

Supplemental Educational Services Provider Application Scoring Guide

Grand Total _____

Application # 04-12-_____

Averaged Total Score _____

Reviewer's Initials _____

DESE Use Only

I. A. Program Description	Quality of Evidence			
	STRONG	MODERATE	LIMITED	NONE
1. Provider's description of program clearly defines how instruction and curriculum used will impact improved student achievement in communication arts and/or math.	6-5 _____	4-3 _____	2-1 _____	0 _____
2. Provider describes clearly how the program integrates Missouri's Show-Me Standards and the GLEs into its communication arts and/or math instruction.	4-3 _____	2 _____	1 _____	0 _____
3. Provider clearly explains how its reading program integrates the five effective reading instruction components.	4-3 _____	2 _____	1 _____	0 _____
4. Provider defines the unique or effective qualities in its tutoring content or strategies that will make a difference for students not succeeding in the regular school day.	4-3 _____	2 _____	1 _____	0 _____
5. Lesson plan is appropriate for content and grade level. Clear and strong references to curriculum and effective instructional strategies are evident.	5-4 _____	3-2 _____	1 _____	0 _____
6. - 7. Responses are provided for these questions.	1 _____			0 _____
8. Proposed student/tutor ratio and time allowed for sessions are conducive to student achievement. Hourly fee for instructional services is appropriate.	4-3 _____	2 _____	1 _____	0 _____
9. - 11. Responses are provided for these questions.	1 _____			0 _____
12. - 14. Responses are provided for these questions.	1 _____			0 _____
13. Applicant has been removed from another State's list of approved SES providers.	No _____			Yes _____

I. A. Program Description (Continued)	STRONG	MODERATE	LIMITED	NONE
15. Plan is in place to ensure safety of children receiving tutoring.	3 _____	2 _____	1 _____	0 _____
16. Tutors are appropriately selected and some are able to work with special populations, including ELL/LEP and students with disabilities.	3 _____	2 _____	1 _____	0 _____
17. If incentives are offered, they are reasonable and relate to achieving the Student Learning Plan objectives. (Check Yes, No, or NA for not offered)	Yes _____		No _____	NA _____
18. Plan in place to help the school develop the individual Student Learning Plans and to share these plans with parents and school staff.	4-3 _____	2 _____	1 _____	0 _____
19. If applicable, documentation submitted to verify legality of provider using software or a copyrighted program. (Check Yes, No, or NA for not applicable)	Yes _____		No _____	NA _____

Total Points /40

Comments:

Suggestions for improvement:

I. B. Program Description

**For on-line, web based providers only
(these will be additional points for applicable applications)**

	Quality of Evidence			
	STRONG	MODERATE	LIMITED	NONE
1. – 3. Provider explains what students need to access services, and a plan is in place for students without computer and/or internet access.	3 _____	2 _____	1 _____	0 _____
4. Plan in place for orientation for school and families.	3 _____	2 _____	1 _____	0 _____
5. Plan in place for continuous on-site student support.	4-3 _____	2 _____	1 _____	0 _____

I. B. Program Description (Continued)	STRONG	MODERATE	LIMITED	NONE
6. Documentation submitted to verify legality of provider's use of the software and/or web-based tools utilized in this program. (Check Yes or No)	Yes _____			No _____
Total Points				/10
Comments: Suggestions for improvement:				
II. Instructional Staff Qualifications	Quality of Evidence			
	STRONG	MODERATE	LIMITED	NONE
1. Staff qualifications are of high quality, appropriate for communication arts and/or math tutoring, and will ensure successful results.	5-4 _____	3-2 _____	1 _____	0 _____
2. Comprehensive plan in place to provide ongoing training to ensure staff will be able to offer high quality and effective tutoring services. Who will train and how often is included.	5-4 _____	3-2 _____	1 _____	0 _____
3. Plan in place to monitor and evaluate staff effectiveness.	4-3 _____	2 _____	1 _____	0 _____
4. Evidence of staff training to work effectively with parents. Content of training and who provides and when is included.	4-3 _____	2 _____	1 _____	0 _____
5. Evidence of method in place to conduct criminal background checks on all employees before hiring and to submit results to schools.	3 _____	2 _____	1 _____	0 _____
6. Resumes of <u>instructional</u> staff included.	Yes _____		Partial _____	No _____
Total Points				/21
Comments: Suggestions for improvement:				

III. Research and Effectiveness	Quality of Evidence			
	STRONG	MODERATE	LIMITED	NONE
1. Provider demonstrates evidence of positive impact the program has on student achievement in state and local testing, especially for the low-income and low achieving. Evidence of additional improved student outcomes such as attendance & behavior is included.	5-4 _____	3-2 _____	1 _____	0 _____
2. Minimum of 3 letters of reference submitted with specific comments relevant to the program's success. OR - 3 personal letters of reference for a new organization.	3 _____	2 _____	1 _____	0 _____
Total Points				/8
Comments:				
Suggestions for improvement:				
IV. Evaluation, Monitoring, Reporting	Quality of Evidence			
	STRONG	MODERATE	LIMITED	NONE
1. – 2. Provider has process in place to effectively assess and track student progress, relevant to Student Learning Plan, on an ongoing basis. Assessments used will measure the goals in the student's plan.	5-4 _____	3-2 _____	1 _____	0 _____
3. Procedure in place to report student progress to parents (in language other than English, if needed).	4-3 _____	2 _____	1 _____	0 _____
4. – 6. Plan in place to work effectively with parents so child can benefit to the fullest from these services.	3 _____	2 _____	1 _____	0 _____
7. Plan in place to track attendance and report it to parents and school.	3 _____	2 _____	1 _____	0 _____
8. Plan in place for regular reports on student progress to classroom teachers and building leaders.	4-3 _____	2 _____	1 _____	0 _____

Scoring Guide Totals

Total Points of each section:

I.A. _____ /40

II. _____ /21

III. _____ /8

IV. _____ /23

V. _____ /8

TOTAL: _____ /100

I.B. _____ /10 (Points for web-based programs only)

GRAND TOTAL: _____ of 100 or 110 (circle one)

Check here if item #13 is marked "Yes": _____

Check here if you had any "No" responses: _____

Overall Comments:

Overall Suggestions for Improvement: