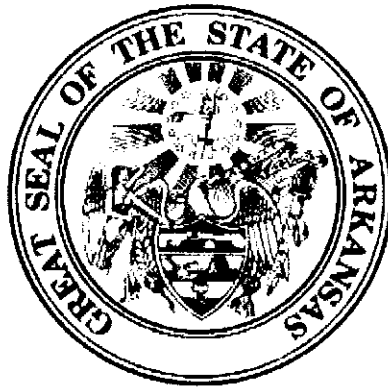


2006-2007 Request For Proposals

Supplemental Educational Service Providers

School Year 2006-2007

Pursuant to the Federal No Child Left Behind Act
Section 1116(e)(1)



**Issued by:
The Arkansas Department of Education**

**For more information contact:
Polly A. Davis
501-683-5427
Fax: 501-683-5409
E-mail: pdavis@arkedu.k12.ar.us**

Deliver Proposals by September 7, 2006 by 4:30 p.m., (CST) to:
Polly A. Davis
Arkansas Department of Education
#4 Capitol Mall, Room 304B
Little Rock, AR 72201-1071

Arkansas State Board Of Education

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Arkansas Department of Education Mission Statement

To promote equitable, quality education for all students in Arkansas public schools by providing leadership, service, and support and by ensuring that the public schools meet the Standards for Accreditation.

It is the policy of the State Board of Education and the Arkansas Department of Education that there will be no discrimination on the basis of race, color, sex, age national origin, religion, or disabilities in matters affecting employment or in providing programs.

**Arkansas Department of Education
2006-2007
Supplemental Educational Services**

New Applicant 2006-2007

Applicant Name: _____

Fiscal Agency: _____

Tax Identification #: _____

Mailing Address: _____

City/State/Zip: _____

Telephone: _____ **Fax:** _____

E-Mail: _____

Contact Person: _____

Mailing Address: _____

City/State/Zip: _____

Telephone: _____ **Fax:** _____

E-Mail: _____

Signature of Applicant _____ **Date:** _____

In order to meet one of the requirements of the No Child Left Behind Act (NCLB) of 2001, Section 1116 (e) (1), any school district with a school in its second year of school improvement or in corrective action must provide supplemental educational services to eligible children in the school. These services must be from a provider with a demonstrated record of effectiveness, selected by the parents, and approved for that purpose by the State Education Agency (SEA).

The purpose of this Request for Proposals (RFP) is to select providers of supplemental educational services that will be added to the current Approved Supplemental Services list.

NCLB requires maximum participation by all providers who are capable of providing supplemental services that are consistent with the instructional program of the school and the academic standards.

Arkansas Department of Education (ADE) Request for Proposals Supplemental Educational Services (SES)

In keeping with the requirements of No Child Left Behind (NCLB) as adopted by the U.S. Congress and signed into law on January 7, 2002, the Arkansas Department of Education (ADE) seeks applicants for providers of **Supplemental Educational Services (SES)**. The expectations of NCLB are to identify a cadre of providers available to provide high quality supplemental instruction for students in schools that have failed to make adequate yearly progress for at least three consecutive years. NCLB requires that individuals or groups provide services that can demonstrate high quality, performance based instruction founded on a research-based program of studies and successful intervention strategies supported by data.

Supplemental Educational Service Providers seeking approval in Arkansas must complete an application based on this Request for Proposals (RFP). It is expected that instruction will be primarily in the areas of reading and math in order to help students achieve Arkansas' standards, as demonstrated by improved performance on the Benchmark and end of course exams.

This request for proposals is issued to select the providers of supplemental services that will be included on the Approved Supplemental Educational Services Provider List. This is not a competitive grant in that as many providers can be included on the list as meet the criteria specified below. The approved list will be maintained by the ADE and will identify those providers approved to offer supplemental services in the schools of this state.

The Legislation requires that the State promote maximum participation by providers to ensure, to the extent practicable, that parents have as many choices as possible. The State-approved list will identify the approved providers that meet the qualifications. It is intended that the Provider List be revised at least on an annual basis. In addition to adding providers on a periodic basis, the State will annually eliminate every two years those that fail to maintain high-quality standards or fail to contribute to student performance on the Benchmark Exams.

Full approval is for those supplemental educational service providers who demonstrate a strong track record of effectiveness and obtain scores assigned by the Readers' Panel. All approved applicants must be able to demonstrate the capacity for meeting the minimum requirements.

Eligibility Requirements

To be included on the approved list of supplemental services providers, applicants must meet the following criteria:

- Have a demonstrated record of effectiveness or have a high probability of increasing student academic achievement
- Provide supplemental educational services that are consistent with state academic standards (the Arkansas Content Standards are available on the ADE web site: <http://arkansased.org>)
- Provide instruction that is of high quality, research-based, and specifically designed to increase academic achievement of eligible children on state assessments and attain proficiency in meeting the State's academic achievement standards. Reading instruction must be scientifically based and proven to be effective and include the National Reading Panel Report criteria (www.nifl.gov). Mathematics instruction must be scientifically based and proven to be effective and be aligned with the standards outlined in the National Council of Teachers of Mathematics (<http://www.nctm.org/>) "Standards-Based" Curriculum materials. Include this in your narrative by completing the chart located in Appendix B.
- Provide letters of reference from parents and schools
- Show proof that of financial soundness
- Provide supplemental instruction to what is provided during the school day.
- Provide instruction that is secular, neutral, and non-ideological
- Meet all applicable Federal, State, and local health, safety, and civil rights laws

Eligible Service Providers

The term Provider is defined as a non-profit entity, a for-profit entity, or a school district. Entities eligible to apply to provide supplemental services may include, but are not limited to the following:

- Community agencies
- Colleges or Universities
- Regional Service Cooperatives
- Charter Schools
- Private Schools
- Childcare Centers
- Public Schools
- Libraries
- 21st Century Community Learning Centers
- Private companies
- On-line schools
- Family literacy programs/Even Start programs
- Faith-based organizations

Responsibilities of the Approved Provider

Entities included on the Approved Supplemental Educational Services (SES) Provider list are required to do the following:

- Ensure that the instruction provided is aligned with Arkansas curriculum content standards and in the case of a student with disabilities, is consistent with the student's individualized education program under Section 614(d) of the Individuals with Disabilities Education Act and is consistent with the instructional program at the school
- Ensure that in the case of eligible students with limited English proficiency (LEP) are served, those students may participate and receive supplemental educational services and language assistance
- Provide parents of children receiving supplemental educational services and the appropriate school with information on the progress of the children in increasing achievement, in language that parents can understand
- Ensure that all employees who will interact with students will be fingerprinted and background checked pursuant to Arkansas teacher licensure procedures
- If the provider intends to offer services at the school, the provider must have planned on-site supervision.
- Enter into an agreement with the local school district that includes:
 1. A statement of specific achievement goals for each student based upon the child's specific educational needs
 2. A description of how the student's progress will be measured
 3. A timetable for improving achievement, that, in the case of a student with disabilities, is consistent with the student's Individual Education Program and is consistent with the instructional program at the school
 4. The amount of instructional time to be provided
 5. The location where services will be provided
 6. The means of transporting children to the place of instruction, if the services will be provided in a location other than student's school
 7. A description of how the student's parents, teacher(s), and school district will be regularly informed of the student's progress
 8. Provisions with respect to the making of payments to the provider by the school district
 9. An assurance from the provider that the identity of any student eligible for, or receiving supplemental educational services will not be disclosed without the written permission of the parents of the student
 10. A description of the scientifically based program to be utilized with specific references
 11. The availability and qualifications of staff responsible for the delivery of the instructional program.

Note the following two points:

- Districts are not required to provide transportation to services that are offered off campus.
- Districts may provide resources (i.e., computer, copies, staff), but are not required to do so.

Local Education Agency Responsibilities

Qualifying school districts are required to do the following:

1. Identify eligible children. "Eligible child" means a child from a low-income family, as determined by the local educational agency for purposes of allocating funds to schools under Section 1113(c)(1). The eligible children must attend Title I schools in their second year of school improvement, in corrective action, or in restructuring.
2. Notify parents of each eligible student at least annually of the availability of supplemental services [Section 116(3)(2)(A)]. Specific information about services should be provided directly to the parents of eligible students to ensure parents have sufficient time to select providers. The notices to parents must:
 - Identify each approved service provider within the LEA, in their geographical location, or accessible through technology such as distance learning or the Internet.
 - Describe the services, qualifications, and evidence of effectiveness for each provider.
 - Describe the procedures and timelines that parents must follow to select a provider to serve their students.
 - Be easily understandable; in a uniform format, including alternate formats, upon request; and, to the extent practicable, in a language the parents can understand.
3. Apply fair and equitable procedures for serving students if the number of spaces at approved providers is not sufficient to serve all students. **NOTE:** If funds available are insufficient to provide supplemental educational services to each eligible student whose parent requests those services, a district must give priority to the lowest achieving eligible students. In this situation, the LEA should use objective criteria to determine the lowest-achieving students.
4. Protect from the public the identity of any student who is eligible for, or receiving, Supplemental Educational Services under this subsection without the written permission of the parents of the student.
5. Contact providers selected by the parents and enter into a contractual agreement on behalf of the student
6. Provide the information the state education agency (ADE) needs to monitor the quality and effectiveness of the services offered by providers.

Role of Parents

Qualified parents are responsible for:

1. Contacting the school personnel identified in the supplemental services information letter sent home by the school district;
2. Choosing among all supplemental educational service providers identified by the state for the area served by the school district or within a reasonable distance of that area;
3. Assisting the school and provider in developing and identifying specific achievement goals for the student, measures of student progress, and a timetable for improving achievement;
4. Ensuring that their child attends the program regularly; and
5. Notifying the school in a timely fashion if they wish to change or terminate supplemental services, if they are not satisfied.

Funding

The school district is required to spend for each student receiving supplemental services the amount of its Title I per pupil allocation or the actual cost of the supplemental services, whichever is less. Title I allocations for local school districts are available on the Arkansas Department of Education website.

Arkansas Department of Education (ADE) Responsibilities

The Arkansas Department of Education (ADE) is required to do the following:

- Maintain an updated list of approved supplemental educational service providers across the State, from which parents may select
- Promote maximum participation by supplemental service providers to ensure, to the extent practicable, those parents have as many choices as possible
- Develop, implement, and publicly report on standards and techniques for monitoring the quality and effectiveness of the services offered by approved supplemental educational service providers and to withdraw approval from providers that fail, for two consecutive years, to contribute to increasing the academic proficiency of students to whom they provide services.
- Provide annual notice to potential supplemental educational service providers of the opportunity to provide services and to inform potential providers of the eligibility requirements to become an approved provider.

This request for proposal is prepared in keeping with the Arkansas Department of Education's response to requirements of NCLB Legislation. Those seeking additional information about Supplemental Educational Services and the provisions of NCLB under which schools are required to make such services available are referred to guidance as provided by the U.S. Department of Education at the following Web address:

<http://www.ed.gov/policy/elsec/quid/suppsvcsguid.doc>

Duration and Monitoring

The Arkansas Department of Education, in cooperation with the applicable school district(s), is required to monitor the quality and effectiveness of the services offered by approved providers and to withdraw approval from providers that fail, for two consecutive years, to contribute to increasing the academic proficiency of students to whom they provide services or that fail to meet any of the other eligibility requirements or assurances. **A violation of any of the above referenced provider responsibilities constitutes grounds for immediate removal from the state list.**

ADE monitoring will be conducted through the evaluation of the ***Supplemental Educational Services End-of-Year Report*** that will be completed by both the provider and the school district. In evaluating the ***End-of-Year Report*** reviewers will consider whether or not a provider has reached the stated goal for individual students and whether or not a student showed an increase in the state mandated testing conducted by the student's school or other academic indicators administered by the school. If 90 percent of the students served by a particular provider reach their goals and improve on the school's academic reporting then the provider will be considered effective and will be allowed to resubmit their application for consideration. If a provider fails to prove effective in the state's monitoring for two consecutive years, the provider will be removed from the approved state supplier list.

A district must continue to offer supplemental services until the school in question is no longer on school improvement according to requirements of NCLB. Parents may annually reconsider the provider for supplemental services.

Reporting

In May of 2007, the provider is required to submit to the school a final written report that summarizes the progress of all students served with their supplemental services. The school will submit this report to the Arkansas Department of Education for review as well as their own report of each student's academic achievement in the areas being addressed with the supplemental service provider. This information will be used to help determine if a provider will remain on the state-approved list.

Application Details

All proposals must follow the outline as included in this RFP. This outline is consistent with guidance provided by the United States Department of Education.

Basic Instructions:

1. Complete all phases of the Application within the space limitations provided for each section. A twelve-point font double spaced format is required. Text beyond requested will not be reviewed, nor will be considered in the approval process
2. Application pages should be numbered and sections I, II & III labeled
3. Return one original with signature in blue ink and four (4) additional copies. The applicant may, in lieu of the four (4) additional paper copies, submit the application on a CD, provided the CD can be read by the receiving ADE unit. The ADE assumes no responsibility for making copies to provide to the review team
4. Deliver all proposals to the ADE on or before the close of business (4:30 p.m., CST) on Thursday, September 7, 2006. Fax copies or electronic copies will not be accepted. A postmark of September 7, 2006, for later delivery is not acceptable
5. Direct all questions concerning the RFP, the review, and/or approval process to Polly Davis, ADE at 501-683-5425 or e-mail pdavis@arkedu.k12.ar.us
6. Deliver all proposals to the following address: Arkansas Department of Education, Attention Polly Davis, #4 State Capitol Mall Room 304-B, Little Rock, AR 72201-1071

**Request for Proposal (RFP)
Supplemental Educational Service Providers**

Instructions: Complete Section I Basic Program Information. If application is approved, Section I will be placed on the Arkansas Department of Educational Supplemental Educational Services website.

Section I: Basic Program Information

<p>1. Provider Name <input type="checkbox"/> Experienced Service Provider <input type="checkbox"/> Non-Experienced Service Provider Year of initial service provision</p>	<p>Indicate if provider has experience tutoring or providing instructional services to students.</p>
<p>2. Federal EIN or Social Security Number</p>	
<p>3. Subject Areas Covered</p>	<p>List all major subject areas proposed working with students.</p> <p><input type="checkbox"/> Reading <input type="checkbox"/> Math <input type="checkbox"/> Behavior/Discipline <input type="checkbox"/> Motivation <input type="checkbox"/> English language acquisition <input type="checkbox"/> Other (Specify) _____</p>
<p>4. Date this Supplemental Service Provider first provided services in Arkansas</p>	<p>List the date (month, year) in which Supplemental Educational Services were first delivered to students in Arkansas by this organization.</p> <p>List the date (month, year) in which Supplemental Educational Services were first delivered by this organization to any students, regardless of location.</p>
<p>5. Grade Levels <u>Currently</u> Served</p>	<p>List the grade levels that are currently being served.</p>
<p>6. Grade Levels <u>Able to Serve</u> in 2006-07</p>	<p>List the grade levels proposed to serve in the 2006-2007 academic year.</p>
<p>7. Number of Students <u>Currently</u> Served</p>	<p>Provide the number of students currently served by grade level.</p>
<p>8. Maximum Number of Students <u>Able to Serve</u> in 2007-2008</p>	<p>Provide an estimate of the maximum number of students the program anticipates the ability to serve during 2007-2008 while maintaining quality service and results.</p>

9. Availability and Qualification of Staff	List the number of staff Qualifications of staff Experience working with students that are <ul style="list-style-type: none"> <input type="checkbox"/> Economically disadvantaged <input type="checkbox"/> Varied racial and ethnic groups <input type="checkbox"/> Disabilities <input type="checkbox"/> Limited English proficiency.
10. Geographic Setting	Check the setting(s) of services to students <input type="checkbox"/> Urban <input type="checkbox"/> Rural <input type="checkbox"/> Suburban List the county or counties in which you are prepared to provide services to students.
11. Place of Service	Check the location(s) that best describes the location of the deliver services to students. <ul style="list-style-type: none"> <input type="checkbox"/> School <input type="checkbox"/> Business <input type="checkbox"/> Place of religious worship <input type="checkbox"/> (e.g., church, synagogue, mosque, temple) <input type="checkbox"/> Community center <input type="checkbox"/> Provider's home (must seek DHS license) <input type="checkbox"/> Student's home (Parent/Adult must be present) <ul style="list-style-type: none"> <input type="checkbox"/> On-line <input type="checkbox"/> Other (Specify): _____
12. Specific Student Populations Served. Check the corresponding box(s) to which supplemental services will be provided:	<ul style="list-style-type: none"> <input type="checkbox"/> Low-income students <input type="checkbox"/> Minority students <input type="checkbox"/> Migrant students <input type="checkbox"/> Limited English proficient students (Indicate particular language(s)) _____ <input type="checkbox"/> Special education students <input type="checkbox"/> Other: (describe) _____
13. Type of Organization	Check the category that best describes your organization. <ul style="list-style-type: none"> <input type="checkbox"/> For-profit <input type="checkbox"/> Not for Profit <input type="checkbox"/> School Entity <input type="checkbox"/> Institution of Higher Education <input type="checkbox"/> Other: (describe) _____
14. Time of Service	Check the time(s) that best describe when services will be delivered to students. <ul style="list-style-type: none"> <input type="checkbox"/> Before School <input type="checkbox"/> After School <input type="checkbox"/> Weekends <input type="checkbox"/> Summer <input type="checkbox"/> Other: (describe) _____

15. Student/Instructor Ratio	List the ratio of instructors to children in the described program. Number of students for every 1 instructor _____ _____ Individual _____ Small group (No greater than 5:1 ratio) _____ Large group
16. Cost	Provide an average contract per pupil cost per day \$ _____
17. Transportation	Indicate manner of transportation _____
18. Provider Contact Information	Contact Person Name: Street Address: City: State: Zip: Phone: () - Fax: () - Email: Web site: Hours of operation:

Note: The original application must be signed in BLUE INK.

Signature: _____ Title: _____
(The signature endorses the accuracy of responses in this RFP.)

Print Name _____ Date _____

Organization: _____

Section II: Narrative and Supporting Documentation

The Arkansas Department of Education has created an effective system to evaluate statewide Supplement Educational Services (SES) providers. This process will assist in determining evaluation measures and addressing the technical and practical considerations of service delivery. **SES providers will be reviewed based on three performance dimensions: effectiveness, customer satisfaction, and service delivery. The Application evaluation sections are indicated by a (*). Readers will review these sections very closely to determine the provider's evidence of meeting these measures.**

Part I. Program Overview

The following measures will help ADE determine the quality of services that will be provided.

This section receives up to 10 points. It provides readers with information necessary to develop a working knowledge of the proposed SES model. Be sure that items described in this narrative are also repeated as needed in the remaining sections of the application.

A. Narrative Description of Program (Limit 3 pages)	10 Points
<p>Summarize the proposed program in a narrative form. The narrative should describe services to schools, parents or district. Begin by identifying the diagnostic/prescriptive process the program will employ. Second, describe how proposed instruction addresses the skill gaps identified. Third, describe the process that will be used to reassess or determine if skills are mastered, or if re-teaching needs to occur.</p>	
<p>Note: Beginning with the 2006-2007 academic year and for all following years, an objective measure of effectiveness will be based on individual student scores on criterion-referenced and/or norm-referenced tests. <u>Local education agencies are responsibility for providing student score information to the ADE.</u></p>	
<p>Note: Narrative descriptions <u>must</u> include a description of:</p> <ul style="list-style-type: none">• The approach or model of instruction (identify and describe program components or design elements (e.g. parent component, components for math and reading, or professional development)• The process used to 1) assess/diagnose student needs; 2) develop an instructional program/intervention that meets individual student needs; and 3) to reassess to ascertain if skills are mastered• How services offered will help Title I students improve their achievement• The preparation of instructional staff with particular attention to their educational background and experiences in the area in which they are providing services• The program facilities and equipment, including technology, computers, and software• Instructional materials provided (and those the student is required to provide, if any)• Specific strategies used to work with parents/families• Specific strategies used to work with school personnel• Specific strategies to evaluate program quality and effectiveness	

Part II. Indicators of Quality

A. Goals and Objectives (Limit 2 page)	18 Points
<p>Goals are general statements of conditions that the provider would like to become a reality. Objectives bridge the gap between what the needs are and what the proposed program is trying to accomplish. Program objectives are “outcomes” of the activities proposed. Performance objectives tell who is doing what, and must be stated in measurable terms. In order to receive maximum points on this item, providers are strongly encouraged to structure their Goals and Objectives section as per the “Goals and Objectives” format at the end of this RFP.</p>	
<p>1. Provide a brief narrative describing: The expectations of the service proposed and The program’s annual long-term goals with supporting short-term objectives</p> <p>Objectives must be stated in measurable (percent/number) terms in order to assist determining progress and expectations. All SES providers will be required to submit an ongoing monitoring of goals and objectives.</p>	
B. Evidence of Links Between Research & Program Design (Limit 2 page)	18 Points
<p>Clearly and specifically link the research to the program design.</p> <p>Note: If reading instruction to grades K-8 will be offered, the findings of the National Reading Panel (http://www.nationalreadingpanel.org/) outlining the five areas of reading instruction <u>must</u> be addressed by the program design. Include this in your narrative by completing the chart located in Appendix A.</p> <p>Also Note: If math instruction to grades K-12 will be offered, indicate how the instructional program offered aligns with the standards outlined in the National Council of Teachers of Mathematics (http://www.nctm.org/) “Standards-Based” Curriculum materials. Include this in your narrative by completing the chart located in Appendix B.</p> <p>1. Explain how the key instructional practices and major design elements of the program (1) demonstrated high quality (2) are based on research (citations are required) and (3) are specifically designed to increase student academic achievement. Examples of “major design elements” may include mode of instruction, group size, time on task, etc.</p> <p>2. Describe the methods the program used to deliver instruction to students. (i.e., on-line/Web-based, individual tutoring, small group instruction, etc.) * Discuss the success and difficulties of the instruction.</p>	
C. Connection to State Academic Standards and School or School District’s Instructional Program(s) (Limit 1 page)	18 Points
<p>Clearly and specifically describe the program’s connection to the state academic standards and the district(s)/school(s) instructional program(s). Arkansas’ Academic Standards can be viewed at http://arkansased.org</p> <p>Note: Providers must provide direct services to students. Services must be academic in nature and target reading, language arts, and/or math. Applications that focus only on products such as software or “pre-packaged programs” that are not specifically aligned to Arkansas curriculum standards and learning expectations will not be approved.</p>	

1. Describe how the program connects to specific state academic standards. When possible, cite the specific standards the program addresses.
2. Describe how the program makes a connection with the instructional program(s) of the district(s)/school(s) in which services are provided.

D. Monitoring Student Progress (Limit 2 pages)

18 Points

Clearly describe the specific programs and practices that will be used to **diagnose** a student's needs, **prescribe** an instructional program to meet that student's needs, and to **evaluate and monitor** the student's progress toward clearly identified goals.

1. Address, in detail (a) the process by which student needs are assessed/diagnosed and skill gaps identified (b) how interim assessment occurs to determine if skills are mastered or re-teaching needs to occur and (c) how an instructional program/intervention is established to meet the student's individual needs.
2. Describe the specific process used to evaluate, monitor, and track student progress on a continuous and regular basis. Attach samples of monitoring forms/documentation of student progress. * Place samples in this section. The samples will not be included in the two-page limit.

E. Evidence of Effectiveness (Limit 4 pages)

18 Points

Provide a narrative of the program's evidence of effectiveness for the specific programs or services that will be offered in Arkansas.

Note: If this is a newly developed program, there may not be a record of effectiveness to draw upon. In this case, cite information such as the history of performance of your staff, instructional materials/ methodology utilized, research that supports methodologies if available, or other evidence that the program will be successful.

1. Provide evidence that this program has contributed to a positive impact on student achievement on state, school, and/or another independent, valid and reliable performance test, particularly for low-income, underachieving students (cite available research studies).
2. Provide evidence that this program has had a positive impact on student performance using a measure of school grades, homework completion, or school/teacher administered subject area test. Submit data within this section. Charts and tables will not be included in the page limit.
3. Provide evidence of improved student outcomes, such as student attendance, retention/promotion rates, graduation rates, family/parent satisfaction, and/or student behavior/discipline. Please discuss how the data from these conclusions were derived. *Place documentation in this section description. Documentation will not be included in the page limit.

F. Communication with parents and families (Limit 2 page)

18 Points

Describe the consistent and specific process for providing parents and families of the students with information on the progress of their child in increasing achievement, and providing that information in a format and language that parents can understand. Also provide information on how often these procedures will be employed. Clearly explain what methods, tools, and processes are used to communicate student progress to the students' parents and families.

Note: Instructors will be required to maintain communication logs, and Providers will be required to submit logs to the ADE at the end of the spring academic semester. See the attached "Parent/Guardian Communication Log" sample for the required format and submission information.

1. Describe how the SES provider will report on student progress to the student's parents/families, including how often, and if in languages other than English. *Include examples of reports and communication within this section. The examples will not be included in the page limit.
2. Describe the process for resolving any disputes or conflicts that may arise with parents. How were parents involved in supporting the service provided? Describe how the program worked to accommodate the needs and schedules of working parents.

G. Communication with Districts/Schools (Limit 2 pages)

18 Points

Clearly explain the link between the academic programs a student experiences in the regular school day and the instruction and content of the supplemental educational program(s) provided. Clearly explain the specific methods, tools, and processes you use to communicate student progress to schools and describe how you ensure a connection between the school program and your services.

