

Sample Letter for Schools in School Improvement, Year 5 (Restructuring)

Date (Must be a minimum of 14 calendar days prior to the start of school)

Dear Parents:

Under the federal No Child Left Behind (NCLB) Act of 2001, the Arkansas Department of Education (ADE) is required to identify all schools in need of improvement if the school has not make adequate yearly progress (AYP) for two, or more, consecutive years.

ADE has notified our administration that **(insert school name)** will be subject to **(Restructuring)** for failure to make AYP during the time period the school was subject to Corrective Action. During the **(insert school year)** our **(insert Combined Population or Identified Sub Pop)** failed to achieve the expected percentage of students scoring proficient/advanced in **(insert literacy/math)**. Following, is information showing the expected AYP Target for the **(insert school year)** and the schools performance for the combined population and each subpopulation in the building.

(State AYP Target: _____)

(List Percent Proficient/Advanced for Combined Population and each Sub pop for which the school was accountable for. Bold the population (s) that was below the target)

Compared to other **(elementary/middle/high)** schools in the district, **(insert school name)** has a lesser percentage of **(insert the population (s) identified above)** students doing well in **(literacy/mathematics)**. If you would like more information regarding your child's school and how it compares to all schools in the state, please contact **(insert name)** at **(insert phone number)** or visit the Arkansas Department of Education's website at <http://arkansased.org/>.

As a result of the school being identified for restructuring the District has completed the required planning process for alternative governance options. We have chosen to **(Should select only ONE of the following options)**

- A. Replace all, or most, of the school staff (which may include the Principal) who are relevant to the failure to make Adequate Yearly Progress.
- B. Reopen the school as a public charter school.
- C. Enter into a contract with an entity, such as a private management company, with a demonstrated record of effectiveness, to operate the public school.
- D. Turn the operation of the school over to the State Educational Agency, if permitted under State Law and agreed to by the State.
- E. Extend the school year or school day; OR
- F. Other major restructuring of the school's governance arrangement that has been approved by ADE and makes fundamental reforms, such as significant changes in the school's staffing and governance that has substantial promise of enabling the school to make adequate yearly progress.

We will be implementing this plan during this school year: **(explain how the LEA will implement the action at the school level)**

In addition, **(insert school name)** has taken measures to implement the following programs during the upcoming school year that are designed to make a positive difference in the teaching and learning that occurs therein. **(Include examples of new programs that will be implemented during the upcoming school year)**

You are very important to your child's education. We invite you to become more involved in your child's school and partner with the school in helping address the academic issues that caused it to be identified for improvement. Following are ways in which you can become involved:

Based on the AYP status of this school, your child is eligible to transfer to another public school in the district, that is not in need of improvement, and the district will provide transportation to that school. *Please be aware that if the demand for choice exceeds funds available priority will be given to the lowest achieving students from low-income families.* You may request a transfer to one of the following schools:

(If Choice is not an option insert the reason (s) i.e. you are a charter school; there are no other schools (with comparable grade configurations) in your district; and/or all the other schools are in "School Improvement")

If you would like your child to transfer to another school, please complete the attached transfer request and send to **(insert info.)**.

If you have any questions concerning this letter or need additional information, or assistance, please contact **(insert contact information)**

In addition, any school identified for improvement (Year 2 +) is required to offer Supplemental Educational Services (SES) to eligible students from low-income families. These services are available to students **(during) (after)** the regular school day with educational providers (Title One funded schools) **(approved by the State Board of Education)** OR (Non Title One funded schools) **(selected by the district)**. If the number of eligible students who apply for SES exceeds the financial resources available the lowest achieving students from low-income families will receive first priority.

If you are interested in SES please review the attached list of providers, willing to serve the students enrolled in this school, and return the attached SES application form to the district by **(insert date)**. If you need assistance in making a provider selection please contact **(name of person)** at **(phone number)**

Sincerely,

(Superintendent of Schools)