

Criteria

Provisional At-Risk Program/Practice Application

This application is for a program used with students qualifying for state at-risk funding that does not appear on the state at-risk approved evidence-based program/practice list.

Each program or practice will need to be submitted separately.

Expenditures from the at-risk fund shall only be made for the following purposes:

- 1. At-risk and provisional at-risk educational programs,
- 2. Personnel providing educational services in conjunction with such programs,

- 3. Support for instructional classroom personnel designed to provide training for evidence-based best practices for at-risk educational programs, or
- 4. Services contracted by the school district to provide at-risk and provisional at-risk educational programs.

Criteria for At-Risk Students:

- 1. Not working on academic grade level
- 2. Is not meeting the requirements necessary for promotion to the next grade; is failing subjects or courses of study
- 3. Is not meeting the requirements necessary for graduation from high school. (e.g., potential dropout)
 - 4. Has insufficient mastery of skills or is not meeting state standards?
 - 5. Has been retained.
 - 6. Has a high rate of absenteeism
 - 7. Has repeated suspensions or expulsions from school
 - 8. Is homeless and/or migrant
 - 9. Is identified as an English learner
- 10. Has social emotional needs that cause a student to be unsuccessful in school
 - 11. Is identified as a student with dyslexia or characteristics of dyslexia.

Resource:			
At-Risk Evidence-Based List			
Submitter			
Please select the school district in which you work.			
	*		
Submitter informa	ation:		
Submitter inform	acion.		
Nigrae (Cost and			
Name (first and last)			
iastj			
Current role			
Frankladdroes			
Email address			

List
Is this program/practice from the prior At-Risk Evidence-Based list? <u>Prior At-Risk Evidence-Based List</u>
O Yes O No
Do you currently use At-Risk funds for this program/practice?
O Yes O No

Program

Program/Practice Name for Consideration:

(expired programs not accepted include: Accelerated Reader, Animated Alphabet, Animated Literacy, Edgenuity, Edmark Reading, Edmentum (Plato), F&P Leveled Literacy, Fountas & Pinnell, Guided Reading, Guided Reading Plus, iLit (Inspire Literacy), Letter People, Leveled Literacy Intervention by Fountas & Pinnell, Reading Recovery, and Units of Study.)

Publisher informa	tion:	
Complete name of publisher of program/practice		
Year of publication		
Publisher website URL		
Grade level(s) for consideration of program/practice:		

What is the purpose of this program/practice? (brief description)		
	//	
Implementation Implementation of program/practice:		
implementation of program/practice.		
Role of person who implemented the program/practice		
Grade level		
Number of students		
Assessment to demonstrate need		

Tot meer verteron	
Size of groups (# of students)	
Time per session (hours)	
Number of days per week	
Total number of weeks per school year	
Number of data cycles implemented	

for intervention

Group delivery method (please share how you are implementing the program or practice as a provision for additional educational opportunities or interventions that go above and beyond regular education services):

select all that apply)	
 Extended school year Before-school programs and services After-school programs and services Summer school Extra support within a class Tutorial assistance 	
☐ Class within a class	
Other:	
Professional Development	
Professional development (PD) provided:	
Name of PD	

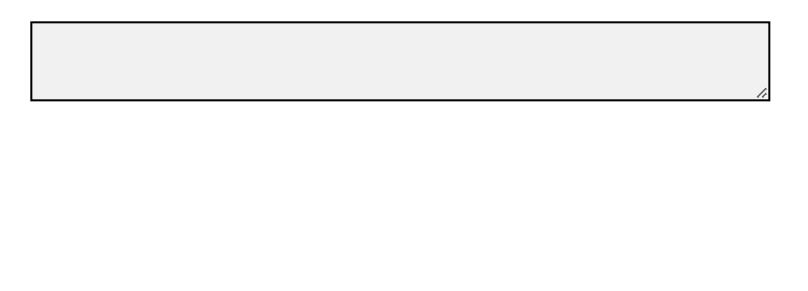
Number of staff	
receiving PD	
-	
Duration of PD	
(when was the PD	
provided)	

Data

Data upload that demonstrates gains.

(must be data related to the program/practice)

Discussion of the data (please share how the program or practice is positively impacting at-risk students):



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