

R E P O R T R E S U M E S

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UD 004 365

INSTRUCTIONS FOR ANNUAL EVALUATION REPORT FOR FISCAL YEAR  
1967, SCHOOL YEAR 1966-67, PUBLIC LAW 89-10, ELEMENTARY AND  
SECONDARY EDUCATION ACT OF 1965.

SOUTH DAKOTA STATE DEPT. OF PUBLIC INSTR., PIERRE

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THIS DOCUMENT CONTAINS THE GUIDELINES FOR THE PROJECT  
EVALUATION WHICH IS REQUIRED ANNUALLY OF EVERY LOCAL AND  
COUNTY EDUCATIONAL AGENCY UNDER THE REGULATIONS OF THE  
ELEMENTARY AND SECONDARY EDUCATION ACT. THERE ARE SPECIFIC  
INSTRUCTIONS FOR SUPPLYING INFORMATION ABOUT PROJECT  
ACTIVITIES AND SERVICES AND FOR SUMMARIZING THE DATA  
COLLECTED TO MEASURE PROGRESS TOWARD REALIZING THE PROJECT'S  
GOALS. THE FORM TO BE FILLED OUT FOR THE ANNUAL EVALUATION  
REPORT IS INCLUDED. (NH)

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INSTRUCTIONS FOR ANNUAL EVALUATION REPORT

FOR FISCAL YEAR 1967

SCHOOL YEAR 1966-67

PUBLIC LAW 89-10

ELEMENTARY AND SECONDARY

EDUCATION ACT

of 1965

UD 004 365 - 1

STATE OF SOUTH DAKOTA

*Dept. of Public Instruction*

## INSTRUCTIONS FOR COMPLETING TITLE I - PROJECT EVALUATION

This annual evaluation report is to be completed by every local and county educational agency serving as an administrative agency for a Title I project. The information requested on this part of the report is an accounting of information concerning the activities and services provided by this project and a summarization of data collected to measure progress toward the objectives of the project. A copy of this form must be completed for each project administered by a local or county educational agency.

### PRELIMINARY INSTRUCTIONS:

Date evaluations due: September 1, 1967

Return to: Title I Evaluation  
Box 700  
Spearfish, South Dakota 57783

All information must be furnished except where not applicable and if this is the case in some areas, write in "not applicable." Remember, every category must be filled in before the evaluation will be accepted.

NOTE: Evaluations not received by Sept. 1, 1967 will be returned to the State Department of Public Instruction with the recommendation that schools not satisfactorily completing the evaluation be denied funding for the year 1967-1968.

- Item 1. Provide a brief descriptive title of the project. This is the title used to identify the project on the fiscal year 1967 application form.
- Item 2. Enter the State and local project number. These are the numbers assigned to the project by the State and local education agency at the time the project was approved.
- Item 3. Check only one answer.
- Item 4. Enter the total amount of funds approved for this project after all amendments. Insert the last number of the total amount in the box at the right. The remaining boxes are then completed and zeros are inserted in any unused boxes to the left of the last number.

### Examples:

\$41,234.25 is entered in this manner.

[0][4][1][2][3][4].[2][5]

\$52,475.00 is entered in this manner.

[0][5][2][4][7][5].[0][0]

- Item 5. Enter the total amount of funds committed for this project. This includes all expenditures.

NOTE: Expenditures are defined by the U.S. Office of Education as the actual disbursement of cash plus the total of all unliquidated obligations.

Example: A local educational agency has disbursed \$25,175.15 during the project. In addition, it has outstanding obligations in the amount of \$1,417.16. Both of these figures are to be included in the total amount of expenditures requested in Items 5, 6 and 10.

Item 6. Enter the total amount of funds committed for each of the categories requested in this item.

Item 7. Enter the total number of mobile facilities purchased or rented in the categories requested.

Item 8. Indicate the coordination achieved between this project and the local community action agency.

Item 9. This item requests information on cooperative projects.

Item 9A. Indicate if this is a cooperative project by checking yes or no.

ANSWER ITEMS 9B AND 9C ONLY IF THE ANSWER TO ITEM 9A IS YES.

Item 9B. Enter the total number of local educational agencies that participated in this project.

Item 9C. Do you intend to continue this project in fiscal year 1968? Please check either yes or no.

Item 10. Indicate if this project provided the staff with in-service training by checking either yes or no.

ANSWER ITEMS 10B, 10C and 10D ONLY IF THE ANSWER TO ITEM 10A IS YES.

Enter in Items 10B and 10C only the number of individuals who received eight or more clock hours of organized in-service education or training the cost of which was paid from Title I funds. Do not count individuals who received in-service training merely by participating in periodic meetings of the project staff.

Item 10D requests the total amount of funds committed for all in-service training in this project. This may include such expenditures as tuition, fees, book allowances, transportation, per diem and contracted services.

Item 11. This item requests information only on the staff of this project.

Item 11A. Indicate the entire staff of this project by specific assignments.

NOTE: Some of the same staff members may be listed more than once. For example, a remedial teacher may be employed during the regular school year and also in the summer school. In this case, the teacher would be listed in either Column 2, 3 or 4 and also in Column 5.

Columns 2, 3 and 4. Enter in these columns only staff who were employed during the regular school year.

Columns 2 and 3. Enter in these columns only staff members who were new employees hired as a result of this project.

Column 2. Enter the number of new employees who were hired full time.

Column 3. Enter the number of new employees who were hired less than full time.

Column 4. Enter the number of regular staff who were assigned paid responsibilities in this project (either full time or part time responsibilities).

Column 5. Enter the number of staff who were employed in summer school. (Summer school staff already listed as regular school year staff will be listed a second time.)

