**Title I Schoolwide Plan**

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

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

***If changes are made to an existing Title I Schoolwide Plan – complete and submit to the***

***NDE Federal Programs office by May 1st***

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| --- | --- | --- | --- |
|  | | | |
| District Name: |  | | |
| School Name: |  | | |
| County-District-School Number:  xx-xxxx-xxx |  | | |
| Grades **Served** with Title I-A Funds:  *(PK is rarely served)* |  | | |
| 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: |  | | |

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| 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 *(may be found on NEP* <https://nep.education.ne.gov/>*)* | | | | | | | | | |
| 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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| Confirm all Instructional Paras are Qualified according to ESSA. | Yes  No |

***Date Reviewed:***

**The Schoolwide Plan must be made available to the School, Staff, Parents, and the Public via the school's website.**

*Please write a narrative in each box below to correspond to the Rating Rubric.*

**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 curriculum, instruction, and assessment decisions.* |
|  | |
| **1.2** | *Please provide a narrative below describing how information from parents and community was gathered to identify the needs of the school.* |
|  | |
| **1.3** | *Please provide a narrative below describing the on-going improvement efforts, which should support the Continuous School Improvement Plan.* |
|  | |

**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.* |
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**3. High quality and ongoing professional development**

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| --- | --- |
| **3.1** | *Please provide a narrative below describing the professional development and other activities provided to improve instructional effectiveness and use of academic data to guide instruction.* |
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**4. Strategies to increase parent and family engagement**

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| --- | --- |
| **4.1** | *Please provide a narrative below describing how the School-Parent Compact was jointly developed and how it is distributed.* |
|  | |
| **4.2** | *Please provide a narrative below describing how parents were involved in developing the Title I Parent and Family Engagement Policy or Procedure.* |
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| **4.3** | *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.* |
|  | |

**5. Transition Plan**

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| --- | --- |
| **5.1** | *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).* |
|  | |
| **5.2** | *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).* |
|  | |

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

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| --- | --- |
| **6.1** | *Please provide a narrative below describing how the Schoolwide Plan increases the amount and quality of learning time within or beyond the instructional day.* |
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**7. Consolidation OR Coordination and Integration of Federal, State, or local Funds**

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| --- | --- |
| **7.1** | Our LEA does not Consolidate Title I funds, with other Federal, State, and local funds. If you think your district does consolidate funds, contact your consultant. (It is common practice in Nebraska to not consolidate funds). *(If you choose not to consolidate, N/A is acceptable.)* |
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