

RTI² Intervention Record for School Records

School Name: _____ School Address/Phone: _____

Student Name: _____ Student Address/Phone: _____

Current Grade: _____ Gender: _____

Date Entered School: _____ Date Exited School: _____

Did student receive academic interventions? YES NO

Universal Screening Data

| Type (Name) of Universal Screening | Percentile Score | Date Given |
|------------------------------------|------------------|------------|
| | | |
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| | | |

The following interventions were provided to this student: (attach additional documentation as needed)

| Intervention Type | Area of Deficit | Duration | Progress Monitoring Data | Fidelity of Implementation |
|-------------------|-----------------|----------|--------------------------|----------------------------|
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Signature: _____

Title: _____