**RECAP Teacher Support Request Form**

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| --- | --- |
| Campus |  |
| Teacher |  |
| Grade(s) |  |
| Subject(s) |  |
| Requestor Name and Contact |  |

**Requested Assistance – Classroom (Check all that apply):**

[ ]  Lesson Planning

[ ]  Curriculum

[ ]  Assessment

[ ]  Instructional Strategies

[ ]  Student Engagement

[ ]  Classroom Environment

[ ]  Classroom Management

[ ]  Differentiated Instruction

[ ]  Lesson Cycle

[ ]  Questioning and Discussion Techniques

[ ]  Rigor and Relevance

[ ]  Special Education IEP Adherence

[ ]  Other:

**Requested Assistance – Non-Classroom (Check all that apply):**

[ ]  Community Relations

[ ]  Parent/Student Conferences

[ ]  Policies and Procedures

[ ]  Communication Skills

[ ]  Other:

|  |
| --- |
| What support has been provided to the teacher?  |
| [ ]  Support provided by another teacher/teacher mentor[ ]  Support provided by the department chair/lead teacher[ ]  Support provided by the administrator[ ]  Support provided by the implementation specialist[ ]  Feedback and coaching[ ]  Other: |
| What seems to be working/not working? |
|  |
| How will you work with the RECAP teacher to support this teacher? |
|  |

**Please send this completed form to Jill Rhodes Pruin at** **jrhodespruin1@saisd.net****.**