

## Personalized Education Plan

The purpose of this plan is to provide information and strategies for parents, students, and educators to work together to help the students reach their dreams. Prior to conference time, the teacher should fill out all basic student information, such as name, academic achievement scores, attendance, and career goal. During the conference, the student, parent, and teacher fill out the portion that reflects what each stakeholder's responsibility will be.

School year: \_\_\_\_\_

Student's name: \_\_\_\_\_ Birth date: \_\_\_\_\_

Grade level: \_\_\_\_\_ Teacher: \_\_\_\_\_

Parent or guardian name: \_\_\_\_\_ Telephone: \_\_\_\_\_

Reading grade level: \_\_\_\_\_ Math grade level: \_\_\_\_\_ Writing grade level: \_\_\_\_\_

CSAP scores (third): Reading \_\_\_\_\_ Writing \_\_\_\_\_ Math \_\_\_\_\_

English language development: 1 2 3 4 5

Academic goal: \_\_\_\_\_

Attendance: Days present \_\_\_\_\_ Days tardy \_\_\_\_\_

### Key

#### CSAP Scoring:

Unsatisfactory—U—1—**lowest**  
Partially Proficient—PP—2  
Proficient—P—3  
Advance—A—4—**highest**

#### Ed Performance Scoring:

Below Average—1—**lowest**  
Low Average—2  
High Average—3  
Above Average—4—**highest**

#### DIBELS—Reading Fluency:

Below—1—**lowest**  
Strategic—2  
Average—3—**highest**

#### Daze—Reading Comprehension:

Below—1—**lowest**  
Strategic—2  
Average—3—**highest**

#### English Language Development:

Non-English  
Proficient—1—**lowest**  
Non-English Proficient—2  
Limited-English Proficient—3  
Limited-English Proficient—4  
Fluent English  
Proficient—5—**highest**

### Classroom/School Responsibilities (choose 3):

- |   |  |
|---|--|
| <input type="checkbox"/> Test-taking strategies   | <input type="checkbox"/> Writing skills        |
| <input type="checkbox"/> Fluency passages         | <input type="checkbox"/> Progress reports      |
| <input type="checkbox"/> Comprehension strategies | <input type="checkbox"/> Extended-day learning |
| <input type="checkbox"/> English development      | <input type="checkbox"/> Reading counts        |
| <input type="checkbox"/> Math skills              | <input type="checkbox"/> Other:                |

Teacher Signature: \_\_\_\_\_

**Family Responsibilities (choose 3):**

- |  |   |
|--|---|
| <input type="checkbox"/> Ensure that your child reads no less than thirty minutes every night. | <input type="checkbox"/> Create a homework routine.                     |
| <input type="checkbox"/> Sit with your child when he or she is working on homework.            | <input type="checkbox"/> Use quiet time.                                |
| <input type="checkbox"/> Ask questions about your child's nightly reading.                     | <input type="checkbox"/> Have siblings assist with homework.            |
| <input type="checkbox"/> Review graded assignments.  | <input type="checkbox"/> Enforce an early bedtime.                      |
| <input type="checkbox"/> Practice sight words.   | <input type="checkbox"/> Take away privileges.                          |
| <input type="checkbox"/> Use math facts flashcards.  | <input type="checkbox"/> Add back privileges as student makes progress. |
| <input type="checkbox"/> Make sure your child is well rested.                                  | <input type="checkbox"/> Attend conferences.                            |
|  | <input type="checkbox"/> Talk with your child.                          |
|  | <input type="checkbox"/> Other:   |

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

**Student Responsibilities and Commitments (choose 3):**

- |   |   |
|---|---|
| <input type="checkbox"/> Ask questions in class.            | <input type="checkbox"/> Organize your time.                        |
| <input type="checkbox"/> Do the work in class.              | <input type="checkbox"/> Use your agenda to write assignments down. |
| <input type="checkbox"/> Turn in all assignments.           | <input type="checkbox"/> Use your agenda to write due dates down.   |
| <input type="checkbox"/> Increase quality of work.          | <input type="checkbox"/> Bring back progress reports.               |
| <input type="checkbox"/> Have a positive attitude.          | <input type="checkbox"/> Other:                                     |
| <input type="checkbox"/> Believe in yourself—you can do it. |   |
| <input type="checkbox"/> Get enough sleep.                  |   |

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

*Source: Adapted from Fort Logan Elementary School, Sheridan, Colorado. Used with permission.*