

**XXX School
XXX Level**

XXX, Principal

2011-2012

**Continuous School Improvement Planning Goals
Houston Independent School District**

Action Plan

Presented and approved by faculty on (insert date here).

Presented to parents and community on (insert date here).

Signatures

PTO/PTA Parent Representative

Date

Teacher Representative

Date

Principal

Date

School Improvement Officer

Date

Chief School Officer

Date

The signatures of the School Improvement Officer and the Chief School Officer indicate that this document has been reviewed by them and they certify that this document meets all district requirements for a School Improvement Plan.

(Insert School Name Here)
Action Plan
2012-2013

Goal 1:	Insert your SMART Goal here (strategic and specific, measurable, attainable, results-based, time-bound)
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Root Cause*	Strategy/Action	Person(s) Responsible	Evidence of Implementation and Effectiveness	Resources Needed	Timeline
1.					
2.					
3.					

* Each strategy should directly address an identified root cause

(Insert School Name Here)
Action Plan
2012-2013

Goal 2:	Insert your SMART Goal here (strategic and specific, measurable, attainable, results-based, time-bound)
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Root Cause*	Strategy/Action	Person(s) Responsible	Evidence of Implementation and Effectiveness	Resources Needed	Timeline
1.					
2.					
3.					

* Each strategy should directly address an identified root cause

(Insert School Name Here)
Action Plan
2012-2013

Goal 3:	Insert your SMART Goal here (strategic and specific, measurable, attainable, results-based, time-bound)
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Root Cause*	Strategy/Action	Person(s) Responsible	Evidence of Implementation and Effectiveness	Resources Needed	Timeline
1.					
2.					
3.					

* Each strategy should directly address an identified root cause