ACADEMIC AND BEHAVIOR SUPPORT PLAN FOR STUDENTS IN FOSTER CARE

Student Name		Student Number	Birth Date	
School Year	School	Grade	Teacher	
School Counselor		Foster Care Advocate		
Department of Family Services Case Worker				
		On-Campus Trusted Adult(s)	
Educational Decision M	laker			
Mathematics Strengths:				
onengins.				
Areas in need of impro	vement:			
Focus:				
Reading				
Strengths:				
Areas in need of impro	vement·			
Focus:				
Multip o				
Writing Strengths:				
on origino.				
Areas in need of improv	vement:			
Focus:				
Social/Emotional Rea	diness			
Strengths:	u			
Anna in ma a distin				
Areas in need of impro	vernent:			
Focus:				

Date	

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Summary of School Records

Specialized Program (If Applicable)	Yes	No	Notes
Individualized Education Program			
504 Plan			
Other Behavior Plan			
English Language Learner			
Health/Medications/Glasses (Specify)			
	-	1	
Additional Supports	Yes	No	Notes
Intermittent Attendance			
Enrollment History/Retention			
Behavior			
Resonse to Intervention			
De-escalation Strategies			
Notes			