**Every Student Succeeds Act**

**[Insert Workgroup Name] Workgroup**

**Recommendations**

**[Insert Date]**

|  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- |
| **Recommendation Number** | **Item** | **ESSA Citation** | **Discussion** | **Change to Current Practice** | **Recommendation(s)** | **Minority Opinion** | **Decision of Members** |
| [XXX1] |  |  | 1. Short summary of presentation/policy/research 2. Identify issues/positions discussed 3. ***IF*** a decision was made on the agenda item: | Yes/No-If yes, explain |  | Include information if there is a minority | Identify 2/3 majority – Consensus was reached |
| [XXX2] |  |  |  |  |  |  |  |
| [XXX3] |  |  |  |  |  |  |  |
| **ESSA Consolidated Plan Team Feedback** | | | | | | | |
|  | | | | | | | |
| **Federal Programs Workgroup Feedback** | | | | | | | |
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