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| **DESERT/ MOUNTAIN SPECIAL EDUCATION LOCAL PLAN AREA****DESERT/MOUNTAIN CHARTER SPECIAL EDUCATION LOCAL PLAN AREA**17800 HIGHWAY 18 • APPLE VALLEY, CA 92307(760) 552-6700 • (760) 242-5363 FAX**Positive Behavioral Interventions & Supports Exploration & Adoption Checklist** |
| **team commitment** |
| **DIRECTIONS:** All individuals that have been selected to participate in the PBIS training **must** review and sign this commitment form. |
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| I hereby acknowledge that: |
| 1. | All of our team members must attend the team training days. I understand that either the school principal or assistant principal must also attend in order for the team to continue training. |
| 2. | Our school will make every effort to implement PBIS during the next school year. |
| 3. | Through the PBIS process, we will: |
|  | * Use discipline data to guide decision-making
 |
|  | * Implement a consistent discipline referral process and procedures
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|  | * Implement and teach school-wide expectations and rules
 |
|  | * Implement a comprehensive reinforcement system
 |
|  | * Participate in PBIS assessments
 |
| 4. | The PBIS team commits to meet at least monthly to analyze and problem-solve school-wide data. |
| 5. | Our team will designate a “coach” and work with him/her to implement BIS with fidelity. |
| 6. | This is a three to five year process that involves ongoing training. |
| 7. | This process starts at the school-wide level, but eventually will address students at a targeted group and individual student level. |
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| **NAME** | **SIGNATURE** | **POSITION/TITLE** | **E-MAIL ADDRESS** |
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| **exploration & adoption checklist** |
| **School Site:** |  | **Date:** |  |
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| **Completed?** | **Action Step** |  |
| **[ ]  yes [ ]  no** |  | 1. The entire faculty, including your PBIS Implementation Team, participates in an awareness presentation on school-wide PBIS.

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| **Indicate date of presentation and presenter name(s):** |  |

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| **[ ]  yes [ ]  no** |  | 1. A PBIS Implementation Team is formed and has broad representation (including some Leadership Team members, a behavior specialist or team member with behavioral expertise, administrator(s), guidance counselor, and general and special education teachers across grade and content).

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| **List team members and roles on the Team Commitment Form.** |

 |
| **[ ]  yes [ ]  no** |  | 1. PBIS Implementation Team commits to meet at least once a month to analyze and problem-solve school-wide data.

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| **Describe when you meet or plan to meet (days, location, and time) throughout the school year.** |

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| **[ ]  yes [ ]  no** |  | 1. Principal or AP responsible for making discipline decisions, is an active participant on PBIS Implementation Team and agrees to attend all days of the Team and Coaches’ Trainings.

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| **List participating Administrator(s) here:** |
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| **[ ]  yes [ ]  no** |  | 1. A school plan exists that includes school-wide discipline (i.e., behavior, school safety, school climate) as one of the top school goals.

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| **Attach a recent copy of your school plan.** |

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| **[ ]  yes [ ]  no** |  | 1. School has allocated/secured funding from the district to support their school-wide initiatives (LCFF)

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| **Identify funding source:** |  |

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| **[ ]  yes [ ]  no** |  | 1. An individual at the district level has been identified as the lead district contact or PBIS District Coordinator and agrees to attend two annual meetings of the PBIS Advisory Leadership Committee.

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| **Lead District Contact:** |  |

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| **[ ]  yes [ ]  no** |  | 1. External PBIS Coaches will be identified through the district by the end of year one of PBIS training to receive additional training and actively participate in the school-wide initiatives.

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| **List PBIS Coach with title that will be supporting your PBIS team:** |
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