

Formstack Submission For: [2024-25 Primary and Elementary Literacy Reflection Tool](#)

District Name:

If other, please provide your district:

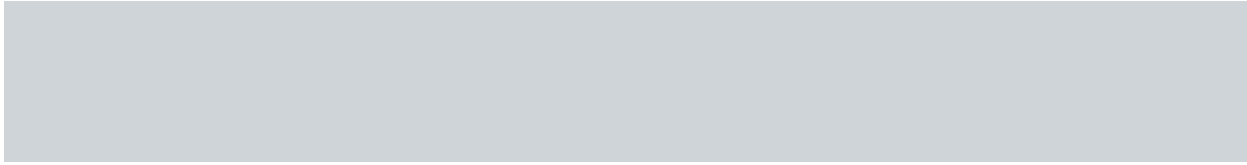
School Name:

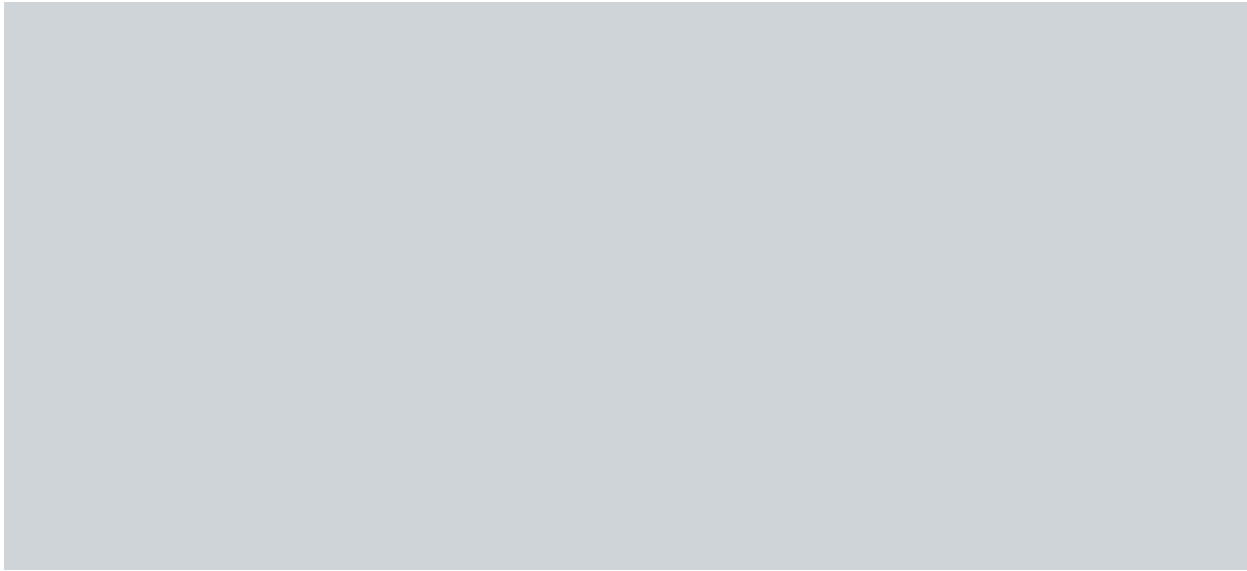
Principal Name:

Principal Email: \_\_\_\_\_

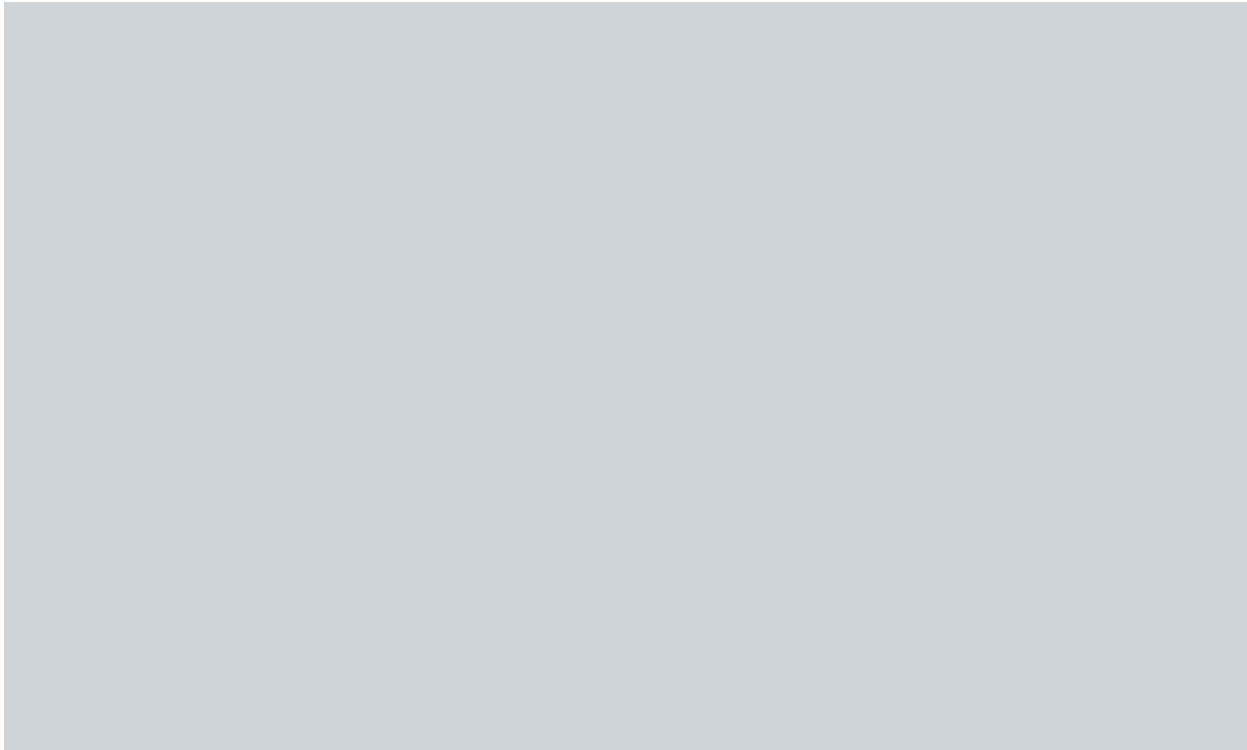
Optional: Reading Coach Email: \_\_\_\_\_

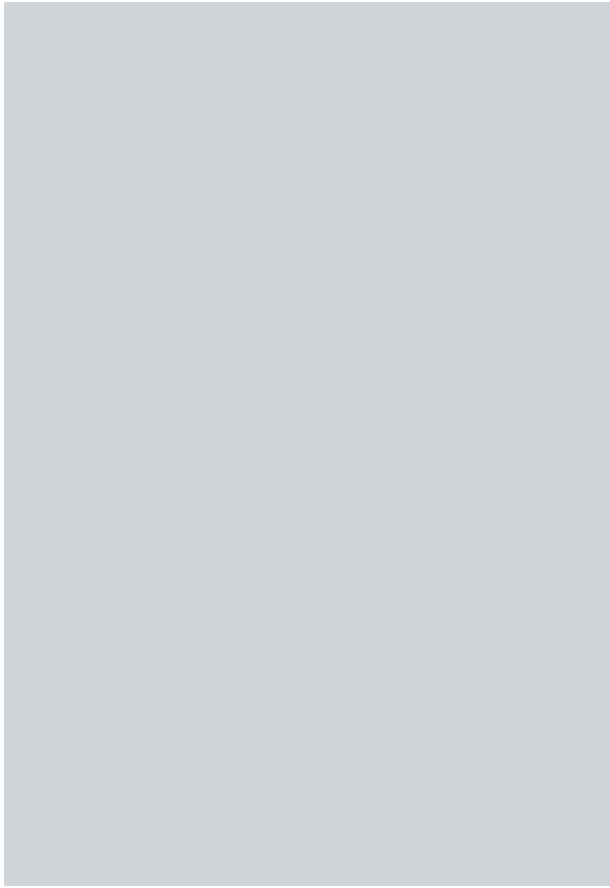
Describe how reading assessment and instruction for all students in the school includes oral language, phonological awareness, phonics, fluency, vocabulary, and comprehension to aid in the comprehension of texts to meet grade-level English/Language Arts standards.:











