

**Support Team Education Plan (STEP) Meeting Agenda**

School Name \_\_\_\_\_ Meeting Date \_\_\_\_\_

Student \_\_\_\_\_ Date of Birth \_\_\_\_\_ Age \_\_\_\_\_

Date of Referral \_\_\_\_\_ School Year \_\_\_\_\_ Student's Grade \_\_\_\_\_

Student's Teacher \_\_\_\_\_

**STEP TEAM MEMBERS Planning to Attend:**

Name: \_\_\_\_\_ Relationship/Position: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship/Position: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship/Position: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship/Position: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship/Position: \_\_\_\_\_

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Name: \_\_\_\_\_ Relationship/Position: \_\_\_\_\_

Name: \_\_\_\_\_ Relationship/Position: \_\_\_\_\_

**AGENDA**

- Introduce STEP team members and relationship to student
- Determine the student's strengths
- Analyze the gathered information and data regarding the student
- Prioritize concerns regarding the student's classroom progress
- Create an action plan that includes the following:
  - Prioritize support strategies, including classroom, school, home, and other strategies
  - Identify the person responsible for implementing each strategy or adjustment
  - Develop a timeline to implement the supports
  - Set dates for follow-up evaluations and meetings
- Complete all records/paperwork/documentation
- Provide copy to Parent
- Adjourn

