

# Third Grade Reading Guarantee

## Application for External Service Providers

**Purpose of this application:** The Euclid City School District seeks to solicit applications to develop a list of approved external service providers that can provide interventions, supports and resources to our district with students who have been retained due to the Third Grade Guarantee.

**INSTRUCTIONS:** Please review and follow all directions carefully when completing this application.

- ✓ Type responses in the space provided.
- ✓ Make sure that all sections have been addressed in the application.
- ✓ Acquire appropriate signatures for the assurance page.

If you have questions, contact Heather Miller, Director of Curriculum & Instruction at 216-797-2980 or [hmillier@euclidschools.org](mailto:hmillier@euclidschools.org).

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**SUBMISSION INSTRUCTIONS:** The application for the approved service providers list must be submitted by July 1, 2014. Please send an e-mail with the attached application to [hmillier@euclidschools.org](mailto:hmillier@euclidschools.org)

**EVALUATION OF APPLICATION:** Applications will be reviewed by a committee using uniform, objective criteria. Final approval will be the decision of the review committee. Applicants will be notified in writing of their approval status. All areas of the application will be evaluated using a six-point rubric.

### EVALUATION RUBRIC

**All evaluated areas will use the following six-point quality scale for each rubric item or question:**

1. There is no evidence or irrelevant evidence that the data substantiates the educational needs described in the project summary.
2. There is minimal evidence and/or limited potential that the data provided substantiates the educational needs.
3. The data provides some evidence as to the educational need; however, there are some inconsistencies between the data supplied and the correlation to the need.
4. The summary provides some good examples of data substantiating the educational needs.
5. Strong, relevant data to substantiate the educational needs throughout the application are provided; high potential of need based upon data.
6. High-level of evidence, supported by relevant data, to substantiate the educational needs of the children; data strongly suggests educational needs.

Indicators of Quality (Section 3)	Criteria	Weight
	Program description	1
A.	Evidence of effectiveness	3
B.	Evidence that program design is research-based	2
C.	Alignment to Ohio's New Learning Standards for reading	3
D.	Needs assessment	1
E.	Communication of progress to the school/district and state agency	1
F.	Communication with parents and families	1
G.	Qualifications of external supporting partners	3
H.	Financial soundness and organizational capacity	1

## EXTERNAL SUPPORTING PARTNER

**NAME AND ADDRESS OF EXTERNAL SUPPORTING PARTNER**

(Include street, city, state, zip code) Include P.O. Box numbers, if applicable.

**Check all that apply:**

- For-profit entity
- Non-profit entity
- Educational Service Center (ESC)
- Individual
- Community organization
- Institution of higher learning
- Other \_\_\_\_\_

**FEIN or SOCIAL SECURITY NUMBER:**

**NAME AND TITLE OF CONTACT PERSON**

**TELEPHONE NUMBER (include area code)**

**FAX NUMBER (include area code)**

**E-MAIL ADDRESS**

**WEBSITE**

**HOURS OF OPERATION**

## SECTION 1 – EXTERNAL SUPPORT PARTNER SERVICE SUMMARY

**Proposed Service Areas**

Please list area(s) that services will be available.

## BASIC PROGRAM INFORMATION

1. External Supporting Partners will be available to serve students in the following area(s): (Check all that apply)

- Reading difficulties with fluency
- Reading difficulties with decoding
- Reading difficulties with comprehension
- Vocabulary development
- Students with special needs related to reading development
- Oral language development
- Language and literacy development
- Other \_\_\_\_\_

2. Minimum number of students the provider is willing to serve: \_\_\_\_\_

3. Check the specific reading components with which the applicant has sustained, proven successful experience in serving. (Check all that apply.)

- |   |  |
|---|--|
| <input type="checkbox"/> Response to Intervention (RTI)   | <input type="checkbox"/> Language and literacy development |
| <input type="checkbox"/> Dyslexia   | <input type="checkbox"/> Decoding                          |
| <input type="checkbox"/> Comprehension  | <input type="checkbox"/> Targeted reading intervention     |
| <input type="checkbox"/> Reading difficulties in English language learners and students with disabilities |  |
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## **SECTION II - PROGRAM DESCRIPTION**

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Provide a concise description of the program and services offered by providers. Identify experiences with specific students with reading difficulties. Other areas to address may include needs assessment, turnaround models and specific strategies used to evaluate the program's effectiveness.

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## **SECTION III - INDICATORS OF QUALITY**

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The following measures will be considered to determine the quality of services provided. For items below, submit a detailed narrative response to address each statement.

### **A. Evidence of effectiveness**

1. Provide evidence that the external service provider has had a positive impact in the following areas:
  - Student achievement in reading
  - Staff capacity of outside service provider
  - Improved student outcomes (e.g., attendance, retention/promotion rates, graduation rates)
  - Parent and community involvement (if applicable)
  - Leadership effectiveness
  - School culture

### **B. Evidence that program design is research-based**

1. Explain the theoretical and empirical research base for the external service provider model.
2. Research citations **must** be provided.

### **C. Alignment to Ohio's New Learning Standards and the Third Grade Reading Guarantee**

1. Describe the model's alignment to Ohio's New Learning Standards and Ohio's Third Grade Reading Guarantee.

### **D. Needs assessment**

1. Describe the diagnostic process that the external service provider will use to conduct a staffing needs assessment. Include the name of any instruments that will be utilized to assess the service provider's effectiveness. The needs assessment should take into account the perspective of all stakeholders, including administration, teachers, parents, students and community partners as well as other qualitative and quantitative data.

### **E. Communication of school progress to the district and school**

1. Describe the procedures used to report progress on meeting student improvement goals to the district and building-level staff.

### **F. Communication with parents and families**

1. Describe the procedures for engaging parents in the intervention process.
2. Describe past successful efforts to engage parents and other stakeholders.

### **G. Qualifications of external service providers (limited to key personnel)**

1. Describe external service provider's staff qualifications for providing reading intervention and support including training, certification and endorsements.
2. Describe related employment experience, professional development experiences and professional affiliations.

3. Describe the procedures for recruiting and hiring competent staff. **Background checks must be a part of this procedure.**

## H. Financial soundness and organizational capacity

1. Submit evidence demonstrating that your organization is financially sound. **Evidence must include:**
  - ✓ A copy of an audit report or an audited financial statement that has been completed within the last two years and ensures no substantive findings were indicated that would compromise the financial soundness of the entity.
  - ✓ Description of how the external supporting partner currently receives funds.
  - ✓ Proof of liability insurance (include company name and policy number, or a copy of the policy cover page.)
2. Submit evidence demonstrating that your organization has a sound management structure and adequate organizational resources to successfully provide uninterrupted quality services for the term of the contract with the district or school. **Evidence must include:**
  - ✓ A copy of a current business license or formal documentation of legal status for conducting business in Ohio.
  - ✓ A description of procedures and/or sample forms used to document student improvement.  
**Optional evidence may include:**
    - Sample contracts or agreements for services provided.
    - A description of an experienced management team who is involved in setting direction and maintaining a leadership system (e.g., CEO, marketing director, and director of staff development).
    - A copy of an organizational chart for your organization.

## Assurances

Assurances are made to the Ohio Department of Education and public districts that the external supporting partner will:

1. Ensure that background checks of all employees have been conducted and have produced no evidence of criminal records. Records of employees must be made available to the state and local educational agencies upon request.
2. Ensure that no disclosure to the public will be made of the identity of any student in a school receiving external partnership services without the written permission of the parent/guardians of such students.
3. Ensure that no disclosure to the public will be made of the identity or the data of the school or district making the external partnership services available without the written permission of the school or district.
4. Ensure that accurate records are kept to document the needs assessment, the development and completion of a reading improvement plan for the student(s) and the evaluation reading interventions services and results.
5. Ensure that all applicable federal, state, and local health, safety and civil rights laws are being met and that all instruction and content are secular, neutral and non-ideological.

6. Ensure that instruction provided and materials used by the applicant are consistent with the instruction provided and content used by the local and state educational agencies and furthermore are aligned with Ohio's New Learning Standards.
7. Ensure that the provider will not discriminate based on race, national origin, sex or disability in providing eligible schools with supportive educational services under the Elementary and Secondary Education Act.
8. Ensure that students with disabilities will be provided services that are consistent with the student's individualized education program under section 614 of the Individuals with Disabilities Education Act.
9. Ensure that parents/guardians of students in schools receiving external supporting partnership services and the appropriate local and state educational agencies are provided with information on the progress of the student(s) in increasing reading achievement on a timely basis and in a format and language that such parents/guardians can understand.
10. Ensure that all provisions of the agreement between the provider and the local educational agency are fulfilled. Failure to do so will render the agreement null and void.
11. Ensure that the provider will cooperate with the monitoring of the quality and effectiveness of the services offered by the approved provider.
12. Ensure that an annual performance report that summarizes the progress of the student(s) receiving external supporting services is completed and submitted to the district or community school.
13. Ensure that the provider will submit written notification to the district or community school when external support services will no longer be provided or available from the applicant.

I, the undersigned, hereby certify that I am the individual authorized to act on behalf of the organization in submitting this application and assurances. I certify that all the information herein is true and accurate to the best of my knowledge. I understand that if any of the information contained herein is found to have been deliberately misrepresented that may constitute grounds for denying the applicant's request to be an approved provider for the State of Ohio or for removal from that same list. Furthermore, I certify that this entity will comply with the assurances set forth herein.

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Name of Applicant or Organization (Date)

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Signature of External Supporting Partner Official (Date)