



SPECIAL EDUCATION CYCLICAL MONITORING REPORT

July 26, 2024

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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:

OVERVIEW OF CYCLICAL MONITORING

Area	Citation	Level	Status	Action

#

Area	Citation	Level	Status	Action

#

SUCSESSES

TECHNICAL ASSISTANCE

DYSLEXIA PROGRAM EVALUATION

SUMMARY OF REQUIRED ACTION

Required Action	Due Date	Support Level	Communication Cadence

CONTACT

APPENDIX I: SELF-REPORTED NONCOMPLIANCE

Area	Citation	Level	Status	Action

APPENDIX II: ADDITIONAL RESOURCES

APPENDIX III: ACRONYMS

Acronym Description

