**Lorain County Domestic Relations Court**

**Juvenile Division**

**Ohio Truancy and Absence Intervention Plan**

|  |  |
| --- | --- |
| **Child’s Name:**  | **Referral Date:**  |
| **Referral Type:** Choose an item. | **Truancy Threshold Hours Reached:** Choose an item. |

**Educational Information**

|  |
| --- |
| **DISTRICT:** Choose an item. |
| **School’s Name:**  | **Phone:**  |
| **Address:**  |
| **City:** Choose an item. | **State: Ohio** | **Zip:** Choose an item. |

**Special Education Services? (choose one)**

[ ]  Yes (IEP or 504 Plan) [ ]  No

**If Yes:**

[ ]  Emotionally Disturbed [ ]  Learning Disabled [ ]  Cognitively Delayed

[ ]  Hearing Impaired [ ]  Visually Impaired [ ]  Other Health Impaired

Does the child currently have other involvement with the juvenile justice system? [ ]  Yes [ ]  No

**If Yes**: Please indicate the nature of the child’s involvement: Click or tap here to enter text.

**Trigger Date: 7-day: 2/2/2023 14-day: 2/2/2023 30-day: 2/2/2023 60-day: 2/2/2023**

 **Date Agreed:**

**Copies Sent: 2/2/2023**

**Contacts**

|  |  |  |
| --- | --- | --- |
| **Method of Contact** | **Date of Attempt** | **Outcome of Contact Attempt** |
| Choose an item. |  | Choose an item. |
| Choose an item. |  | Choose an item. |
| Choose an item. |  | Choose an item. |
| Choose an item. |  | Choose an item. |

**Team Members**

|  |  |
| --- | --- |
| **Name** | **Relationship** |
|       | **Parent/Parent Designee** |
|       | **Principal/School Administrator** |
|       | **School Representative** |
|   | **Lorain County Juvenile Court** |
|   | **Other: Student** |
|   | **Other:** |

**Identified Needs, Goals, and Strategies**

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
|

|  |  |  |  |
| --- | --- | --- | --- |
| **Barriers** | **Goals**  | **Person(s) Responsible** | **Target****Date** |
| School: Attendance | Student and parents/guardians are responsible for regular school attendance. Parents/guardians will follow school district attendance policy. School attendance will be monitored by the Intervention Team members. | [x]  Student[x]  Parent/Guardian[x]  School[x]  Attendance Officer[ ]  Other: |  |
| Choose an item. | Choose an item. | [ ]  Student[ ]  Parent/Guardian[ ]  School[ ]  Attendance Officer[ ]  Other: |  |
| Choose an item. | Choose an item. | [ ]  Student[ ]  Parent/Guardian[ ]  School[ ]  Attendance Officer[ ]  Other: |  |
| Choose an item. | Choose an item. | [ ]  Student[ ]  Parent/Guardian[ ]  School[ ]  Attendance Officer[ ]  Other: |  |
| Choose an item. | Choose an item. | [ ]  Student[ ]  Parent/Guardian[ ]  School[ ]  Attendance Officer[ ]  Other: |  |
| Choose an item. | Choose an item. | [ ]  Student[ ]  Parent/Guardian[ ]  School[ ]  Attendance Officer[ ]  Other: |  |

 |

**Additional Notes:**

**Plan Evaluation and Outcome Measures**

|  |  |  |
| --- | --- | --- |
| Child refused to participate in, or failed to make satisfactory progress on, the intervention plan or an alternative to adjudication.The Attendance Officer shall file a complaint not later than 61-days after the plan was implemented, if the child has refused to participate in, or failed to make satisfactory progress on, the intervention plan or alternative to adjudication under division (C )(2)(b) of section 3321.191 of ORC. | [ ] Student[ ] Parent[ ] NOT applicable: Student did not reach “Habitual Truancy” | 61 days from implementation of Absence Intervention Plan |

|  |  |  |
| --- | --- | --- |
| **Goals:**1. [ ]  Choose an item.2. [ ]  Choose an item.3. [ ]  Choose an item.4. [ ]  Choose an item.5. [ ]  Choose an item. |    |  |

|  |  |  |
| --- | --- | --- |
| **Outcome Measures:**[ ] 100% [ ] ≥75% [ ]  ≥50% [ ]  ≥25% [ ]  ≥0%Goals Met:  **\_\_/\_\_\_ = \_\_\_%**[ ] Student Made Progress[ ] Student Failed to Make Satisfactory Progress |  [x]  Active [ ]  Closed | Reviewed: |

**ACKNOWLEDGEMENT**

The Lorain County Juvenile Court Attendance Program would like to thank you for taking the time to participate in the development of this Absence Intervention Plan.