Column 6. Enter the number of paid staff members indicated in Columns 2, 3, 4 and 5 who received in-service training.

NOTE: See Item 10 for a definition of in-service training.

Column 7. Enter the number of unpaid volunteers who assisted this project.

Column 8. Enter by type of assignment the total number of positions approved but not filled.

Item 11B. Enter the total number of professional staff (paid employees only) who had temporary approval to serve in the positions they held in this project.

Item 11C. Enter the total number of unpaid volunteers who received in-service training in this project.

NOTE: See Item 10 for a definition of in-service training.

Item 11D. Enter the total number of outside consultants or professional specialists employed in this project. This includes only individuals not under contract to the local educational agency and not included in Item 11A. This would include such individuals as a university professor paid to conduct an in-service training program, a clinical psychologist retained on a temporary basis to provide evaluations of a few children, a local physician compensated for physical examinations for project children, etc.

Item 11E. Indicate Yes or No as indicated.

Item 11F. Consultants from a private firm would be any consultant not a member of a University or College staff.

Item 12. This item requests information only on children attending non-public schools

who participated in this project.

Item 12A. Indicate yes to the item only if children from non-public schools participated in one or more activities and services in this project.

Item 12B. ANSWER ONLY IF RESPONSE TO ITEM 12A IS YES.

Enter in the appropriate boxes the total number of non-public children who participated by the categories requested. Children may be listed more than once if they participated in more than one of the categories requested.

Item 13. Enter in this item by categories requested the number of children who participated in these categories in this project.

This is to include all children regardless of enrollment, i.e., public school children, non-public school children and children not enrolled in any school at the beginning of the Title I project.

Item 13A. Enter the total number of children in this project receiving the services listed in Column 1. In cases where a child received these services in both the regular school year and the summer school, count the child twice; once for regular school and again for summer school.

Column 2. Enter the total number of children in this project receiving services during the regular school year.

Column 3. Enter the total number of children in this project receiving services during the summer school.

Item 13B. Enter the total number of children participating in this project who may be classified in the five categories in this item.

Item 13C. Enter the total number of parents of children participating in this project who received the types of benefits indicated in this item.

Item 14. Enter in this item the information requested which describes the evaluation design used in this project and the information obtained as a result of this evaluation design.

Item 14A. Check the one evaluation design which best describes the evaluation design used in this project. If "Other" is checked, please explain briefly the evaluation design used in this project.

Item 14B. Check either yes or no.

Item 14C. Enter the project activities and services judged most effective in meeting the objectives of the project. Please enter the one most effective activity or service. You may enter as many as

three activities or services. However, do not enter more than one activity or service unless there is good reason to judge these additional activities and services as very effective in meeting the objectives of the project.

Column 1. Enter the name of the effective activity or service.

Column 2. Enter the numbers of the grades that participated in this activity or service. Abbreviate pre-school (P), kindergarten (K), and ungraded groups (U).

Column 3. Enter briefly the most important factor or factors contributing to the success of the activities or services entered in Column 1.

Item 14D. Enter the one project activity or service you judged least effective in meeting the objectives of the project. If you judge all of the project activities and services to be effective, please enter the word 'None'.

Column 1. Enter the name of the one activity or service judged least effective.

Column 2. Enter the numbers of the grades that participated in this activity or service. Abbreviate pre-school (P), kindergarten (K), and ungraded groups (U).

Column 3. Enter briefly the most important factor contributing to the ineffectiveness of the activity or service entered in Column 1.

Item 14E. Indicate briefly the most important problem you encountered in the evaluation of this project. If no problem was encountered, please enter the word 'None'.

Item 14F. Indicate 'None' if no problems were encountered.

Item 15. Indicate in this item the activities and services conducted in this project. Be certain to use the appropriate code numbers when completing this item.

NOTE: Indicate only the most important activities and services. Do not list every possible activity or service. For example, a remedial reading activity may utilize the services of a teacher associate. If the teacher associate assisted in the remedial reading activity exclusively, it would not be necessary to list this individual as a separate activity. However, if the teacher associate was used to assist regular classroom teachers in one or more rooms, it would be appropriate to list this individual as a separate activity.

Column 1. Enter the most appropriate code numbers for the most important activities and services conducted in this project. If necessary, to cover variations in such factors as objectives, length of activity, grades included, etc., it may be necessary to list the same activities or services more than once.

Select the code from the list below.

<u>Code</u>	<u>Activity</u>	<u>Code</u>	<u>Service</u>
111	Art	211	Food Services
112	Business Education/Office Occupations	214	Clothing Services
113	Cultural Enrichment	215	Waiver of Fees for Books, Supplies and Materials
114	English Language Arts	216	Health
115	English as a second language	217	Psychiatric Services
116	Reading	218	Psychological Services
117	Foreign Language	219	School Social Work
118	Home Economics	220	Attendance Services
119	Industrial Arts	221	Guidance and Counseling
120	Kindergarten	222	Library Services
121	Mathematics	223	Curriculum Materials Center
122	Music	224	Tutoring/After School Study Center
123	Physical Education/Recreation	225	Transportation
124	Pre-kindergarten	226	Services for Parents
125	Science	227	In-service Training for Staff
126	Social Studies		
127	General Elementary and Secondary Education		
128	Speech Therapy		
129	Special Education for the Handicapped (not including speech therapy)		
130	Vocational (other than 112)		
131	Work Study		
132	Reduction of Class Size/Additional Teaching Staff		
133	Teacher Associates		
134	Clerical Aides		

Column 2. Enter the most appropriate code numbers for the grade level of the children served in this activity or service. It may be necessary to enter more than one code number if more than one of the grade levels listed below was included.

Select the code from the list below.

