SCHOOL YEAR (SY): MONITORING PATH: CYCLE: GROUP: **REGION: DISTRICT NAME:** DISTRICT TYPE: SHARED SERVICE ARRANGEMENT (SSA) MEMBER: FISCAL AGENT: TEXAS VIRTUAL SCHOOL NETWORK CAMPUS: RESIDENTIAL FACILITY (RF): MONITORING TYPE: SELF-REPORTED NONCOMPLIANCE: **COMPLIANCE STATUS: ACTION REQUIRED:** STRATEGIC SUPPORT PLAN (SSP) DUE DATE: CORRECTIVE ACTION PLAN (CAP) DUE DATE: DYSLEXIA STATUS: DYSLEXIA ACTION REQUIRED DYSLEXIA PERFORMANCE PLAN (DPP) DUE DATE:

INTRODUCTION

OVERVIEW OF CYCLICAL MONITORING

House Bill 4545 Implementation Overview (TAA Letter)

House Bill 4545 Overview for Parents (YouTube Video)

House Bill 4545 Frequently Asked Questions

Residential Facilities (RFs)

STAKEHOLDER ANALYSIS AND RESULTS

SUMMARY OF REQUIRED ACTION

Require	d Action	Due Date	Support Level	Communication Cadence
				_

APPENDIX I: SELF-REPORTED NONCOMPLIANCE

Area	Citation	Level	Status	Action

PPENDIX II: ADDI	TIONAL RESO	URCES	

APPENDIX III: ACRONYMS

Acronym Description