Note: Providers will be required to maintain a log of communication with districts/schools, and to submit those logs to the ADE at the end of the spring academic semester. See the attached "School/District/Teacher Communication Log" sample for the required format and submission information.

1. Describe how the program ensures a connection between the described instructional program and the program in place at the students' school. If the program differs from the district's prevailing instructional or curricular approach, explain why it differs and how it meets student academic needs. * Place examples and documentation within this section. Examples and documentation will not count in the page limit.
2. Describe the specific procedures to ensure communication of student's progress between the Supplemental Educational Services Provider and the teacher/designee, including frequency, content and methods. * Documentation must be included following the explanation of this section. Examples and documentation will not count in the page limit

H. Qualifications of Instructional Staff (Limit 2 pages)

18 Points

Describe the qualifications of staff and the ongoing professional development and improvement of products and services. See the attached Staff Credential Matrix for required reporting format. The ADE strongly recommends evidence of highly qualified staff in delivering program services.

The following may be used as sources of evidence:

- The amount and quality of training provided to program staff in general and in specific content areas related to the supplemental services provided.
- Years and level of work experience, particularly in working with Title I students;
- Highest degree attained; and/or
- Certification of staff.

*In addition, applicants are required to complete and attach the Staff Credential Matrix form, and submit a resume for each staff member (place Staff Credential Matrix in Appendix C). The completed Staff Credential Matrix form will not be included in the page limit. The Staff Credential Matrix may be duplicated as many times as necessary.

1. List the number of staff available and describe the staff's qualifications and experience to provide high quality supplemental educational services to students who are economically disadvantaged, from varied racial and ethnic groups, with disabilities, and/or with limited English proficiency.
2. Describe how staff was recruited, how ongoing training opportunities were offered, and how staff performance is reviewed. * Documentation of recruitment along with specific training dates and topics must be included within this section. Documentation will not be included in the page limit.

Maximum points for ALL items in Appendix C and Appendix D combined 10 Points

Section III: Place the following sections in the Appendix D.

I. Cost of Service

Providers are required to provide both a cost for each pupil for an instructional hour and per pupil for an instructional day AND a specific and detailed description of the pricing structure employed by the provider.

Note: Provider charges will be capped at \$40 per pupil per hour of instruction, or \$80 per pupil per day of instruction or \$320 per pupil per instructional week, whichever amount is less.

Provide a per pupil cost per instructional day \$ _____

Provide a specific description of your pricing structure.

J. Financial and Organizational Capacity (Limit 1 page)

The application will be evaluated based on the extent to which it offers strong evidence of the program's capacity to deliver quality services over time and at scale.

The description should address the first point below (financial stability) and at least one additional indicator from this category. Documentation attachments are not included in the 1 page limit.

- Submit evidence demonstrating that the organization is financially sound. Evidence may include: a description of how it is currently receiving funds (i.e. grants, fees-for-service, etc.); audited financial statements; credit ratings from an independent rating agency; organizational budgets that account for revenues, expenses and cash flow activity; and/or proof of liability insurance. (Include company name and policy number, OR a copy of the policy cover page) **This item must be addressed, in addition to at least one of the indicators listed below.**
- 1. Submit evidence demonstrating that the organization has a sound management structure. Evidence may include: business plans or profiles; descriptions of an experienced management team (e.g. CEO, CFO, COO, Marketing Director, Director of Staff Development, etc.) and senior staff members who are involved in setting direction and maintaining a leadership system that enables the students to reach high standards.
- 3. Submit evidence demonstrating that the organization possesses adequate organizational resources to meet consumer demand. Evidence may include: business plans or profiles, and/or descriptions of financial and staff resources.
- 4. Are contracts, warranties, or guarantees for services provided issued? If yes, please describe this process and submit a sample document.
- 5. Are formal contracts, data collection, accounting, and communications processes and systems maintained? If yes, please describe these systems.
- 6. Submit copies of business license or formal documentation of legal status with respect to conducting business in the state.

K. Letters of Recommendation (place In Appendix D)

1. Submit letters of recommendation from five (5) parents and/or school(s). Attach copies of letters.

L. Compliance with Federal, State and Local Health & Safety Standards (Limit 1 page)
The application will be evaluated based on the extent to which it complies with federal, state and local health and safety standards. The description should address all of the following indicators.

1. Are criminal background checks conducted on all employees before hiring? (Check one)
 Yes No Yes, on some employees (Indicate which employees)
2. Submit a copy of all required licenses and/or certifications for health/safety and fire inspection. (Only applicable for facilities outside of schools or individual homes)
3. Describe the program's written procedures, safety procedures, and policies.
4. Describe the location and environment in which the program's services will be provided.
5. If you indicated that you are offering tutoring via the Internet or will otherwise contact student remotely, discuss policies and/or procedures you have in place to address each of the following:
 - a. Transmittal of any material in violation of any U.S. or state regulations or school board policy, including but not limited to, copyrighted material and threatening or obscene material.
 - b. Abiding by all school/LEA policies and procedure regarding computer/Internet use if a student will be using a school computer to access information from a provider.
 - c. Gaining written parental permission before communicating with students under the age of 13¹ via e-mail or the Internet (¹defined in Title XIII-Children's Online Privacy Protection Act of 1998).

M. Compliance with Federal, State and Local Civil Rights Protections (Limit 1 page)

The application will be evaluated based on the extent to which it complies with federal, state, and local civil rights protections for program employees and participants. It should be noted that providers who are religiously affiliated are prohibited from refusing to hire otherwise qualified tutors or denying students who are not of that religion. Providers must ensure that instruction is secular, neutral, and non-ideological.

1. Submit evidence demonstrating that the organization complied with federal, state, and local civil rights protections for employees and students.
2. Submit an assurance that the organization offered instruction that is secular, neutral, and non-ideological.
3. Submit evidence demonstrating that the organization complied with Individual Disability Education Act and American Disability Act requirements, if services were provided to students with disabilities.

N. Statement of Assurance

The attached Statement of Assurance form identifies those activities, standards, and processes that, at a minimum, the provider must adhere to. All items in the Statement of Assurance appear within this RFP. Providers must adhere to the Statement of Assurance. The person who signs the Statement of Assurance is responsible for compliance with the terms of the Statement of Assurance.

Note: The attached Statement of Assurance form must be completed, signed in blue ink, and returned along with the completed application packet. Failure to complete, sign, and return the Statement of Assurance may result in the application being rejected without further consideration.