<u>Code</u>	<u>Grade Level</u>
1	Pre-kindergarten/Kindergarten
2	Grades 1 - 3
3	Grades 4 - 6
4	Grades 7 - 9
5	Grades 10 - 12

Columns 3, 4, and 5. Enter the total number of children who participated in this activity or service.

Column 3. Enter the total number of children participating in this activity or service who attended public schools.



Column 4. Enter the total number of children participating in this activity or service who attended non-public schools.

Column 5. Enter the total number of children participating in this activity or service who were not enrolled in any school at the beginning of the Title I project.

Column 6. Enter the most appropriate code numbers for the objectives which this activity or service is designed to meet. It may be necessary to enter more than one code number if this activity or service was designed to meet more than one objective. However, it is important to limit the number of objectives entered to the one or two most important objectives. It is not necessary to enter every possible objective.

Select the code from the list below.

<u>Code</u>	<u>Objective</u>	<u>Code</u>	<u>Objective</u>
	<u>Achievement</u>		<u>Behavior</u>
11	To improve general achievement as measured by standardized achievement tests	41	To improve the childrens' average daily attendance
12	To improve classroom performance in reading beyond usual expectations	42	To decrease the dropout rate
13	To improve classroom performance in arithmetic beyond usual expectations	43	To reduce the rate and severity of disciplinary problems
14	To improve classroom performance in other skill areas beyond usual expectations (science, social studies, etc.)	44	To improve and increase the childrens' attention span
15	To improve classroom performance as measured by teachers' grades	45	To increase participation in organized school activities
16	To improve study skills		
	<u>Ability</u>		<u>Conditions Related to Learning</u>
21	To improve performancy as measured by standardized tests of intellectual ability	51	To improve the physical health of the children
22	To improve childrens' verbal functioning	52	To improve the nutritional health of the children
23	To improve childrens' non-verbal functioning	53	To improve the childrens' emotional and social stability
24	To improve school readiness	54	To provide adequate clothing for children
	<u>Attitudes</u>	55	To provide more appropriate educational materials and equipment for the children
31	To improve the childrens' self-image		
32	To change attitudes toward school and education		

- 33 To raise occupational and/or educational aspirational levels
- 34 To increase the expectation of success in school
- 35 To develop an appreciation for the arts

Column 7. Enter the appropriate code numbers for the evaluation instruments used to measure progress toward the objectives entered in Column 6. It may be necessary to enter more than one code number if more than one evaluation instrument has been used. However, it is important to limit the number of evaluation instruments entered to those that are most significant. Do not attempt to enter every possible evaluation instrument.

Select the code from the list below.

<u>Code</u>	<u>Evaluation Instrument</u>
11	Standardized Achievement Test
12	Standardized Intelligence Test
13	Standardized Aptitude Test
14	Standardized Interest Inventory
15	Standardized Attitude Inventory
16	Other Standardized Tests or Inventories
17	Locally Devised Tests
18	Teacher Made Tests
19	Locally Devised Inventories
21	Teacher Rating Scales
22	Anecdotal Records
23	Observer Records
24	Teacher Grades
25	Attendance Records
26	School Health Records
27	Records of Participation in Organized school Activities
28	Reading Records
29	Parent Questionnaires

Column 8. Enter the code number which most appropriately describes the degree of success achieved by the activity or service in meeting the stated objectives.

Select the code from the list below.

<u>Code</u>	<u>Degree of Success</u>
1	Substantial progress achieved
2	Some progress achieved
3	Very little progress achieved
4	No progress achieved

Column 9. Enter the code numbers which most appropriately describe the factors that contributed most to the success of this activity

or service in meeting the stated objectives. Enter the one or two important factors that contributed most to the success of the project. Do not list every possible factor.

<u>Code</u>	<u>Factor Contributing to Success</u>
11	This activity had been under study for some time and we were able to implement it without difficulty when Title I funds became available.
12	Adequate staff was available.
13	New materials and equipment were essentially responsible for the success.
14	Needed physical facilities were easily obtained.
15	In-service training experiences.
16	This was essentially an extension of an already successfully operating activity.
17	No problems encountered scheduling activity as far as time was concerned.
18	The relative simplicity of organizing this type of activity.
19	Only activity where our evaluation instruments were able to demonstrate measurable progress.

Column 10. Enter the code number which most appropriately describes the one factor that represented the greatest weakness in this activity or service. If no weakness was observed in this activity or service, please enter the word 'None'.

Select the code from the list below.

<u>Code</u>	<u>Greatest Weakness</u>
11	Obtaining adequate professional staff.
12	Obtaining adequate non-professional staff.
13	Equipment and supplies were late in arriving.
14	Inadequate planning time.
15	Inadequate physical space to conduct project activities.
16	Inadequate evaluation design.
17	Scheduling problems during school day.
18	Failed to motivate children sufficiently.
19	Parental opposition.

Column 11. Indicate the length of time this activity or service was operated by entering in this column the actual number of weeks that this activity or service was made available to children. If the entire activity or service was operated during the summer school, please place the letter 'S' before the number which indicates the number of weeks.

Examples: An activity was operated for fourteen weeks during the regular school year.

ENTER [14]

An activity was operated for six weeks during the summer school only.

ENTER S6

Column 12. Enter the code numbers which most appropriately describe the special types of children who participated in this activity or service. Enter a code number here only if all or a major portion of the children in the activity may be described by one of the codes listed below. In many cases, these codes will not be appropriate since the majority of the children in the activity or service cannot be characterized by these descriptions. If such is the case, please enter the word 'None'.

Select the code from the list below.

<u>Code</u>	<u>Special Types of Children</u>
11	School dropouts.
12	Delinquent children.
13	Children from migrant families.
14	None-English speaking children.
15	American Indian children.
16	Crippled children.
17	Hard of hearing or deaf children.
18	Mentally retarded children.
19	Seriously emotionally disturbed children.
21	Speech impaired children.
22	Visually handicapped children.
23	Other health impaired children.

