## **KY Peer Support Network Project**

## **District Vision and Planning Tool**

1. What is **our vision** for our district in the areas of inclusion and peer relationships for students with disabilities (i.e., your mission statement)?

2. What do we want to accomplish over the next year? (e.g., train teams from all schools within the district, pilot peer support networks in at least one elementary, one middle, one high school)

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| 2. |  |
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| 3. |  |
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| 4. |  |
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## **District Team**

1. What is the purpose and use (primary responsibility) of the district team?

- 2. Who needs to be involved with and part of a district Peer Support Network Team?
- 3. Which schools should be involved?

4. How will we select and invite team members? District Team members?

5. What are some potential professional development trainings needed to implement and maintain peer support arrangements and peer networks across the district?

6. How would we like the KyPSN Project to support the district team?

7. How will the district team support the school teams?



## **School Teams**

1. Who needs to be involved with and part of our school Peer Support Network Team?

2. How will we recruit team members.

3. Who will represent the school on the district Peer Support Network team?

4. What are some potential professional development trainings needed to implement and maintain peer support arrangements and peer networks within the school?

5. How would we like the district team to support the school teams?

