



SPECIAL EDUCATION CYCLICAL MONITORING REPORT

July 26, 2024

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

as soon as possible, but in no case later than one year

from the date of this notification _____ .

Area	Citation	Level	Status	Action

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DATA REVIEW

Data Sources

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Student Sampling and Campus Information

Monitoring Type	Sample Size
[REDACTED]	[REDACTED]

STAKEHOLDER ANALYSIS AND RESULTS

SUCSESSES

TECHNICAL ASSISTANCE

DYSLEXIA PROGRAM EVALUATION

Area	Legal Requirement	Status
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CONTACT

Report Date:

Deadline to Request Report Corrections:

APPENDIX I: SELF-REPORTED NONCOMPLIANCE

Area	Citation	Level	Status	Action

APPENDIX II: ADDITIONAL RESOURCES

APPENDIX III: ACRONYMS

Acronym Description