Item 16. Enter in this item the results of standardized tests and other types of data used to evaluate the activities and services described in Item 15.

NOTE: An illustration of a completed Item 16 is presented on page 23.

Item 16A. Enter in this item the results of standardized tests used to measure progress toward the objectives identified in Item 15. Please observe the following suggestions when completing this item.

1. Enter the results of no more than two different tests for any one grade. The form allows space for recording the pretest and posttest results for two standardized tests for each grade. You may have administered more than two standardized tests for a particular grade in your evaluation design. However, we are requesting that you submit data on no more than two tests.
2. Record test results by grade only on the actual children who participated in the project. You may have administered a test to all twenty-five children in a grade. However, if only ten of these children participated in this project, record the test results for only these ten children.

3. An opportunity is offered to record both pretest and posttest results for standardized tests. If you are not able to record both a pretest and a posttest, please record the results of the single administration of the test in the appropriate space; i. e., a test administered prior to or near the beginning of the project should be recorded on the line identified PRE, and a test administered at the conclusion of a project or later should be recorded on the line identified POST.
4. Record the results only of a single subject area test or test battery subtest that measures the objectives of the project. Do not record the composite results of an entire standardized achievement test battery.
5. Where decimal numbers are obtained, please round off all decimal numbers to the nearest hundredth.

Column 1. Enter the number of the grade you are reporting. Abbreviate pre-school (P), kindergarten (K) and ungraded groups (U).

Column 2. Enter the name of the standardized test you are reporting. Please record the exact name of the test.

Column 3. Enter the name of the exact subject area test that is being recorded.

Example: If you are reporting the results of the reading subtest of the Continental Achievement Test Battery, you would simply record the name of the subject area, READING.

Column 4. Enter the exact form of the standardized test you are reporting.

Column 5. Enter the date the test you are reporting was administered. Enter only the month and year.

Column 6. Enter the code number of the objective that was measured by this standardized test.

NOTE: Refer to the coded list of Item 15, Column 6, to obtain the correct code number.

Column 7. Record the number of children participating in this project for whom you are reporting test results on this line.

Column 8. Record the mean raw score for the number of children participating in this project for whom you are reporting test results on this line. The mean raw score is simply the arithmetic average; i. e., the total number of correct responses for each child divided by the total number of children.

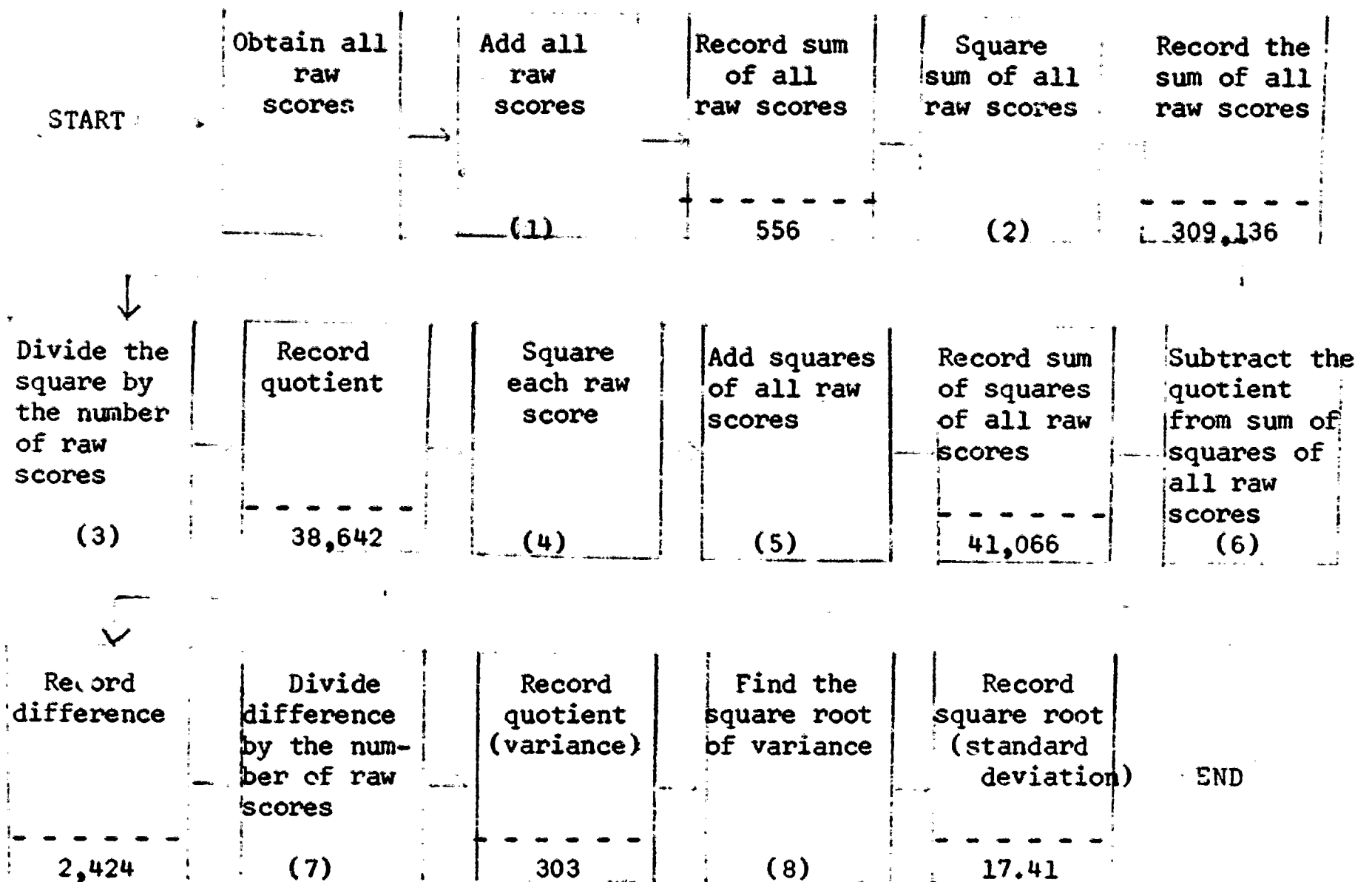
Column 9. Record the raw score standard deviation for the number of children participating in this project for whom you are reporting test results on this line. The standard deviation

is a statistic used to express the extent of the deviations from the mean for the distribution. It is obtained by taking the square root of the mean of the squares of the deviations from the mean of a distribution.

The following example illustrates a relatively simple method for obtaining the standard deviation.

Example:

METHOD FOR DETERMINING STANDARD DEVIATION  
(Short Method)



Raw Scores	x	(4)	$x^2$	(7)	303
	78		6084		8   2424
	65		4225		
	79		6241	(8)	$\sqrt{303} = 17.41$
	93		8649		
	37		1369		
	65		4225		
	87		7569		
	52		2704		
	<hr/>		<hr/>		
(1)	556	(5)	41,066		
(2)	556 x 556 = 309,136		41,066		
(3)	38,642	(6)	<u>-38,642</u>		
	8   309,136		2,424		

Standard Deviation - 17.41

Column 10. Enter the norm group used for comparison purposes when reporting the percentile results of this test administration. This would in most cases be a national, state or local group.

Example: If you are comparing the project participants with a national norm group of fifth grade children, enter 5 NAT.

Column 11. Enter the number of children participating in this project for whom you are reporting test results on this line who have percentile scores between 0 - 24.

Column 12. Enter the number of children participating in this project for whom you are reporting test results on this line who have percentile scores between 25 - 49.

Column 13. Enter the number of children participating in this project for whom you are reporting test results on this line who have percentile scores between 75 - 99.

Item 16B. Enter in this item the results of evaluation data (other than standardized tests) used to measure progress toward the objectives identified in Item 15. Please observe the following suggestions when completing this item.

1. Enter the results of no more than two different types of evaluation data for any one grade. The form allows space for recording the pretest and posttest results for two different types of evaluation data for each grade. You may have used more than two types of evaluation data for a particular grade in your evaluation design. However, we are requesting that you submit the results of no more than two types of evaluation data.
2. Record evaluation data by grade only on the actual children who participated in the project. You may have collected evaluation data on all twenty-five children in a grade. However, if only ten of these children participated in the project, record the results for only these ten children.
3. An opportunity is presented to record both pretest and posttest results for two types of evaluation data. If you are unable to record both a pretest and a posttest, please record the results of data collected in the appropriate space; i. e., data collected prior to or near the beginning of the project should be recorded on the line identified PRE, and data collected at the conclusion of a project or later should be recorded on the line identified POST.

Column 1. Enter the number of the grade you are reporting. Abbreviate pre-school (P), kindergarten (K) and ungraded groups (U).

Column 2. Enter the type of evaluation data you are reporting. Please be as specific as possible in identifying the type of data.



Column 3. Enter the date when the data was collected. Enter only the month and year.

Column 4. Enter the code number of the objective that was measured by this evaluation data.

NOTE: Refer to the coded list of Item 15, Column 6, to obtain the correct code number.

Column 5. Enter the number of children participating in this project for whom you are reporting evaluation data on this line.

Column 6. Enter a brief summary of the results of the evaluation data collected. Please be as specific as possible.

ILLUSTRATION FOR PREPARATION OF ITEMS 16A AND 16B

16. Measurement of project activities and services by grades participating (complete for each grade participating).

A. Standardized Test Results

Grade	Name of Test	Subject Area	Form	Date	Objective	Number Tested	Mean Raw Score	Raw Score S.D.	Norm Group	0-2425-4950-7475-99 %ile	11-12 %ile	13-14 %ile
1	2	3	4	5	6	7	8	9	10	11	12	13
5	Pre Capital Reading Test	Reading	A	1/66	12	10	21.29	3.41	Local	10	0	0
	Post Capital Reading Test	Reading	B	5/66	12	10	25.36	2.87	Local	8	2	0
5	Pre Continental Achievement	Reading	CC	9/65	12	8	69.50	17.41	Fall Nat.	7	1	0
	Post Continental Achievement	Reading	DD	9/66	12	10	74.87	16.87	Fall Nat.	6	4	0

16. Measurement of project activities and services by grades participating (complete for each grade participating).

B. Summary of Other Evaluation Data

Grade	Type of Data	Date	Objective	Number Evaluated	Summary of Results
1	2	3	4	5	6
5	Pre No. of books read	1/66	12	10	Read an average of 2.6 books during fall semester.
	Post No. of books read	5/66	12	10	Read an average of 3.8 books during spring semester.
5	Pre Attendance Records	1/66	41	10	Absent an average of 5.4 days during fall semester.
	Post Attendance Records	5/66	41	10	Absent an average of 4.6 days during spring semester.

Item 17. Instructions.

Column 1. From the list below enter the characteristics (with corresponding code numbers) which are most common among the educationally deprived children in the eligible attendance areas and are sufficiently severe to indicate a need for the services of a Title I project.

