**Title I Schoolwide Plan**

**Please use the assigned Nebraska Department of Education**

**County District and School Numbers in the table below.**

*To complete text areas click in grey box and type*

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|  | | | | | | | | | | | | |
| District Name: | | | |  | | | | | | | | |
| County Dist. No.: | | | |  | | | | | | | | |
| School Name: | | | |  | | | | | | | | |
| County District School Number: | | | |  | | | | | | | | |
| School Grade span: | | | |  | | | | | | | | |
| Preschool program is part of the Schoolwide Plan. (Mark appropriate box.) | | | | | | | | | | | | Yes  No |
| Summer school program is part of the Schoolwide Plan. (Mark appropriate box.) | | | | | | | | | | | | Yes  No |
| Indicate subject area(s) of focus in this Schoolwide Plan. | | | | | | | | Reading/Language Arts  Math  Other  (Specify)\_     \_\_ | | | | |
| School Principal Name: | | | |  | | | | | | | | |
| School Principal Email Address: | | | |  | | | | | | | | |
| School Mailing Address: | | | |  | | | | | | | | |
| School Phone Number: | | | |  | | | | | | | | |
| Additional Authorized Contact Person (Optional): | | | |  | | | | | | | | |
| Email of Additional Contact Person: | | | |  | | | | | | | | |
| Superintendent Name: | | | |  | | | | | | | | |
| Superintendent Email Address: | | | |  | | | | | | | | |
|  | | | | | | | | | | | | |
| Confirm that the Schoolwide Plan will be made available to the School District, Parents and the Public. | | | | | | | | | | | | Yes  No |
|  | | | | | | | | | | | | |
| Names of Planning Team  *(include staff, parents & at least one student if Secondary School)* | | | | | | | Titles of those on Planning Team | | | | | |
|  | | | | | | | Parent | | | | | |
| **School Information**  ***(As of the last Friday in September)*** | | | | | | | | | | | | |
| Enrollment: | Average Class Size: | | | | | Number of Certified Instruction Staff: | | | | | | |
| Race and Ethnicity Percentages | | | | | | | | | | | | |
| White:       % | | | Hispanic:       % | | | | | | | Asian:       % | | |
| Black/African American:       % | | | | | American Indian/Alaskan Native:       % | | | | | | | |
| Native Hawaiian or Other Pacific Islander:       % | | | | | | | | | Two or More Races:       % | | | |
| Other Demographics Percentages | | | | | | | | | | | | |
| Poverty:       % | | English Learner:       % | | | | | | | | | Mobility:       % | |

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| --- | --- |
| Assessments used in the Comprehensive Needs Assessment  (ie. NeSA, MAP, ITBS, AIMS web, DIBELS, CAT etc.) | |
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*Please write a narrative in each box below to correspond to the Rating Rubric.*

*Place documentation in corresponding folder on flash drive to support the narrative.*

**1. Comprehensive Needs Assessment**

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| --- | --- |
| **1.1** | *Please provide a narrative below describing how disaggregated data was used in the analysis from the needs assessment to plan instruction. Provide supporting documentation in the corresponding folder.* |
|  | |
| **1.2** | *Please provide a narrative below that describes how the building gathered information from parents and community to identify the needs of the school. Provide supporting documentation in the corresponding folder.* |
|  | |
| **1.3** | *Please provide a narrative below that explains how the Continuous School Improvement Plan identifies ongoing improvement efforts. Provide supporting documentation in the corresponding folder.* |
|  | |

**2. Schoolwide reform strategies**

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| --- | --- |
| **2.1** | *Please provide a narrative below that describes the strategies in the schoolwide plan to address the needs of all children, particularly those at risk of not meeting the challenging state academic standards and how the school regularly monitors and revises the plan based on student needs. Provide supporting documentation in the corresponding folder.* |
|  | |

**3. Qualifications of instructional paraprofessionals**

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| --- | --- |
| **3.1** | *Please provide a narrative below explaining the procedure used to make sure that all instructional paraprofessionals in the school meet the ESEA requirements. Provide supporting documentation in the corresponding folder.* |
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**4. High quality and ongoing professional development**

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| --- | --- |
| **4.1** | *Please provide a narrative below explaining how professional development and other activities for teachers to improve instruction and use of data from academic standards is provided for your school. Provide supporting documentation in the corresponding folder.* |
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**5. Strategies to increase parental and family engagement**

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| --- | --- |
| **5.1** | *Please provide a narrative below explaining how the school-parent compact is jointly developed with parents. Provide supporting documentation in the corresponding folder.* |
|  | |
| **5.2** | *Please provide a narrative below explaining how the school level Title I Parent and Family Engagement Policy or Procedure was developed with parent and family input. Provide supporting documentation in the corresponding folder.* |
|  | |
| **5.3** | *Please provide a narrative below explaining how, when and where the annual Title I parent meeting is/was held informing parents of the school’s participation in Title I. Provide supporting documentation in the corresponding folder.* |
|  | |

**6. Transition Plan**

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| --- | --- |
| **6.1** | *Please provide a narrative below explaining the school’s transition plan from early childhood education program(s) to the elementary school. (Not required for middle or high school programs) Supporting documentation may also be placed in the corresponding folder.* |
|  | |
| **6.2** | *Please provide a narrative below explaining the school’s transition plan from elementary to middle school. (Not required for high school programs) Supporting documentation may also be placed in the corresponding folder.* |
|  | |
| **6.3** | *Please provide a narrative below explaining the school’s transition plan from middle school to high school. (Not required for elementary) Supporting documentation may also be placed in the corresponding folder.* |
|  | |
| **6.4** | *Please provide a narrative below explaining the school’s transition plan from high school to postsecondary education. (Not required for elementary or middle school programs) Supporting documentation may also be placed in the corresponding folder.* |
|  | |

**7. Strategies to address areas of need**

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| --- | --- |
| **7.1** | *Please provide a narrative below explaining how the Schoolwide Plan increases the amount and quality of learning time within or beyond the instructional day. Provide supporting documentation in the corresponding folder.* |
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**8. Coordination & integration of Federal, State and local services & programs**

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| --- | --- |
| **8.1** | *Please provide a narrative below explaining how coordination and integration of Federal, State and local funds are used to support student learning. Supporting documentation may also be placed in the corresponding folder.* |
|  | |