Twin Valley Community Local Schools

Absence Intervention Team Plan and Contract

8/10/2017

Ohio law requires schools to take measures to assist students and his/her family in resolving an attendance problem. Documenting these interventions is necessary and should include dates as well as comments.

The purpose of the Absence Intervention Team Intervention Plan is to:

* Identify the reason(s) for a student’s truancy,
* Document the previous steps taken by the school to address the student’s truancy problem, and
* Develop the plans necessary to improve the student’s future attendance.

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| --- | --- | --- | --- |
| **Student Information** | | | |
| **Student’s Name:** |  | **DOB:** |  |
| **School:** |  | **Address:** |  |
| **Parent/Guardian:** |  | **Primary Language:** |  |
| **Primary Phone:** |  | **Secondary Phone:** |  |

|  |  |
| --- | --- |
| **Student’s Attendance History** | |
| **# of Hours Absent =** | (See attached attendance document) |
| **Past Problems** |  |
| **Previous Schools** |  |
| **Other** |  |

The following school individuals should be utilized in the intervention process:

|  |  |  |  |
| --- | --- | --- | --- |
| **Intervention Team** | | | |
| **Designated Team Leader** |  | **Teacher** |  |
| **Intervention Planning Participants** |  | **Special Education Teacher (if applicable)** |  |
|  |
| **Parent/Guardian 1** |  | **Parent/Guardian 2** |  |
| **Other(s)** |  |  |  |

Conference Contact Documentation

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **First Attempt to Contact Parent/Guardian** | | **Date:** | |  | | **Successful attempt?** | | **Yes** **No** |
|  | |  | |  | |  | |  |
| **Phone Call** | **Letter** | | **E-mail** | | **Other** | |  | |

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Second Attempt to Contact Parent/Guardian** | | **Date:** | |  | | **Successful attempt?** | | **Yes No** |
|  | |  | |  | |  | |  |
| **Phone Call** | **Letter** | | **E-mail** | | **Other** | |  | |

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| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **First Attempt to Contact Parent/Guardian** | | **Date:** | |  | | **Successful attempt?** | | **Yes No** |
|  | |  | |  | |  | |  |
| **Phone Call** | **Letter** | | **E-mail** | | **Other** | |  | |

**Parent attended Attendance Intervention Plan conference?**  **Yes** No

**1. What is the nature of the student’s attendance problem? *Check all that apply***

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| --- | --- | --- | --- |
| ***Transportation Issue*** | **Student** | **Parent** | **Team** |
| No money for transportation |  |  |  |
| No reliable method of transportation |  |  |  |
| Too far to travel |  |  |  |

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| ***Academic/School Issue*** | **Student** | **Parent** | **Team** |
| Problems with teacher or other school personnel |  |  |  |
| Poor academic performance |  |  |  |
| School discipline |  |  |  |
| Suspended from school |  |  |  |

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| --- | --- | --- | --- |
| ***Student Characteristics*** | **Student** | **Parent** | **Team** |
| Low Achievement |  |  |  |
| Parenthood |  |  |  |
| Drug/alcohol problem |  |  |  |
| Low attendance |  |  |  |
| Credit deficiencies |  |  |  |
| Health-related issues |  |  |  |
| High failure rate |  |  |  |
| Discipline referral |  |  |  |
| Low self-esteem |  |  |  |

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| --- | --- | --- | --- |
| ***Social Issue*** | **Student** | **Parent** | **Team** |
| Gender intimidation |  |  |  |
| Gang activity |  |  |  |
| Financial issues |  |  |  |
| Difficult peer relationships |  |  |  |
| Bullying |  |  |  |
| Personal relationship |  |  |  |

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| --- | --- | --- | --- |
| ***Safety Issue*** | **Student** | **Parent** | **Team** |
| Dangerous neighborhood |  |  |  |
| School not safe |  |  |  |
| Gangs |  |  |  |
| School problem |  |  |  |

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| --- | --- | --- | --- |
| ***Home Issue*** | **Student** | **Parent** | **Team** |
| Tending to younger siblings |  |  |  |
| Parent/guardian not well |  |  |  |
| Physical/sexual abuse at home |  |  |  |
| Homeless |  |  |  |
| Substance abuse in the home |  |  |  |
| Domestic violence |  |  |  |
| Runaway |  |  |  |
| Date violence |  |  |  |
| Neglect |  |  |  |
| Student is also a parent |  |  |  |

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| --- | --- | --- | --- |
| ***Student Characteristics*** | **Student** | **Parent** | **Team** |
| Other: |  |  |  |
| Other: |  |  |  |
| Other: |  |  |  |
| Other: |  |  |  |

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| --- | --- | --- | --- |
|  | **Student** | **Parent** | **Team** |
| **Completion Date** |  |  |  |

Specify details of attendance problems checked; describe applicable problems not listed above:

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| --- |
|  |

3. Collaborative recommendations of the student, parent/guardian/and school personnel to solve the attendance problem:

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|  |

4. Actions to be taken by the parent/guardian to resolve the causes of unlawful absences:

|  |  |  |
| --- | --- | --- |
|  | Parent will ensure student is awake and prepared for school each day. | |
|  | Parent will ensure student has transportation to/from school each day. | |
|  | Parent will send written note or medical excuses when student is absent for a valid reason. | |
|  | Parent will notify school by phone or note when student is absent. | |
|  | Other |  |

5. Actions to be taken by the student to resolve the causes of unlawful absences:

|  |  |  |
| --- | --- | --- |
|  | Student will take necessary steps to ensure he/she is awake and ready for school. | |
|  | Student will attend school daily and be absent only for lawful reasons. | |
|  | Student will provide written note or medical excuse for all lawful absences. | |
|  | Other |  |

6. Actions to be taken by intervention team members:

|  |  |  |
| --- | --- | --- |
|  | Develop an Attendance Intervention Plan. | |
|  | Monitor student’s attendance at school. | |
|  | Review and update Attendance Intervention Plan as appropriate. | |
|  | Refer student to school administration for additional follow-up by the district Attendance Officer. | |
|  | Other |  |

7. Actions to be taken in the event unlawful absences continue:

|  |  |  |
| --- | --- | --- |
|  | School officials review and update Attendance Intervention Plan. | |
|  | School officials will refer to the appropriate outside agency for intervention. | |
|  | Other |  |

8. Referred to Social Service Agency:

|  |  |  |  |
| --- | --- | --- | --- |
| Juvenile Court | Children Services | Other: |  |

9. Date of next meeting to review progress of attendance improvement recommendations:

|  |
| --- |
|  |

10. Weekly attendance to be monitored by:

|  |
| --- |
|  |

11. Additional information

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| --- |
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| **PLAN APPROVAL DATE:** | |  | | | |
| **Student’s Signature** |  | | | **Parent/Guardian’s Signature** |  |
| **School Official’s Signature** | | |  | **Parent/Guardian’s Signature** |  |