How many eligible teachers in your school have completed Volume 1 ONLY of LETRS?:

How many eligible teachers in your school have completed Volumes 1 and 2 of LETRS?:

How many eligible teachers in your school are beginning Volume 1 of LETRS this year (or have not yet started or completed Volume 1)?:

Goal #1:

Goal #1 Progress:

Goal #2:

Goal #2 Progress:

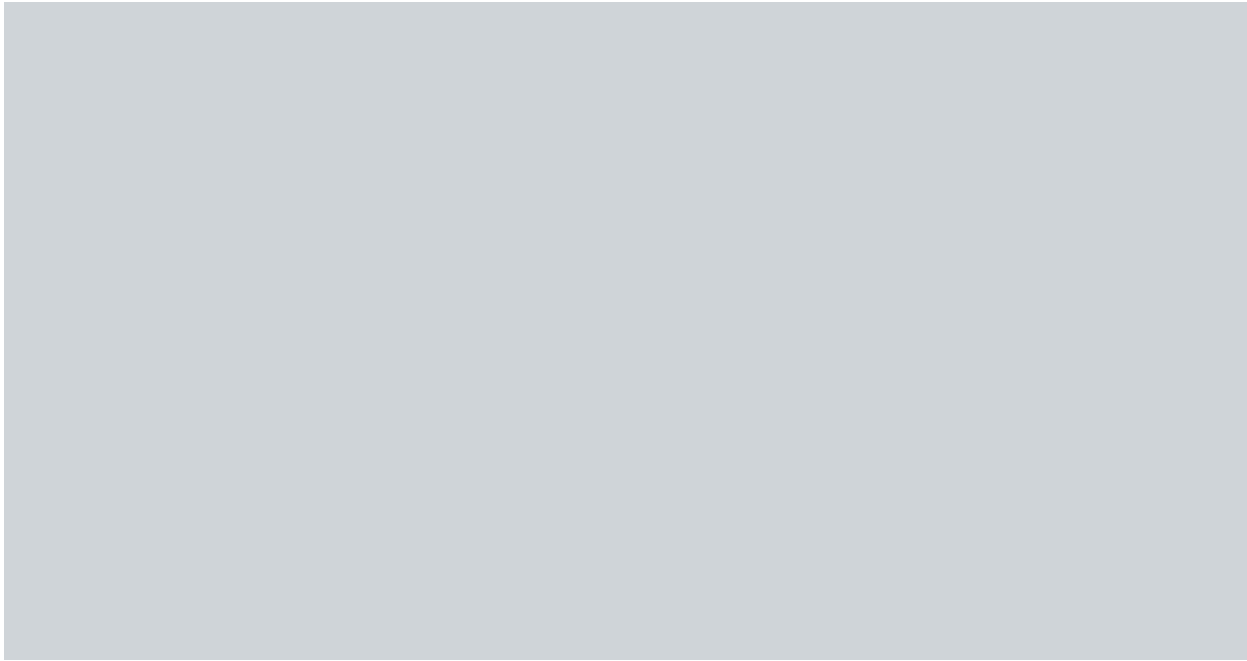
Goal #3:

Goal #3 Progress:

Goal #1:

Goal #1 Action Steps:





Goal #3:

Goal #3 Action Steps: