**Sample Generic Tier II Observation Checklist**

Observer:Interventionist:

School:Grade:

Start Time:End Time:

Program:Skill(s):

The Tier II Intervention is:

|  |  |  |
| --- | --- | --- |
| **Description** | **Yes** | **No** |
| Provided by or supervised by a highly qualified teacher with training in area of intervention |  |  |
| Targeting one specific area of need/deficit/skill |  |  |
| Targeting as a skill that was identified as an area of need by an assessment |  |  |
| Occurring in addition to Tier I instruction |  |  |
| Delivered in a small-group format |  |  |
| Delivered with fidelity |  |  |
| Delivered with evidence based materials |  |  |
| Provided the appropriate amount of time daily |  |  |
| Provided the appropriate amount of time weekly |  |  |
| Progress monitored at least every other week  |  |  |

I certify that everything reported on this form is accurate and correct and that interventions are being implemented with integrity at least 80% of the time.

 signature