_____ School or District

GENERAL INFORMATION

Please Email completed form to	
School	Contact Person
Program Name/Publisher	URL

JUSTIFICATION

I. <u>Target Areas</u>
Grade Levels: K 1 2 3 4 5 6 7 8 9 10 11 12 Number of students potentially impacted: Number of teachers committed to using:
ELA: Reading Writing Listening Research/Inquiry
Math: Concepts/Procedures Problem Solving & Modeling Communication & Reasoning
Other subject:
State Content Standards addressed by program:
RTI/MTSS Use: Tier 1 Tier 2 Tier 3
II. <u>Purpose</u>
What area of need does this program address? Please refer to the LCAP, your SPSA, State Content Standards, current educational research, assessment data showing need, or site-based data.

IMPLEMENTATION and ASSESSMENT

I. <u>Goal</u> (Use SMART language where appropriatei.e% of students will be able to so that OR% of grade students will show a% increase in proficiency in).	
II. <u>Data</u>	







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What qualitative and/or quantitative data will you collect to evaluate student outcomes? Over what duration of time? How many teachers and students will be involved?
III. <u>Usage</u>
What is the planned weekly expected usage of the program that teachers will be held accountable to?
Days per week: Minutes per day:
What is the time requirement recommended by the program? Days per week: Minutes per day:
Is that time requirement based on research? Yes No Program Provides (Check all that apply):
usage-tracking school-wide usage- tracking by classroom
usage-tracking by student (time on task, etc)
student progress in real time formative assessment data for teachers
differentiated instruction personalized learning
Not listed (please describe):
PROGRAM QUALITY
To determine whether the program is likely to support student learning, we want to know if the program has
earned any of the following non-profit issued certifications to indicate likely efficacy and effectiveness. The
program should provide any certifications issued, including date issued and currently active to confirm the
certification has not expired.
Program Has Earned the Following Product Certifications (Check all that apply):
Evidence-Based Edtech Tier 3 Evidence-Based Edtech Tier 4
Research Based Design Practitioner-Informed Design
Learner Variability Universal Design for Learning
ISTE Seal
Not listed (please describe):







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PROFESSIONAL LEARNING

What is the training/PL plan? Who is the lead program, if outside training is needed, if distri		_	this		
When will the Discours like a continue to		Г -ft	١		
When will the PL occur? Have participating tea	achers agreed to this PL? (AC	E, after school, release time, etc)		
How often will data be incorporated into PLC a	and what systems are in place	e to ensure that this happens?			
BUDGET					
Please delineate all anticipated program costs, and indicate if the company provides a free pilot or trial period. Please include costs for training, technical support, hardware and software costs, ongoing costs, etc.					
Description	Funding Source	Cost			
With my signature, I certify that if any hard coordinated with (tech department)	·		have		
Signature of Site Administrator		Date			

TECHNOLOGY (implementation costs and what student data will be collected)

Technology Requirements Checklist (*Please submit the two documents below with your application*):







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National Data Privacy Agreement signed before purchase (NDPA)
Technology Checklist completed by program company - to verify the program will function on network (this will be
different for every district - work with your technology department)

SCORING RUBRIC (To be completed by _____)

Each component of the application will be scored on a scale of one to three to assess the value of the recommended program. Applicants are advised to refer to the rubric when drafting their applications.

3 = Complete/Strong 2 = Committee Needs Additional Information 1 = Poor/Incomplete

CRITERIA	3	2	1
JUSTIFICATION There is a clear area of need that is grounded in the LCAP, School Site Plan, State Content Standards, current educational research, and site-based data. There is potential for many students to be impacted and/or those students who are identified demonstrate a high level of need.			
IMPLEMENTATION AND ASSESSMENT Throughout the implementation process, there are multiple opportunities to collect qualitative and/or quantitative data to demonstrate that the program is impacting student learning. This data relates to and supports the stated goal of the program.			
PROFESSIONAL LEARNING Professional learning is a component of implementation, and there are school-wide systems in place to plan, access, and evaluate the impact of the program on student learning.			
BUDGET The proposed budget is realistic. It includes program costs and the site has researched whether a free pilot or trial period is available. If substitutes are needed, those costs are also delineated.			
TECHNOLOGY Both required documents are completed and attached to the application.			
PROGRAM QUALITY The program has earned at least one product certification issued by Digital Promise, ISTE, and/or CAST to indicate that the program is likely to see positive student impact.		Yes = 2 No = 0	
Accessibility Has the program received CAST's Universal Design for Learning (or another accessibility) certification? Yes = 2 No = 0		-	

Total: _____

15-19 = Recommend for Purchase 12-14 = Deserves Strong Consideration 9-11 = Moderate Value Applications with fewer than 12 points should be returned to the school site for reconsideration or revision.







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