



African American Achievement Plan Evidence of Progress Monitoring

School District of Indian River County #SDIRCStrongerTogether

Date: 9/11/2020

School/Department: Citrus Elementary

Action Step (number and description): 1.11 Develop a process to identify the current needs and supports for equitable participation in extracurricular activities (e.g., cheerleading, lacrosse, soccer and orchestra).

Evidence of Progress Monitoring (Please include narrative/description of the action taken. Where applicable, please include all measurable data.) At this time, our teachers received training in restorative practices on August 26. Attached is the roster and attendance list of staff.

Results of Action Taken: Staff was informed in culturally responsive practices.

Reflection: We will hopefully notice a decrease in ODR's as teachers are aware of students' needs.

Restorative Practices Agenda

School District of Indian River County
Citrus Elementary
August 26, 2020

- Opening/Introductions & Check in
- State and District Data Review
- Basics of Restorative Practices
- Participant Feedback












Restorative Practices Agenda


School District of Indian River County
December 16, 2019

- Opening Circle
- District Data Review
- Implicit Bias
- Closing Circle

School District of Indian River County

Participant Attendance Roster-District Inservice

School-Based Activity Title: Restorative Practices at Citrus Elementary.		Presenter/Facilitator:		Total In-Service Hours: 0.75	
Course Description: Restorative Practices.					
Date(s): 8/12/2020		Location: Media Center/Citrus Elementary			
Start Time: 3:15		End Time: 4:00		Component:	
Primary Purpose	Learning Method	Implementation Method	Evaluation Method Student	Evaluation Method Staff	
<input type="checkbox"/> Add-On Endorsement	<input checked="" type="checkbox"/> Workshop	<input type="checkbox"/> Structured Mentor/Coaching Program	<input type="checkbox"/> Add-On Endorsement	<input checked="" type="checkbox"/> Workshop	
<input type="checkbox"/> Alternative Certification	<input type="checkbox"/> Electronic Interactive	<input type="checkbox"/> Results from Action Research	<input type="checkbox"/> Alternative Certification	<input type="checkbox"/> Electronic Interactive	
<input type="checkbox"/> FL Ed Cert Renewal	<input type="checkbox"/> Electronic, Non-interactive	<input type="checkbox"/> Collaborative Planning	<input type="checkbox"/> FL Ed Cert Renewal	<input type="checkbox"/> Electronic, Non-interactive	
<input type="checkbox"/> Other Prof Cert/Lic Renewal	<input type="checkbox"/> Study Group	<input type="checkbox"/> Participant Product	<input type="checkbox"/> Other Prof Cert/Lic Renewal	<input type="checkbox"/> Study Group	
<input type="checkbox"/> Professional Skill Building	<input type="checkbox"/> Action Research	<input type="checkbox"/> Study Group Participation	<input type="checkbox"/> Professional Skill Building	<input type="checkbox"/> Action Research	
	<input type="checkbox"/> Independent Study	<input type="checkbox"/> Electronic-Interactive		<input type="checkbox"/> Independent Study	
		<input type="checkbox"/> Electronic Non-Interactive			
Employee ID#	Printed Name	Work Site	** Initial under each date of attendance		Total Hours
			8/25/2020		
	Broxton, James	Citrus Elementary School			
	Campbell, Marisa	Citrus Elementary School			
	Hipple, Michael	Citrus Elementary School			
	Parker, Terry	Citrus Elementary School			
	Rhue, Julie	Citrus Elementary School			
	Wishart, Nancy	Citrus Elementary School			
	Savoie Guerra, Valerie	Citrus Elementary School			
	Keeler, Jennifer	Citrus Elementary School			
	Mejia, Kelli	Citrus Elementary School			
	Carlsen, Tiffany	Citrus Elementary School			
	Del Tufo, Amber	Citrus Elementary School			

Presenter/Facilitator Signature: 

**Signature verifies successful activity completion which includes follow-up and participant evaluation.

Participant Attendance Roster-District Inservice

Presenter/Facilitator Signature: _____

****Signature verifies successful activity completion which includes follow-up and participant evaluation.**

Participant Attendance Roster-District Inservice

Presenter/Facilitator Signature: _____

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****Signature verifies successful activity completion which includes follow-up and participant evaluation.**

School District of Indian River County

Participant Attendance Roster-District Inservice

School-Based Activity Title: Restorative Practices at Citrus Elementary.		Presenter/Facilitator:		Total In-Service Hours: 0.75	
Course Description: Restorative Practices.		Location: Media Center/Citrus Elementary			
Date(s): 8/26/2020		Component:			
Start Time: 2:15		End Time: 3:00			

