

HS Team Meeting Documentation Form

Date: _____ Time: _____

Attendees: Facilitator: _____ Timer: _____

Information Gatherer: _____

Recap of Last Meeting:

Assessments/Data:

Instructional Practice:

Action Step

Person Responsible

Deadline

--	--	--

Action Step

Person Responsible

Deadline

--	--	--

Action Step

Person Responsible

Deadline

--	--	--