Complete, **sign in blue ink**, and return the Statement of Assurance in Appendix D of the completed application packet. **The signature of the person signing the form endorses the accuracy of the information on the Statement of Assurance.**

O. Parent Survey Form

SES Providers are required to distribute the Parent Survey Form (Appendix D) to parents of students who receive services from the provider, AND to parents of students who request services from the provider but are NOT served.

SES Providers must give Parent Survey Forms to parents within 5 days of the end of service provision, or upon the denial of services, whichever comes first. Providers must give parents a stamped envelope, of appropriate size to hold the survey, pre-addressed to: Polly Davis, ACSIP Federal Programs/School Improvement Unit; Arkansas Department of Education; #4 Capitol Mall, Room 304B; Little Rock, AR 72201-1071.

Parents should be encouraged to complete and return the survey form in the stamped, pre-addressed envelope. Parents may not be required to complete the Survey form in the presence of any individual employed by or associated with the SES provider or the local education agency. However, if the parent **requests** assistance with completing the survey form, help should be provided at that time.

The survey form may be duplicated as many times as necessary.

P. District/School/Teacher Survey Form

Local Education Agencies are encouraged to complete the District/School/Teacher Survey Form (Appendix D) indicating satisfaction with various aspects of service provision for each SES provider.

Local education agencies are strongly encouraged to return their completed survey(s) by June 29, 2007 to: Polly Davis, ACSIP Federal Programs/School Improvement Unit; Arkansas Department of Education; #4 Capitol Mall, Room 304B; Little Rock, AR 72201-1071.

Local education agencies (LEAs) are encouraged to complete and return the survey form to the ADE. LEAs may not be required to complete the Survey form in the presence of any individual employed by or associated with the SES provider. However, if the LEA **requests** assistance with completing the survey form, help should be provided at that time.

The survey form may be duplicated as many times as necessary. The LEA should complete one survey form for each SES provider.

Q. Student Attendance Log

SES Providers are required to maintain a log of student participation to include at a minimum the following information:

1. **Student attendance**
2. **Duration of tutoring session**
3. **Session focus**
4. **Assessments**
5. **Outcomes**

Note: SES Providers are required to maintain a separate log for each individual student. See the attached "Student Attendance Log" for required format and submission information.

Providers, regardless of the mode of service provision (face-to-face, email, distance education, or via the internet) are required to maintain a log of student attendance. This form may be duplicated as many times as necessary.

This log must indicate, at a minimum student attendance, duration of each tutoring session, the academic focus of the session, assessment(s) administered if any, and outcomes of the session.

Send a copy of all completed log(s) to: Polly Davis, ACSIP Federal Programs/School Improvement Unit, Arkansas Department of Education, #4 Capitol Mall Room 304B, Little Rock, AR 72201-1071

R. Communication Log

SES Providers are required to maintain a separate communication log for each tutor.

SES Providers and individual tutors are required to use the attached Communication Log form. This form is to be used to record face-to-face, telephone, electronic, and written communication.

See the attached "Communication Log" for the required format and submission information.

Providers are required to maintain a log of communication between the provider or tutor and parents, districts, teachers, and schools. See the attached "Communication Log" for the required format and submission information.

Note: SES Providers are required to use the "Communication Log" form in Appendix D. The form may be duplicated as many times as necessary.

APPENDIX A
Section II.

B. Evidence of Links Between Research and Program Design

Reading

Potential SES providers that plan to offer reading instruction to grades K-8 must complete the chart below as a portion of their response to II. B. Evidence of Links Between Research and Program Design. Indicate how the instructional program to be offered aligns with the five areas of reading instruction identified by the National Reading Panel.

Dimensions of Reading	Components of the Supplemental Educational Services Provider's Instructional Program
Phonemic Awareness Instruction	
Phonics Instruction	
Fluency	
Vocabulary	
Text Comprehension	
Other	

**APPENDIX B
Section III.**

B. Evidence of Links Between Research and Program Design

Mathematics

Potential SES providers that plan to offer mathematics instruction in grades K-12 must complete the chart below as a portion of their response to II. B. Evidence of Links Between Research and Program Design. Indicate how the instructional program to be offered aligns with the mathematical process standards of the National Council of Teachers of Mathematics.

Mathematical Process Standards	Components of the Supplemental Educational Services Provider's Instructional Program
Problem Solving	
Reasoning and Proof	
Communication	
Connections	
Representation	
Other	

Subject Area: Reading

Skills to be Assessed	Screening Instrument/Tool*	Time Frame	Diagnostic**	Time Frame	Progress Monitoring***	Time Frame	Outcome Measure****	Time Frame
Phonemic Awareness Instruction								
Phonics Instruction								
Fluency								
Vocabulary								
Text Comprehension								
Other								

* Screening tests provide a beginning assessment of the student's preparation for instruction. Screening tests are brief in nature. **If screening determines that more in depth diagnosis is needed, identify diagnostic tools to be used.**

** Diagnostic tests are used to measure one or more critical content skills. They are designed to provide a more precise and detailed picture of the full range of a student's skill and knowledge to plan instruction more precisely.

*** Progress monitoring tests are used to track the student's progress in learning throughout the year.

**** Outcome measures are given at the end of the year to evaluate the progress toward meeting the goal of the student's achievement.

Subject Area: Mathematics

Skills to be Assessed	Screening* Instrument/Tool	Time Frame	Diagnostic**	Time Frame	Progress Monitoring***	Time Frame	Outcome Measure****	Time Frame
Problem Solving								
Reasoning and Proof								
Communication								
Connections								
Representation								
Other								

* Screening tests provide a beginning assessment of the student's preparation for instruction. Screening tests are brief in nature. **If screening determines that more in depth diagnosis is needed, identify diagnostic tools to be used.**

** Diagnostic tests are used to measure one or more critical content skills. They are designed to provide a more precise and detailed picture of the full range of a student's skill and knowledge to plan instruction more precisely.

*** Progress monitoring tests are used to track the student's progress in learning throughout the year.

**** Outcome measures are given at the end of the year to evaluate the progress toward meeting the goal of the student's achievement.

APPENDIX C

Section II.

H. Attach completed Staff Credential Matrix and resume for each member of the instructional staff.

Staff Credential Matrix

	RELEVANT AREA(S) OF CERTIFICATION		CERTIFICATE GRADE	CERTIFICATE HIGH	CERTIFICATE EXPIRES	YEARS TEACHING EXPERIENCE	YEARS WITH THIS PROVIDER
	LOW	HIGH					
Example: Mary L. Jones	Early Childhood	K	4	2010	15	3	

 Name of person responsible for accuracy of report

 Title

 Signature (Indicates person responsible for accuracy of report)

 Date

APPENDIX D

Section III.

