FY15 Academic Support Allocation Evaluation (FC 632/625)

Directions: Below is a copy of the online evaluation for your planning purposes only. Please enter the responses via the following link: http://www.surveygizmo.com/s3/2084483/FY15-Academic-Support-Allocation-Evaluation-FC632-625. You will be able to save your responses and continue later by clicking on the “save and continue” button at the top of the online survey. You will be prompted to enter an email address, and a unique link will be emailed to you that will allow you to return to your survey where you left off. *Indicates a required response.

General Information

Prior to filling out this online evaluation, you will first need to complete the individual student level data on students served by these grant funds. This data must be entered via the Academic Support application in the security portal (https://gateway.edu.state.ma.us/). Detailed directions are available here.

The data along with the school year (Fund Code 632) narrative evaluation are due July 31, 2015, and the summer (FC 625) are due September 30, 2015. Once you have completed this online evaluation form, there is nothing further that you will need to do in order to submit it. If you have any questions on the data or trouble with the evaluation, please email achievement@doe.mass.edu or call 781-338-3010.

We greatly appreciate your time and effort in filling out this evaluation. We hope that by collecting these online, we will be able to more effectively and efficiently share the impact these programs are having on students as well as improve the support we provide to grantees.

1) District/organization:* (select from drop down menu)

2) Contact Information:*

Name: _________________________________________________
Title: _________________________________________________
Email: _________________________________________________
Phone: _________________________________________________

3) Select fund code (please submit a separate evaluation for each fund code):*

( ) 632 - School Year       ( ) 625 - Summer
4) Which of the following, in connection with the academic instruction, were components of your program (please check all that apply): *

[ ] College and career readiness activities
[ ] High school transition support
[ ] Service-learning
[ ] Project/inquiry-based learning
[ ] Work-based learning
[ ] Counseling and/or other behavioral/social-emotional support
[ ] Credit recovery
[ ] Curriculum development
[ ] Mentoring
[ ] Parent or guardian activities
[ ] Web-based/software tutorials (please specify type used in comments box)
[ ] Other (please specify in comments box)
[ ] None

Comments:

5) Were any other funding sources beyond this grant used to support this program?

( ) Yes (please specify type in comments box)
( ) No

Comments:
Program Delivery

6) Reminder: In preparing the following responses, you will need to have first submitted your individual student level data via the Academic Support application in the security portal (https://gateway.edu.state.ma.us/). Detailed directions are available here. Please enter date data was submitted by clicking on the calendar below. Note: If you click on either of the links to the security portal, you will need to hit the back arrow in your web browser to return to the evaluation:*  

7) Please enter the following information (if not applicable, enter zero):*

<table>
<thead>
<tr>
<th>ELA</th>
<th>Number of students proposed to be served:</th>
<th>Number of students served:</th>
<th>Average number of hours for students served:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Math</td>
<td></td>
<td></td>
<td></td>
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<tr>
<td>Science</td>
<td></td>
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</tbody>
</table>

8) Describe whether there were any major differences from the proposed program. Note: If data above demonstrates a substantial difference in numbers proposed vs. numbers served and a lower than anticipated average amount of hours, please describe why here.*  

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9) Indicate whether the following was a program strength or challenge (please select *only those that apply -- if it is neither or not applicable, just leave blank)*:

