

## Tier 2 and Tier 3 Fidelity Checklist

Observer:	Interventionist:			_	
School:				_	
Start Time:	End Time:			_	
Program:	Skill(s):			_	
Student Name:					
The Intervention is:					
Description		Yes	No		
Provided by or supervised by a highly qualified teacher with training in					
area of intervention					
Targeted one specific area of need/deficit/skill per child					
Targeted as a skill that was identified as an	area of need by an				
assessment					
Occurred in addition to Tier I instruction					
Delivered in a small-group format					
Delivered with fidelity					
Delivered with evidence based materials					
Provided the appropriate amount of time daily					
Provided the appropriate amount of time weekly					
Progress monitored at least every other w	eek				
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I certify that everything reported on this fo	orm is accurate and correct and	that interve	entions are	being implemented	d with
integrity at least 80% of the time.					
Interportionist Signature		Dete			
Interventionist Signature			Date		
Observer Signature			Date		