transportation [ ] Access to transportation [ ]  | Safe route to school [ ] Safety at school [ ] Safety before/after school [ ]  | Immunizations [ ] Pregnancy [ ] Student medical issue [ ] Family medical issue [ ] Substance abuse [ ] Disability [ ]  |
| Academic Issues | Home Issues | Social Issues |
| Problem with school staff [ ] Poor academic performance [ ] School discipline [ ] Suspension [ ] Credit Deficiencies [ ]  | Care for siblings [ ] Physical abuse [ ] Homelessness [ ] Domestic violence [ ] Runaway [ ] Neglect [ ] Student is also a parent [ ]  | Gender intimidation [ ] Gang activity [ ] Financial issue [ ] Peer relationships [ ] Bullying [ ] Personal relationships [ ]  |

1. Please describe any attendance problems not detailed above:

Click or tap here to enter text.

**Intervention Steps**

1. Please describe the intervention(s) that the team is recommending be put into place for this student. Include the name of the staff member who will provide the intervention support.

Click or tap here to enter text.

1. Actions to be taken by the student to improve attendance habits:
	1. [ ] Student will ensure that he or she is aware on time and ready for school.
	2. [ ]  Student agrees to attend school on time, every day, unless excused by parent or excluded for health reasons.
	3. [ ]  Student agrees to provide written documentation for all medical excuses (from parent or from medical, mental, or behavioral health professional.)
	4. [ ]  Other Click or tap here to enter text.
2. Actions to be taken by the parent/legal guardian to improve attendance:
	1. [ ]  Parent will ensure that the student has an established nighttime and morning routine enabling them to be prepared for school each day.
	2. [ ]  Parent will ensure that the student has transportation to and from school each day.
	3. [ ]  Parent will provide written documentation for all absences involving medical, mental, or behavioral health professionals.
	4. [ ]  Parent will notify the school via telephone and note for all student absences.
	5. [ ]  Other Click or tap here to enter text.
3. Actions to be taken by the school to improve attendance:
	1. [ ]  Develop an attendance plan.
	2. [ ]  Monitor the student’s attendance daily, communicate unexpected absences to the parent/guardian.
	3. [ ]  Implement Tier 2 and Tier 3 interventions to assist student with core reasons identified in step 3.
	4. [ ]  Regularly monitor the effectiveness of intervention, revise the plan as appropriate.
4. Actions to be taken in the event that attendance improves as a result of this plan:
	1. [ ]  Incentives to be earned by the student Click or tap here to enter text.
	2. [ ]  Regularly review core reasons for attendance, ensure that interventions continue as needed.
5. Actions to be taken in the event that attendance does not improve:
	1. [ ]  Revision to attendance plan to occur on (date) Click or tap here to enter text.
	2. [ ]  School will contact the parent/legal guardian regularly regarding continued attendance concerns.
	3. [ ]  Student will be referred to truancy officer for Tier 3 intervention.
	4. [ ]  Student will be referred to SARB/ESARB

**Signatures**

Plan Approval Date: Click or tap here to enter text.

Student Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Parent Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School Administrator Signature: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Attendance Conference Documentation**

First attempt to contact parent/guardian

 Date: Click or tap here to enter text. Successful? [ ]  Yes [ ]  No

[ ]  Phone Call [ ]  USPS Mail [ ]  Certified Letter [ ]  Email

[ ]  Other (specify) Click or tap here to enter text.

Second attempt to contact parent/guardian

 Date: Click or tap here to enter text. Successful? [ ]  Yes [ ]  No

[ ]  Phone Call [ ]  USPS Mail [ ]  Certified Letter [ ]  Email

[ ]  Other (specify) Click or tap here to enter text.

Third attempt to contact parent/guardian

 Date: Click or tap here to enter text. Successful? [ ]  Yes [ ]  No

[ ]  Phone Call [ ]  USPS Mail [ ]  Certified Letter [ ]  Email

[ ]  Other (specify) Click or tap here to enter text.