<u>Code</u>	<u>CHARACTERISTICS</u>	<u>Code</u>	<u>CHARACTERISTICS</u>
	<u>Achievement</u>		<u>Behavior</u>
11	Poor performance on standardized tests	41	High absentee rate
12	Classroom performance significantly below grade level in reading	42	High dropout rate
13	Achievement significantly below grade level in other skill areas	43	Disciplinary problems
14	Other achievement characteristics (specify)	44	Short attention span
		45	Other behavior characteristics (specify)
	<u>Ability</u>		<u>Characteristics Related to Learning Difficulties</u>
21	Poor performance on standardized tests of intellectual ability	51	Poor health
22	Low level in verbal functioning	52	Malnutrition
23	Low level in non-verbal functioning	53	Emotional and social instability
24	Other ability characteristics (specify)	54	Lack of clothing
		55	Other (specify)
	<u>Attitude</u>		<u>Handicapped</u>
31	Negative self-image	61	Mentally retarded
32	Negative attitude toward school and education	62	Hard of hearing
33	Low occupational and educational aspiration level	63	Deaf
34	Expectations of school failure	64	Speech impaired
35	Other attitude characteristics (specify)	65	Visually handicapped
		66	Seriously emotionally disturbed
		67	Crippled
		68	Other health impaired

Column 2. Use the following abbreviations to indicate the grade levels of children whose characteristics are listed in column 1:

P-Prekindergarten      E-Elementary  
K-Kindergarten         S-Secondary

Column 3. Enter the number of children having the characteristics listed in column 1.

Item 18. Select the code from the list below.

<u>Code</u>	<u>Cultural</u>
1	Poor home environment
2	Indian population
3	Migrant workers

- 4 Linguistic problem
- 5 Limited cultural opportunity
- 6 Rural area

Item 19. Information requested relative to ADA and ADM must be furnished for the 1966-1967 school year. If the information is available for the previous two years please include.

DEFINITIONS:

Average Daily Attendance (ADA)- The aggregate days attendance of a given school during a given reporting period divided by the number of days school is in session during this period. Only days on which the pupils are under the guidance and direction of teachers should be considered as days in session. The reporting period is generally a given regular school term. The average daily attendance for groups of schools having varying lengths of terms is the sum of the average daily attendance obtained for the individual schools.

Average Daily Membership (ADM)-The aggregate days membership of a given school during a given reporting period divided by the number of days school is in session during this period. Only days on which the pupils are under the guidance and direction of teachers should be considered as days in session. The reporting period is generally a given regular school term. The average daily membership for groups of schools having varying lengths of terms is the sum of the average daily memberships obtained for the individual schools. For purposes of obtaining statistical comparability only, pupil-staff ratios involving kindergarten and nursery pupils attending a half-day session are computed as though these pupils are in membership for a half day.

Item 20. Dropout study. All information requested must be furnished.

DEFINITION:

Dropout--A pupil who leaves a school, for any reason except death, before graduation or completion of a program of studies and without transferring to another school.

Item 21. Please include short narrative statement for each Title on the form. Write 'None' if area does not apply.

Item 22. Check only one of the methods.

Item 23. Continuing education worksheet. Fill in as requested. Write 'None' if not applicable.

04365

State of South Dakota  
DEPARTMENT OF PUBLIC INSTRUCTION  
Pierre, South Dakota

ED017554

ANNUAL  
EVALUATION  
REPORT  
FOR  
FISCAL YEAR 1967  
(School Year 1966-67)

PROJECT EVALUATION

Separate Report of Project Evaluation Must be Completed for Each Project.

Please refer to instructions in booklet, Instructions for Submitting Annual Evaluation Report for Fiscal Year 1967 (School Year 1966-67).

The undersigned hereby declares that to the best of my knowledge the information contained in this report is correct and complete.

Legal Name of Education Agency		Name and Title of Authorized Representative		SMSA Code
Mailing Address (Street, City or Town, Zip Code No.)			Signature	
County	State	Telephone (Area Code and No.)	Date Signed	
Name and Title of LEA Evaluator		Mailing Address	Telephone	

1. Brief Descriptive Title of the Project

2. State Project No. 3. Project Operative (check one)

Regular School Year Only A

Summer Months Only B.

Both C

Local Project No.

4. Total funds approved for this project after all amendments.

\$									
----	--	--	--	--	--	--	--	--	--

5. Total amount of funds committed for each category requested.

\$									
----	--	--	--	--	--	--	--	--	--

6. Total funds committed for this project. Only indicate funds actually committed in this project.

A. Total funds committed for all salaries.

\$									
----	--	--	--	--	--	--	--	--	--

B. Total funds committed for all equipment-capital outlay. (Exclude funds for mobile classrooms, trailers, and self-propelled equipment.)

\$									
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C. Total funds committed for all instructional materials and supplies. \$

D. Total funds committed for remodeling. \$

E. Total funds committed for purchase of mobile classrooms, trailers and self-propelled equipment. (Include both purchase and lease purchase.) \$

F. Total funds committed for rental of physical facilities. \$

7. Mobile facilities (mobile classrooms, trailers, and self-propelled equipment).

A. How many mobile classrooms were purchased (include lease purchase)?

B. How many trailers were purchased (include lease purchase)?

C. How many self-propelled items of equipment were purchased (include lease purchase)?

D. How many mobile classrooms or trailers were rented?

E. How many self-propelled items of equipment were rented?

8. Coordination with Community Action Programs

A. Did this project receive the approval of a community action agency? 

Yes <input type="checkbox"/> (1)	No <input type="checkbox"/> (2)
--	---------------------------------------

B. Did the local community action agency assist with the planning of this project? 

Yes <input type="checkbox"/> (1)	No <input type="checkbox"/> (2)
--	---------------------------------------

C. Check the statement which best describes the assistance provided by the community action agency in implementing this project. (Check only one statement.)

(1) No assistance of any kind. (1)

(2) Provided opportunity for referral sources only. (2)

(3) Provided supplementary services to children from funded community action agency project. (3)

(4) Provided funds to jointly fund this project. (4)

9. Cooperative Projects

A. Is this a cooperative project? 

Yes <input type="checkbox"/> (1)	No <input type="checkbox"/> (2)
--	---------------------------------------

**If answer is Yes, complete items 9B and 9C.**

B. How many local educational agencies cooperated in this project?

Yes	No
<input type="text"/>	<input type="text"/>
(1)	(2)

C. Is this intended to be a continuing project?

**Staff Training**

A. Was staff provided with in-service training as a part of this project?

If answer is Yes, complete items 10B, 10C and 10D.

Yes	No
<input type="text"/>	<input type="text"/>

B. How many public school staff members participated in training?

C. How many non-public school staff members participated in training?

D. Total funds committed for in-service training.

\$

**Project Staff**

A. Number of project staff

(List each staff member only once by major activity assignment in this project.)

Major Activity Assignment	Regular School Year			Summer School Only	Reg. In-Service Training	Unpaid Volunteers	Positions Not Filled
	New Full Time	Positions. Less Than Full Time	From Reg. Staff				
1.	2	3	4	5	6	7	8
<b>Teachers</b>							
(1) Pre-Kindergarten							
(2) Kindergarten							
(3) Elementary							
(4) Secondary							
(5) Handicapped							
<b>Other Professional</b>							
(6) Librarian							
(7) Supervision-Administration							
(8) Counselor							
(9) Psychologist							
(10) Social Worker							
(11) Speech Therapist							
(12) Nurse							
(13) Other							

Non-Professional							
(14) Teacher Aids							
(15) Clerical							
(16) Other							

B. How many project staff indicated in Item 11A had only temporary approval for their assignment?  
(Include only paid professional staff.)

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C. How many unpaid volunteers indicated in Item 11A received in-service training as a part of this project?

--	--

D. How many outside consultants or professional specialists were employed in this project?  
(Include only those retained on a temporary basis and not included in Item 11A.)

--	--

E. Were consultants hired from the state?

Yes	No
(0)	(1)

F. Were consultants hired from a private firm?

Yes	No
(0)	(1)

G. State the amount paid for consultants services.

\$ 

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2. Non-Public School Children

A. Did non-public school children participate in this project?

Yes	No
(1)	(2)

If answer is yes, complete Item 12B

B. Number of children participating by facilities and schedules.

Public School Facilities Only

(1) During regular school day.

(1)				
-----	--	--	--	--

(2) Before School

(2)				
-----	--	--	--	--

(3) After School

(3)				
-----	--	--	--	--

(4) Weekends.

(4)				
-----	--	--	--	--

(5) Summer.

(5)				
-----	--	--	--	--

(6) Combination of above

(6)				
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Non-Public School Facilities Only

- (7) During regular school day.
- (8) Before School.
- (9) After School.
- (10) Weekends.
- (11) Summer.
- (12) Combination of above.

(7)					
(8)					
(9)					
(10)					
(11)					
(12)					

Both Public and Non-Public School Facilities

- (13) During regular school day.
- (14) Before School.
- (15) After School
- (16) Weekends
- (17) Summer
- (18) Combination of above

(13)					
(14)					
(15)					
(16)					
(17)					
(18)					

Facilities Other Than Public or Non-Public Schools

- (19) During regular school day.
- (20) Before School
- (21) After School
- (22) Weekends
- (23) Summer
- (24) Combination of above

(19)					
(20)					
(21)					
(22)					
(23)					
(24)					

(Children may be counted more than once.)

13. Project Participants

A. Indicate the number of children participating in the following services.  
(Children may be counted more than once.)

Service	Regular School Year	Summer School								
1	2	3								
(1) Free Breakfast	(1) <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td></tr></table>					(1) <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td></tr></table>				
(2) Free Lunch	(2) <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td></tr></table>					(2) <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td></td><td></td><td></td><td></td></tr></table>				

- |  |                           |                           |
|--|---------------------------|---------------------------|
| (3) Free Snack                               | (3) <input type="text"/>  | (3) <input type="text"/>  |
| (4) Free Clothing benefits                   | (4) <input type="text"/>  | (4) <input type="text"/>  |
| (5) Free Medical Examinations                | (5) <input type="text"/>  | (5) <input type="text"/>  |
| (6) Free Dental examinations                 | (6) <input type="text"/>  | (6) <input type="text"/>  |
| (7) Speech Therapy                           | (7) <input type="text"/>  | (7) <input type="text"/>  |
| (8) School nurse                             | (8) <input type="text"/>  | (8) <input type="text"/>  |
| (9) Psychological or psychiatric examination | (9) <input type="text"/>  | (9) <input type="text"/>  |
| (10) Excused from activity or other fees     | (10) <input type="text"/> | (10) <input type="text"/> |
| (11) Field Trips and excursions              | (11) <input type="text"/> | (11) <input type="text"/> |
| (12) Employed with Title I funds             | (12) <input type="text"/> | (12) <input type="text"/> |

B. Indicate the number of children participating who may be classified in one or more of the following categories.

- |  |                          |                          |
|--|--------------------------|--------------------------|
| (1) Home-bound   | (1) <input type="text"/> | (1) <input type="text"/> |
| (2) Placed in special education classes for mentally retarded children as a result of this project                     | (2) <input type="text"/> | (2) <input type="text"/> |
| (3) Dropouts   | (3) <input type="text"/> | (3) <input type="text"/> |
| (4) Handicapped sent to outside educational agencies on a tuition basis for all or a part of their educational program | (4) <input type="text"/> | (4) <input type="text"/> |
| (5) From migrant families  | (5) <input type="text"/> | (5) <input type="text"/> |

C. Indicate the number of parents of participating children who received the following project benefits  
(Parents may be counted more than once.)