Attach the following materials.

- I. Cost of Service**
- J. Financial and Organizational Capacity**
- K. Letters of Recommendation**
- L. Compliance with Federal, State and Local Health & Safety Standards**
- M. Compliance with Federal, State and Local Civil Rights Protections**

The following item is to be completed, signed in blue ink, and returned with the completed application packet.

- N. Statement of Assurance**

The following items are to be completed and returned to the Arkansas Department of Education as per instructions on each item.

- O. Parent Survey**
- P. District/School/Teacher Survey**
- Q. Student Attendance Log**
- R. Communication Log**

STATEMENT OF ASSURANCE

In submitting the application to be included on the Arkansas Department of Education Approved Supplemental Educational Services Provider list, I certify that this organization will:

1. Ensure that the instruction provided is aligned with Arkansas student content standards and in the case of a student with disabilities, is consistent with the student's individualized education program (IEP) under Section 614(d) of the Individuals with Disabilities Education Act and is consistent with the instructional program at the school
2. Provide parents of children receiving supplemental educational services and the appropriate school with information on the progress of the children in increasing achievement, in language that parents can understand
3. Ensure that all employees who will interact with students will be fingerprinted and background checked pursuant to Arkansas teacher licensure procedures
4. Enter into an agreement with the local school district that includes:
 - A. A statement of specific achievement goals for each student based upon the child's specific educational needs
 - B. A description of how the student's progress will be measured
 - C. A timetable for improving achievement in the case of a student with disabilities, is consistent with the student's individual education program (IEP) and is consistent with the instructional program at the school
 - D. The amount of instructional time to be provided
 - E. The location where services will be provided
 - F. The means of transporting the child to the place of instruction, if the services will be provided in a location other than student's school
 - G. A description of how the student's parents, teacher(s), and school district will be regularly informed of the student's progress
 - H. Provisions for the termination of the agreement if the provider is unable to meet the goals and timetable
 - I. Provisions with respect to the making of payments to the provider by the school district
 - J. An assurance from the provider that the identity of any student eligible for, or receiving supplemental educational services will not be disclosed without the written permission of the parents of the student
 - K. A description of the scientifically based program to be utilized with specific references
 - L. The availability and qualifications of staff responsible for the delivery of the instructional program
5. Provide planned on-site supervision If services are offered at the school.
6. Comply with all applicable federal, state, and local health, safety, and civil rights laws.
7. Ensure that all instruction and content are secular, neutral, and not ideological.
8. Ensure that all qualified children whose parents request services from the organization will be served equally, without restriction.
9. Ensure that the organization is financially stable and will be able to complete services to the student and the school
10. Ensure that no additional criteria are applied to eligible children.
11. Assist the state and district in monitoring student success.

12. Ensure that no incentives shall be directly or indirectly used to promote selection of their services by parents or guardians of eligible children. Rewards may be offered to eligible children:
 - A. To reward attendance, continued participation, or achievement related to a provider's services;
 - B. If the reward has no redeemable monetary value to the eligible child or his parent/guardian and is otherwise consistent with accepted classroom incentives, such as school supplies having nominal value, or the opportunity to order discounted instructional materials for the eligible child's personal use; and
 - C. Parents or guardians of an eligible child or children consent to offering such reward.
13. Enact the elements of the RFP or will be removed from the state-approved list of providers.
14. Ensure that if tutoring is offered via the Internet or will students will be otherwise contacted remotely:
 - A. There will be no transmittal of any material in violation of any U.S. or state regulations or school board policy, including but not limited to, copyrighted material and threatening or obscene material.
 - B. The SES provider will abide by all school/LEA policies and procedure regarding computer/Internet use if a student will be using a school computer to access information from a provider.
 - C. The SES provider will obtain written parental permission before communicating with students under the age of 13¹ via e-mail or the Internet (¹defined in Title XIII-Children's Online Privacy Protection Act of 1998).

The provider additionally understands that districts are not required to provide transportation to services that are offered off campus, and that districts are not required to provide space or resources (i.e., computer, copies, and staff).

Name (Printed or Typed)

(The signature endorses the accuracy of responses to this Statement of Assurance.)

Signature

Title/Position

Date

Parent Evaluation of Supplemental Educational Services

Directions: Please respond to each section of the evaluation by placing a check in the box for satisfactory or needs improvement.

Student name: _____

Parent name: _____

School and District name: _____

Area of Evaluation	Satisfactory	Needs Improvement
Rate your satisfaction with the amount that your child's academic achievement improvement because of the supplemental services. Comments:		
Rate your child's satisfaction with the experience of receiving services. (Was the experience a positive one?) Comments:		
Rate your satisfaction with how your child's progress was reported to you. (Did you receive regular reports that were easy to understand?) Comments:		
Rate your satisfaction with the qualifications of staff who tutored your child. Comments:		
Additional comments/suggestions:		

Supplemental educational service provider: _____

ARKANSAS DEPARTMENT OF EDUCATION
Title I Supplemental Educational Services Report
(As authorized by PL 107-110, Title I Part A Section 1116)
No Child Left Behind Act of 2001
2006-2007

District Report

District	_____	County	_____
	Name	LEA#	Name
Phone	_____	Fax	_____
Contact	_____		_____
	Type or Print Name	Phone	
Superintendent	_____		_____
	Signature	Date	

**Completed Report Must be Submitted
 By Friday, June 29, 2007, to:
 ACSIP Federal Programs/School Improvement Unit
 Arkansas Department of Education
 #4 Capitol Mall, Room 304B
 Little Rock, AR 72201**

- Local Educational Agencies (LEA) must make supplemental educational services (SES) available for eligible students attending schools that do not make adequate yearly progress (AYP) after one year of school improvement (three years of not making AYP). Did your school provide the opportunity for eligible students to obtain supplemental educational services?
 Yes No **If no, explain why services were not provided:**

- Complete a separate District Report on Providers for each provider you entered into an agreement with during the 2006-2007 school year.

- Check the method(s) used to inform parents of the availability of supplemental educational services. **Provide copies of all paper or electronic materials used by this district to inform parents of available services.**
 School Letter Parent Meeting Newsletter Brochure Phone calls
 Newspaper Article Public Forum Personal Contacts Other (clarify)

4. Did you enter into an agreement for services with any state approved providers during the 2005-2006 school year?

Yes No (If no, explain why no agreement was entered into)

5. Which of the following providers did you enter into agreements with during 2005-2006 school year? Name all providers:

6. Describe the process used to develop the agreement(s). Attach additional pages if needed.

7. Describe the process used to monitor provider(s) effectiveness. Attach additional pages if needed, including copies of forms or other instruments used to monitor effectiveness.

