

TITLE I, PART A-NEGLECTED FACILITY CHECKLIST (2015-2016)

District Name: _____ LEA # _____ District Contact: _____
 Facility Name: _____
 Facility Address: _____ Phone: _____
 Facility E-Mail: _____

Chandra Martin (A..., 8/24/2015 10:41 AM)
Comment [1]: this form should ONLY be completed by School Districts (who have a neglected facility in their attendance zone) in consultation with the facility; Information should be entered into the Indistar/ACSIP by the School District. A copy should be faxed to Chandra @ ADE @ (501) 682-5136.

This form should ONLY be completed by districts who have a neglected facility located in their attendance zone.

1. Who is the contact for the facility?	<input type="text"/>
2. Enter the number of kids to be served or the number you expect to serve this year?	<input type="text"/>
3. What is the amount budgeted for the facility?	<input type="text"/>
4. BUDGET JUSTIFICATION: What will the funds be used for? (Check all that apply)	<input type="checkbox"/> Tutoring <input type="checkbox"/> Professional Development (staff) <input type="checkbox"/> Paraprofessional <input type="checkbox"/> Training (students) <input type="checkbox"/> Materials & Supplies <input type="checkbox"/> Student Learning Center (SLC) <input type="checkbox"/> Mentoring Program <input type="checkbox"/> Computers & Other Equipment <input type="checkbox"/> Other: _____
5. List all staff to be paid in part or whole with Title I, Part A (Neglected) funds for providing services to this program ONLY?	<input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____ <input type="checkbox"/> _____
6. Provide the date of consultation (DOC)? (mm/dd/yyyy)	<input type="text"/>
7. Provide date of last needs assessment? (mm/yyyy)	<input type="text"/>
8. Give a summary of the results of that needs assessment. Please attach a copy of the data collection instrument for your records.	<input type="text"/>
9. TUTORING: If using funds for tutoring, provide the following: How many hours/day?	<input type="text"/>
How many days per week? Specify which days	<input type="text"/>
Who is doing the tutoring?	<input type="text"/>
Where is the tutoring taking place?	<input type="text"/>
Is the tutor Highly Qualified (HQ)?	<input type="checkbox"/> Yes <input type="checkbox"/> No
How are they Highly Qualified? (Maintain documentation at your facility/district)	<input type="checkbox"/> 60 Hours of College Credit <input type="checkbox"/> Passed ETS Test <input type="checkbox"/> Associate's Degree <input type="checkbox"/> Has Teaching License <input type="checkbox"/> Bachelor's Degree <input type="checkbox"/> Other: _____
Tell specifically what funds will be used for:	
<input type="text"/>	

Chandra Martin (ADE) 6/11/2014 2:15 PM
Comment [2]: Enter the name of the person who will be most knowledgeable of the facility & the program & services provided; this person should be the same as person listed on N&D Survey under #2 Column 4;

Chandra Martin (ADE) 6/11/2014 2:15 PM
Comment [3]: If you are unsure of the # of children, use data from last year or from the N&D survey to estimate;

Chandra Martin (A..., 8/24/2015 10:45 AM)
Comment [4]: Enter the amount of the current year's allotment from ADE's Finance office;

Chandra Martin (ADE) 6/11/2014 2:18 PM
Comment [5]: District must select at least one (1) item;

Chandra Martin (ADE) 6/11/2014 2:20 PM
Comment [6]: List all staff, first & last name; specify if paid 100% from Title I, Part A funds;

Chandra Martin (A..., 8/24/2015 10:46 AM)
Comment [7]: This is the date the district and facility met to discuss Title I, Part A; it must have occurred in the past 6 months;

Chandra Martin (ADE) 6/11/2014 2:24 PM
Comment [8]: This is the date the facility and/or district evaluated the program; must have occurred in the past 364 days;

Chandra Martin (ADE) 6/11/2014 4:36 PM
Comment [9]: Graphs and pie charts are encouraged; if more than 5 pages, please mail information & include facility & district name.

Chandra Martin (ADE) 6/11/2014 4:37 PM
Comment [10]: Answer these questions ONLY if tutoring was chosen in Item #4;

Chandra Martin (ADE) 6/11/2014 4:37 PM
Comment [11]: Provide first and last name;

Chandra Martin (A..., 8/25/2015 12:25 PM)
Comment [12]: Be specific: @ school in Library; at facility in study room, etc...