- |   |                          |                          |
|---|--------------------------|--------------------------|
| (1) Attended special classes or workshops | (1) <input type="text"/> | (1) <input type="text"/> |
| (2) Received counseling or social work    | (2) <input type="text"/> | (2) <input type="text"/> |
| (3) Paid staff member or unpaid volunteer | (3) <input type="text"/> | (3) <input type="text"/> |

14. Evaluation

A. Classify this project according to the evaluation design used.  
(Check the one statement which best describes the evaluation design used in this project.)

- (1) Two group experimental design using the project group and a conveniently available non-project group as the control. (1)
  - (2) One group design using a pretest and post test on the project group to compare observed gains or losses with expected gains. (2)
  - (3) One group design using pre-test and/or post test scores on the project group to compare observed performance with local, state or national groups. (3)
  - (4) One group design using test data on the project group to compare observed performance with expected performance based upon data for past years in the project school. (4)
  - (5) One group design using test data on the project group, but no comparison data. (5)
  - (6) Other (6)   
If Other is checked, please explain.
- 
- 

B. Did you contract with an outside agency or individual to assist with the evaluation of this project? Yes  (1) No  (2)

C. Project activities and services judged most effective in meeting objectives of project.

Most Effective Activities & Services (List in order of effectiveness.)	Grades Included	Most Important Factors Contributing to Effectiveness
1	2	3
(1) _____	_____	_____
(2) _____	_____	_____
(3) _____	_____	_____
_____	_____	_____

D. Project activity or service judged least effective in meeting objectives of project.

Least Effective Activity or Service	Grades Included	Most Important Factor Contributing to Ineffectiveness
1	2	3
(1) _____	_____	_____
(2) _____	_____	_____
(3) _____	_____	_____

E. Indicate the most important problem you encountered in the evaluation of this project. (Indicate none, if no problem was encountered.)

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F. Indicate the principal problems encountered in implementing the project.

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15. Project Activities and Services

Activity or Service	Grades	Number of children		Objective	Evaluation Instruments	Degree of Success	Contributed Most to Success	Greatest Weakness	Length of Activity (Weeks)	Type of Children	
		Public	Non-Public								Enrolled
1	2	3	4	5	6	7	8	9	10	11	12
(a)											
(b)											
(c)											
(d)											
(e)											
(f)											
(g)											
(h)											
(i)											
(j)											
(k)											
(l)											
(m)											
(n)											
(o)											
(p)											
(q)											
(r)											

6. Measurement of project activities and services by grades participating (complete for each grade participating.)

A. Standardized Test Results

Grade	Name of Test	Subject Area	Form	Date	Objective	Number Tested	Mean Raw Score	Raw Score S. D.	Norm Group	0-24 %ile	25-49 %ile	50-74 %ile	75-99 %ile
1	2	3	4	5	6	7	8	9	10	11	12	13	14
	PRE												
	POST												
	PRE												
	POST												
	PRE												
	POST												
	PRE												
	POST												
	PRE												
	POST												

16. Measurement of project activities and services by grades participating (complete for each grade participating).

B. Summary of Other Evaluation Data

Grade	Type of Data	Date	Objective	Number Evaluated	Summary of Results
1	2	3	4	5	6
	PRE				
	POST				
	PRE				
	POST				
	PRE				
	POST				
	PRE				
	POST				
	PRE				
	POST				
	PRE				
	POST				

17. List the characteristics of educationally deprived children in rank order which indicate their need for special educational assistance under Title I.

Refer to instructions for Code Numbers.

Code number of child characteristics	Code number for grade level	Number of Children
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>
<input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

18. List cultural problems which you feel have contributed to the cultural deprivation of your student population.

Refer to instructions for Code numbers.

1.     2.     3.     4.     5.



GRADE	1964- 1965				1965 - 1966				1966 - 1967				
	Total School		Title I Participants		Total School		Title I Participants		Total School		Title I Participants		
	ADA	ADM	ADA	ADM	ADA	ADM	ADA	ADM	ADA	ADM	ADA	ADM	
12													
11													
10													
9													
8													
7													
6													
5													
4													
3													
2													
1													

Note: Total School means ADA and ADM for the entire student body by grade.  
Title I participants means ADA and ADM for actual students in Title I programs only. Keep the two categories separate.  
 See instructions for definitions of "Average Daily Attendance" and "Average Daily Membership".  
 Purpose: To obtain % of attendance.  
 ADA and ADM should be computed for total school district and Title I participants by grade.

20. Number of Dropouts for Title I Project Schools

Grade	Year 1964-1965		Year 1965-1966		Year 1966-1967	
	Total No. in Grade	Total Dropouts per Grade	Total No. in Grade	Total Dropouts per Grade	Total No. in Grade	Total Dropouts per Grade
12						
11						
10						
9						
8						
7						
6						
5						
4						
3						
2						
1						

21. Inter-Relationship of Title I with other Titles of ESEA

How are funds for Title I being used in connection with:

1. Title II \_\_\_\_\_  
\_\_\_\_\_
2. Title III \_\_\_\_\_  
\_\_\_\_\_
3. Title IV \_\_\_\_\_  
\_\_\_\_\_
4. Title V \_\_\_\_\_  
\_\_\_\_\_

22. Establishing Project Areas

Check the most widely used method for establishing project areas.

- |                    |       |
|--------------------|-------|
| Census information | _____ |
| ADC payments       | _____ |
| Health statistics  | _____ |
| Housing statistics | _____ |
| School surveys     | _____ |
| Other (specify)    | _____ |