



THE SCHOOL DISTRICT OF PALM BEACH COUNTY  
EXCEPTIONAL STUDENT EDUCATION  
**Progress Monitoring Plan (PMP) for Grades 6-12**

☐ Individual PMP    ☒ School-wide PMP

Demographic Information is for Individual PMPs ONLY:

|                                |                                  |                                                   |                                                                                                                                                                                                                          |               |       |
|--------------------------------|----------------------------------|---------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------|-------|
| Student #                      | Student First Name               | M.I.                                              | Student Last Name                                                                                                                                                                                                        | Date of Birth | Grade |
| School #<br>1571               | School Name<br>SouthTech Academy | ELL Status<br><input checked="" type="checkbox"/> | Previous Status<br><input type="checkbox"/> Promoted <input type="checkbox"/> Retained <input type="checkbox"/> ESE <input type="checkbox"/> 504 <input type="checkbox"/> Previous PMP <input type="checkbox"/> ELL Plan |               |       |
| Test Scores/Assessment Results |                                  |                                                   |                                                                                                                                                                                                                          |               |       |

If you have selected "Other" as an option, please enter the evidence based system, program or strategy you are using for intervention under the corresponding target area.

☒ **READING**

Desired Level 3  
FAST (Grades 6-12)

**Diagnostic Assessments**

- ☒ Standards Assessment  
☒ Diagnostic Tests Achieve 3000  
☐ Other\* \_\_\_\_\_

**Focus of Remediation**

- ☒ Oral Language/Expression Assessment  
☒ Comprehension  
☒ Phonological Awareness  
☒ Phonics  
☒ Text Processing

**Evidence Based Systems, Programs, & Strategies**

- ☐ Oral Language Development  
Phonological Awareness Supplemental  
Phonological Awareness Intensive  
Phonics Supplemental  
Phonics Intensive  
Fluency Supplemental  
Achieve 3000  
Fluency Intensive  
Comprehension Supplemental  
Achieve 3000  
Comprehension Intensive  
Achieve 3000 Teacher Directed Lessons

☒ **WRITING**

Desired Level 7 BEST Writing  
Minimum PBPA Score of a 7 Overall

**Diagnostic Assessments**

- ☒ Extended Writing Project  
☐ PBPA

**Focus of Remediation**

- ☐ Purpose/Structure  
☐ Development  
☐ Language

**Evidence Based Systems, Programs, & Strategies**

Written Language / Expression  
Supplemental Written Language/ Expression

**Parent/Guardian Commitment/Contribution** Check all that apply.

- ☒ Monitor Attendance/Tardies  
☒ Encourage Reading at Home  
☒ Check Homework  
☒ Reinforce Skills  
☐ Sign Daily/Weekly Notes  
☒ Attend Parent Meetings/Conferences

## Progress Monitoring Plan (PMP) for Grades 6-12

|           |                    |                   |
|-----------|--------------------|-------------------|
| Student # | Student First Name | Student Last Name |
|-----------|--------------------|-------------------|

If you have selected "Other" as an option, please enter the evidence based system, program or strategy you are using for intervention under the corresponding target area.

☒ **MATH**

Desired Level Alg/Geo Level 3

F.A.S.T (Gr. 6 Math-Gr.8 Pre-Algebra)/EOC's (Algebra 1 & Geometry)

### Diagnostic Assessments

☒ Standards Assessment

☐ Diagnostic Assessments

☐ Other\* \_\_\_\_\_

### Focus of Remediation

☒ Algebra

☐ Calculus

☐ Expressions/Equations

☐ Functions

☒ Geometry

☒ The Number System

☒ Ratios/Proportional Relationships

☐ Statistics/Probability

### Evidence Based Systems, Programs, & Strategies

Math Fluency Supplemental

IXL (6-12)

Math Fluency Intensive

IXL (6-12)

Math Computation Supplemental

IXL (6-12)

Math Computation Intensive

IXL (6-12)

Math Concepts and Applications - Supplemental

IXL (6-12)

Math Concepts and Applications - Intensive

IXL (6-12)

☐ **SCIENCE**

Desired Level or EOC \_\_\_\_\_

Minimum SSA Level 3

### Diagnostic Assessments

☐ Grade 6, 7, 8, or Biology FSQs & USAs

☐ Biology 1 Midterm Assessment

☐ Grade 6 or 7 End of Year Assessment

☐ Grade 6 or 7 Diagnostic Assessment

☐ Grade 8 Diagnostic Assessment

☐ Grade 8 SSA Benchmark Review Assessments

☐ Other\* \_\_\_\_\_

### Focus of Remediation

☐ Grade 6 Science Benchmarks

☐ Grade 7 Science Benchmarks

☐ Grade 8 Science Benchmarks

☐ Biology 1 Benchmarks

☐ Reading in Science

☐ Writing in Science

☐ Other\* \_\_\_\_\_

### Evidence Based Systems, Programs, & Strategies

Instructional Resources/Strategies

\_\_\_\_\_

Progress Monitoring Tools

\_\_\_\_\_

### Delivery Model

☐ Small Group Tutorials

☐ Digital Resources

☐ Student Centered Instruction

☐ Inquiry/5E model of instruction

\*\* Utilize the diagnostic assessments and evidence based resources listed above to monitor student progress.

**Progress Monitoring - List frequency, goal and methods.** State law requires that schools monitor student's progress toward meeting the desired level of performance.

|                |                                                                                                                                                         |
|----------------|---------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Reading</b> | Frequency: <u>state progress monitoring 3 times a year</u><br>Goal: <u>Level 3 on PM 3</u><br>Methods: <u>PM FAST tests and Achieve 3000 Level sets</u> |
| <b>Writing</b> | Frequency: <u>weekly writing prompts</u><br>Goal: <u>7</u><br>Methods: <u>NoRedInk Diagnostics</u>                                                      |
| <b>Math</b>    | Frequency: <u>monthly</u><br>Goal: <u>Level 3 on Algebra and Geometry EOC</u><br>Methods: <u>standards assessments/IXL</u>                              |

## Progress Monitoring Plan (PMP) for Grades 6-12

**Parent/Guardian Commitment/Contribution** Check all that apply.

- |                                                                |                                                                        |                                                    |                                                      |
|----------------------------------------------------------------|------------------------------------------------------------------------|----------------------------------------------------|------------------------------------------------------|
| <input checked="" type="checkbox"/> Monitor Attendance/Tardies | <input checked="" type="checkbox"/> Encourage Reading at Home          | <input checked="" type="checkbox"/> Check Homework | <input checked="" type="checkbox"/> Reinforce Skills |
| <input type="checkbox"/> Sign Daily/Weekly Notes               | <input checked="" type="checkbox"/> Attend Parent Meetings/Conferences |                                                    |                                                      |

|                                                     |                                                    |                           |
|-----------------------------------------------------|----------------------------------------------------|---------------------------|
| <u>N/A</u><br>Printed Name of Parent/Guardian       | <u>[Signature]</u><br>Signature of Parent/Guardian | <u>          </u><br>Date |
| <u>Josh Wiselworth</u><br>Printed Name of Principal | <u>[Signature]</u><br>Signature of Principal       | <u>8-26-26</u><br>Date    |
| <u>N/A</u><br>Printed Name of Teacher               | <u>          </u><br>Signature of Teacher          | <u>          </u><br>Date |

| Referrals              |                          |                          |                          |                         |                          |                          |                          |
|------------------------|--------------------------|--------------------------|--------------------------|-------------------------|--------------------------|--------------------------|--------------------------|
|                        | <b>Reading</b>           | <b>Writing</b>           | <b>Math</b>              |                         | <b>Reading</b>           | <b>Writing</b>           | <b>Math</b>              |
| Child Study Team (CST) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | School Based Team (SBT) | <input type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> |

**Final Progress - For each targeted area, choose an action:**

- | Reading                                                | Math                                                   | Writing                                                | Science                                                |
|--------------------------------------------------------|--------------------------------------------------------|--------------------------------------------------------|--------------------------------------------------------|
| <input type="checkbox"/> Successfully remediated       | <input type="checkbox"/> Successfully remediated       | <input type="checkbox"/> Successfully remediated       | <input type="checkbox"/> Successfully remediated       |
| <input type="checkbox"/> Requires PMP next school year | <input type="checkbox"/> Requires PMP next school year | <input type="checkbox"/> Requires PMP next school year | <input type="checkbox"/> Requires PMP next school year |
| <input type="checkbox"/> Special services/placement    | <input type="checkbox"/> Special services/placement    | <input type="checkbox"/> Special services/placement    | <input type="checkbox"/> Special services/placement    |
| <input type="checkbox"/> Other - see attached          | <input type="checkbox"/> Other - see attached          | <input type="checkbox"/> Other - see attached          | <input type="checkbox"/> Other - see attached          |

### SCHOOL USE ONLY

|                                                                                                                                             |                        |
|---------------------------------------------------------------------------------------------------------------------------------------------|------------------------|
| PMP Change/Updated Date: _____                                                                                                              | PMP Closed Date: _____ |
| Parent Notified by: <span style="border: 1px solid black; display: inline-block; width: 80%; height: 20px; vertical-align: middle;"></span> |                        |
| Signature: _____                                                                                                                            |                        |