*Instructions*: Place the cursor in each field to the right of the colon (:). The field will expand to provide ample space for your information.

|  |
| --- |
| Partnership Name:  |

|  |
| --- |
| Local School System: School Year:  |

|  |
| --- |
| Provider:  |

|  |
| --- |
| Data that supports the need for this partnership: |

|  |
| --- |
| Brief description of this program: |

|  |
| --- |
| Partnership Goal(s):  |

|  |  |
| --- | --- |
| Projected Outcomes |  Outcome Measurement Procedure/Tool  |
| 1: | 1: |
| 2: | 2: |
| 3: | 3: |
| 4: | 4: |
|  |  |
|  |  |

|  |
| --- |
| Plan for the local school system’s sustainability of these services for children who require special education and related services: |

|  |
| --- |
| This initiative began in school year:  |

The LSS projects that the services will be fully integrated into the local continuum of services by school

|  |
| --- |
| year:  |

**Please Note:** Outcome Evaluation Reviews utilizing the defined outcome measurement procedures are due to the MSDE, DSE/EIS, Nonpublic Special Education Section by January 15 and June 1 annually. Please design the tool that appropriately serves the Preventative Services Initiative and allows the outcome data to be reported.

**\*Attach the proposed budget which outlines the anticipated expenses.**