**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 supported with Title I funds. *(Mark appropriate box)* | | | | | | | | | | | | Yes  No |
| Summer school program is supported with Title I funds. *(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  Administrator | | | | | |
| **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. NSCAS, 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 data was used from a comprehensive needs assessment of the entire school to identify the needs of all children, particularly those who are failing, or are at-risk of failing to meet State academic standards, and how this analysis was used to plan instruction. Provide supporting documentation in the corresponding folder.* |
|  | |
| **1.2** | *Please provide a narrative below describing how information from parents and community was gathered to identify the needs of the school. Provide supporting documentation in the corresponding folder.* |
|  | |
| **1.3** | *Please provide a narrative below describing the on-going improvement efforts, which should support the Continuous School Improvement Plan. Provide supporting documentation in the corresponding folder.* |
|  | |

**2. Schoolwide reform strategies**

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| --- | --- |
| **2.1** | *Please provide a narrative below describing the additional assistance provided for students at risk of not meeting the challenging state academic standards. Provide supporting documentation in the corresponding folder.* |
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**3. Qualifications of instructional paraprofessionals**

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| --- | --- |
| **3.1** | *Please provide a narrative below describing the procedure(s) 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 describing the professional development and other activities provided to improve teacher effectiveness and use of academic data to guide instruction. 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 describing how the School-Parent Compact was jointly developed and how it is distributed. Provide supporting documentation in the corresponding folder.* |
|  | |
| **5.2** | *Please provide a narrative below describing how parents were involved in developing the Title I Parent and Family Engagement Policy or Procedure. Provide supporting documentation in the corresponding folder.* |
|  | |
| **5.3** | *Please provide a narrative below describing how and when 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 describing the school’s transition plan for incoming students to support, coordinate and integrate services from their previous program or school (i.e. Headstart and/or other Early Childhood Program to Elementary, Elementary to Intermediate, Intermediate to Middle School, Middle School to High School). Provide supporting documentation in the corresponding folder.* |
|  | |
| **6.2** | *Please provide a narrative below describing the school’s transition plan for outgoing students as they move onto their next school / program / career. (i.e. Elementary to Intermediate, Intermediate to Middle School, Middle School to High School, High School to Post Secondary Schooling or Career). Provide supporting documentation in the corresponding folder.* |
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**7. Strategies to address areas of need**

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| --- | --- |
| **7.1** | *Please provide a narrative below describing 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 describing how available Federal, State and local funds are coordinated and integrated to meet student needs and support student achievement. Supporting documentation may also be placed in the corresponding folder.* |
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