<table>
<thead>
<tr>
<th></th>
<th>Strength</th>
<th>Challenge</th>
</tr>
</thead>
<tbody>
<tr>
<td>Highly qualified staff</td>
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<td>()</td>
</tr>
<tr>
<td>Student engagement</td>
<td>()</td>
<td>()</td>
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<tr>
<td>Student attendance / retention</td>
<td>()</td>
<td>()</td>
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<tr>
<td>Student enrollment</td>
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<td>()</td>
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<tr>
<td>Small group / individual instruction</td>
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<td>()</td>
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<tr>
<td>Scheduling</td>
<td>()</td>
<td>()</td>
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<tr>
<td>Funding</td>
<td>()</td>
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<tr>
<td>Transportation</td>
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<td>()</td>
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<tr>
<td>Family involvement</td>
<td>()</td>
<td>()</td>
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<tr>
<td>External partnerships</td>
<td>()</td>
<td>()</td>
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<tr>
<td>Collaborations w/ other departments (e.g., SPED, ELL, guidance)</td>
<td>()</td>
<td>()</td>
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<tr>
<td>Administrative support</td>
<td>()</td>
<td>()</td>
</tr>
<tr>
<td>Training, technical assistance and PD</td>
<td>()</td>
<td>()</td>
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<tr>
<td>Planning time for staff</td>
<td>()</td>
<td>()</td>
</tr>
<tr>
<td>Enhancement activities (college/career, service-learning, counseling, field trips, mentoring, end of program celebrations, etc.)</td>
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<td>()</td>
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<tr>
<td>Use of data</td>
<td>()</td>
<td>()</td>
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<tr>
<td>Curriculum development</td>
<td>()</td>
<td>()</td>
</tr>
</tbody>
</table>
Web-based / software tutorials | () | ()
Other (please specify in comments box) | () | ()

Comments:

Partnerships/Collaborations

10) Please indicate which of the following organizations, programs, or departments in your district that were partners and/or collaborators for your program (check all that apply):*

[ ] Special Education
[ ] ELL
[ ] Guidance
[ ] Homeless Liaisons
[ ] 21st Century Community Learning (CCLC) Program Coordinators
[ ] Work & Learning Coordinators
[ ] Alternative Education Program Coordinators
[ ] Higher Education Institutions
[ ] Workforce Investment Boards (WIBs)
[ ] Regional Employment Boards (REBs)
[ ] Local Community Based Organizations (CBOs) (please specify in the comments box)
[ ] Other (please specify in the comments box)
[ ] None

Comments:
11) Please note the benefits of any/all of these partnerships/collaborations:

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12) Discuss any challenges encountered in developing and maintaining effective partnerships/collaborations:

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Feedback and Outcomes

13) From which of the following did you collect feedback on the degree to which the program was effective in meeting its goals (check all that apply):*

[ ] Program staff
[ ] Students
[ ] Classroom teachers
[ ] Administration
[ ] Parents/guardians
[ ] ELL/SPED/guidance staff
[ ] No feedback was collected
[ ] Other (please specify in comment box)

Comments:
14) Outcomes: Based on the feedback collected and/or other data sources, please indicate which of the following were improved as a result of the program (check all that apply):*

[ ] MCAS and CD attainment
[ ] College and career readiness
[ ] Staff and student relationships
[ ] Student/peer relationships
[ ] School connection
[ ] Academic engagement
[ ] Credits earned
[ ] None yet known
[ ] Other (please specify in comments box)

Comments:

________________________________________________________________________

Overall Reflection & Feedback for ESE

15) Overall reflection: What would be helpful to change and what would you keep the same in a future program?*

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________________________________________________________________________

________________________________________________________________________

16) Please let us know of any topic(s) for training, technical assistance and/or professional development that would be of interest to you and/or your staff?

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7
17) What type of additional support or training/PD would you like to receive from ESE, if any? Please check all that apply within the most ideal time frame. *

<table>
<thead>
<tr>
<th></th>
<th>Fall 2015</th>
<th>Winter 2015/2016</th>
<th>Spring 2016</th>
<th>Summer 2016</th>
<th>None</th>
</tr>
</thead>
<tbody>
<tr>
<td>1-day training</td>
<td>[ ]</td>
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<tr>
<td>2+day professional development w/ coaching</td>
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<td>Site visit</td>
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<td>Webinar</td>
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</tbody>
</table>

18) Please feel free to comment or provide suggestions on the Academic Support Allocation application process, evaluation, data, policies and/or anything else that you would like to share, including anecdotes or promising examples (note: if you have any attachments, please email those to acsupport@doe.mass.edu).

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Thank You!

Thank you for filling out the evaluation. Please be sure to enter the evaluation responses via the link below and a copy of what you enter will be emailed automatically to you.