Employee ID#	Printed Name	Work Site	** Initial under each date of attendance				Total Hours
			8/26/2020				
	Addabbo, Rose-Marie	Citrus Elementary School					
	Chasteen, Morgan	Citrus Elementary School					
	Colluci, Kelly	Citrus Elementary School					
	DeCosa, Lisa	Citrus Elementary School					
	Henderson, Traci	Citrus Elementary School					
	Hoover, Laurie	Citrus Elementary School					
	Geary, Jessica	Citrus Elementary School					
	Lavergne, Cindy	Citrus Elementary School					
	Morgan, Kimberley	Citrus Elementary School					
	Nelson, Lori	Citrus Elementary School					
	Swallow, Rachel	Citrus Elementary School					
	Macleod, Paula	Citrus Elementary School					
	Marchman, Leann	Citrus Elementary School					

Primary Purpose	Learning Method	Implementation Method	Evaluation Method Student	Evaluation Method Staff
<input type="checkbox"/> Add-On Endorsement	<input checked="" type="checkbox"/> Workshop	<input type="checkbox"/> Structured Mentor/Coaching Program	<input type="checkbox"/> Add-On Endorsement	<input checked="" type="checkbox"/> Workshop
<input type="checkbox"/> Alternative Certification	<input type="checkbox"/> Electronic Interactive	<input type="checkbox"/> Results from Action Research	<input type="checkbox"/> Alternative Certification	<input type="checkbox"/> Electronic Interactive
<input type="checkbox"/> FL Ed Cert Renewal	<input type="checkbox"/> Electronic, Non-interactive	<input type="checkbox"/> Collaborative Planning	<input type="checkbox"/> FL Ed Cert Renewal	<input type="checkbox"/> Electronic, Non-interactive
<input type="checkbox"/> Other Prof Cert/Lic Renewal	<input type="checkbox"/> Study Group	<input type="checkbox"/> Participant Product	<input type="checkbox"/> Other Prof Cert/Lic Renewal	<input type="checkbox"/> Study Group
<input type="checkbox"/> Professional Skill Building	<input type="checkbox"/> Action Research	<input type="checkbox"/> Study Group Participation	<input type="checkbox"/> Professional Skill Building	<input type="checkbox"/> Action Research
	<input type="checkbox"/> Independent Study	<input type="checkbox"/> Electronic-Interactive		<input type="checkbox"/> Independent Study

**Signature verifies successful activity completion which includes follow-up and participant evaluation.

Citrus Elementary

Massaroni, Lori

Participant Attendance Roster-District Inservice

Presenter/Facilitator Signature: _____

****Signature verifies successful activity completion which includes follow-up and participant evaluation.**

Participant Attendance Roster-District Inservice

Presenter/Facilitator: Rachel W.

Total In-Service Hours:
0.75

ARIMA / GARCH

Location: Media Center/Citrus Elementary

CONCLUSIONS AND RECOMMENDATIONS

Primary Purpose	Learning Method	Implementation Method	Evaluation Method Student	Evaluation Method Staff
<input type="checkbox"/> Add-On Endorsement	<input checked="" type="checkbox"/> Workshop	<input type="checkbox"/> Structured Mentor/Coaching Program	<input type="checkbox"/> Add-On Endorsement	<input checked="" type="checkbox"/> Workshop
<input type="checkbox"/> Alternative Certification	<input type="checkbox"/> Electronic Interactive	<input type="checkbox"/> Results from Action Research	<input type="checkbox"/> Alternative Certification	<input type="checkbox"/> Electronic Interactive
<input type="checkbox"/> FL Ed Cert Renewal	<input type="checkbox"/> Electronic, Non-interactive	<input type="checkbox"/> Collaborative Planning	<input type="checkbox"/> FL Ed Cert Renewal	<input type="checkbox"/> Electronic, Non-interactive
<input type="checkbox"/> Other Prof Cert/Lic Renewal	<input type="checkbox"/> Study Group	<input type="checkbox"/> Participant Product	<input type="checkbox"/> Other Prof Cert/Lic Renewal	<input type="checkbox"/> Study Group
<input type="checkbox"/> Professional Skill Building	<input type="checkbox"/> Action Research	<input type="checkbox"/> Study Group Participation	<input type="checkbox"/> Professional Skill Building	<input type="checkbox"/> Action Research
	<input type="checkbox"/> Independent Study	<input type="checkbox"/> Electronic-Interactive		<input type="checkbox"/> Independent Study
		<input type="checkbox"/> Electronic Non-Interactive		

[illegible]

****Signature verifies successful activity completion which includes follow-up and participant evaluation.**

Participant Attendance Roster-District Inservice

Presenter/Facilitator: Rachel W.

Total In-Service Hours: 0.75

Course Description:	Restorative Practices.
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Date(s): 8/26/2020

Start Time:	2:15	End Time:	3:00
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Component:

[illegible]

****Signature verifies successful activity completion which includes follow-up and participant evaluation.**

Participant Attendance Roster-District Inservice

Presenter/Facilitator Signature: _____