

Scoring Matrix for District Corrective Action Plan (DCAP)



District Name and Number: _____

KSDE Review Team Members: _____

Date of Review: _____

Criteria for Determining Status of DCAP	Status of DCAP	Comments: (i.e. areas of concern, person to call district and provide TA, date that DCAP must be resubmitted or revised)
(1) The district did not follow the steps in the instructions for completing the DCAP; (2) Information provided was sketchy, confusing and/or off-topic; or (3) Root cause analysis information was missing or not related to the problem.	Rewrite and Resubmit DCAP	
(1) The district followed some steps in the instructions for completing the DCAP and not others; (2) Some information provided was clear, detailed and logical and other information was confusing and/or off topic; or (3) Root cause analysis information was unclear, sketchy and/or superficial.	Revise Portions of the DCAP	
(1) The district followed all the steps in the instructions for completing the DCAP; (2) Information provided was clear, detailed and logical; and (3) Root cause analysis information was clear, detailed and logical.	DCAP Accepted	