8. Were you able to development an agreement with all providers requested by parents?

Yes

No

If no, list the provider(s) and reason(s) Attach additional pages if needed, including copies of any written correspondence between the school/district, parent/guardian and service provider.

9. Complete the table below.

	# of students eligible	# of parents who requested services	# of students not receiving service * upon parent request *	# of students who participated	# of students with IEPs who participated	# of Limited English Proficient students who participated	# of students who met their goals	% of students who met their goals	# of students who were identified as making progress	% of students who were identified as making progress
District:										
School Name:										
School Name:										
School Name:										
School Name:										
School Name:										
School Name:										
School Name:										

This form may be duplicated as necessary to accommodate all schools in your district in which students were eligible to receive Supplemental Educational Services, whether or not they received the services.

10. If you had students who did not receive service upon parent request explain why those students did not receive services. Attach additional pages if necessary, including any written correspondence between the district/school, parent/guardian and service provider.

11. What was the 2005-2006 allowable per student expenditure amount for supplemental educational services?

12. What questions, comments, or concerns do you have regarding supplemental educational services?

District Report on Providers

Please make copies of this form and complete a separate survey for each Supplemental Educational Service provider with whom the district has contracted.

Name of Provider: _____

District Being Served: _____

A. Please provide the following information regarding the students served by this provider.

Grade Level	# of Students Served	# of IEP Students Served	# of LEP Students Served	% of Students Who Achieved Goals	% of Students Who Made Progress	% of Students Who Showed No Improvement
K						
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
TOTAL						

B. What was the average cost per student for this provider's services? _____

C. What was the per unit cost (per hour, semester, etc.) for this provider's services? _____

D. What was the total amount paid from your district to this provider? _____

E. At what location(s) were these services provided? _____

F. What was the average amount of instructional time provided to each student? _____

G. Attach a copy of the agreement made between the district and this provider.

H. Rate the performance of this provider in relation to each of the following service elements listed below. If marked "unsatisfactory," include an explanation. Attach additional pages for comments if necessary.

Service Element	Satisfactory	Comments/Remarks
1. Defined specific achievement goals for students receiving supplemental services as outlined in the agreement with the district and parent/guardian	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	
2. Constantly monitored the progress of students receiving supplemental services	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	
3. Provided students with constant, systematic feedback on what they were learning	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	
4. Ensured instructors were adequately trained to deliver the supplemental educational services	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	
5. Provided the district with information on the academic achievement progress of children receiving supplemental services	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	
6. Provided teachers of students receiving supplemental services with information on their academic progress	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	
7. Provided parents with information on the academic achievement progress of their children in a format and language (where practicable) that they could understand	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	
8. Ensured that curriculum and instruction provided were consistent with the district's instructional program and state content standards	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	
9. Ensured that instructional strategies were of high quality and research based	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	
10. Fulfilled all contractual obligations	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	
11. Provided services to eligible English language learners, as contracted (if applicable)	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	
12. Provided services to eligible special education students, as contracted (if applicable)	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	

13. Ensured that background checks of persons in contact with students were cleared	<input type="checkbox"/> Satisfactory <input type="checkbox"/> Unsatisfactory <input type="checkbox"/> Don't Know	
---	---	--

I. Describe parents', students', and your district's satisfaction or dissatisfaction levels with this provider, based on feedback received during and after service delivery. Include reasons for the level of satisfaction/dissatisfaction. Attach additional pages if necessary.

1. Parent/Guardian

What is your perception of parents'/guardians' level of satisfaction with this Supplemental Services Provider?

Extremely Dissatisfied	Dissatisfied	Neutral	Satisfied	Extremely Satisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Explain why you have this perception.

2. Student

What is your perception of the students' level of satisfaction with this Provider associated with SES?

Extremely Dissatisfied	Dissatisfied	Neutral	Satisfied	Extremely Satisfied
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Explain why you have this perception.

3. Would you recommend that the state continue to use this provider in the future?

Yes No **If no, explain why you would not recommend the state use this provider in the future.**

J. Additional Comments/Recommendations. Attach additional pages if necessary.

Please return this evaluation by **Friday, June 29, 2007**, to Polly Davis, ACSIP Federal Programs/School Improvement Unit, Arkansas Department of Education, #4 Capitol Mall, Room 304B, Little Rock, AR 72201.

Thank you for your time and assistance with this process.

Reporting Student Participation

Supplemental Educational Service providers are required, at a minimum, to maintain records related to:

1. Student attendance
2. Duration of tutoring session
3. Session focus
4. Assessments
5. Outcomes

SES Providers must use the following form to record and report the information above.

A separate chart must be maintained for each individual student. Duplicate the form as many times as necessary

NOTE: A copy of the completed report(s) must be submitted within 5 days of the end of the spring semester, or immediately upon ceasing service provision, whichever comes first. Submit copies of completed report(s) to: Polly Davis, ACSIP Federal Programs/School Improvement Unit, Arkansas Department of Education, #4 Capitol Mall Room 304B, Little Rock, AR 72201-1071.

SSP Name: XYZ Corp Tutor Name: Mary L. Jones

Student Name: Ann Smith District/School Name Anytown, Anytown Elem

Date	Time In	Time Out	Focus of Lesson	Outcome (Test)	Assessment (if used) Benchmark release items	Assessment Results
8/15/06	3:45 pm	5:45 pm	Punctuation			3 of 8 correct

(Signature of Tutor or SSP Officer)* _____ Date _____

*Signature indicates person responsible for ensuring that information recorded is true and accurate. Any inconsistency between this record and any other records becomes the responsibility of the person signing this form, and a full explanation of the inconsistency must be provided, and any necessary corrective action taken.

Reporting Communication with Districts/Schools/Teachers and Parents

Additionally, each SSP must maintain a log of communication with students, parents, teachers, and schools. Use the following form to record communication with students, parents, teachers, and schools. Include a recorded description of any communication including written, face-to-face or telephone conversations. On all communications, include the date and type of communication, subject, all participants, and any outcome from the communication.

Each tutor must maintain his or her own communication log.

NOTE: A copy of the completed communication log(s) must be submitted within 5 days of the end of the spring academic semester. Submit copies of the completed log(s) to: Polly Davis, ACSIP Federal Programs/School Improvement Unit, Arkansas Department of Education, #4 Capitol Mall Room 304B, Little Rock, AR 72201-1071.

