

# **Application Supplemental Education Service Provider**

## **IOWA DEPARTMENT OF EDUCATION**

**Submit to:**

**Susan Selby  
Title I Consultant  
Iowa Department of Education  
Division of Learning & Results  
Bureau of School Improvement  
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Des Moines, IA 50319**

**515-281-4732**

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This Application Form was adapted from the *SEA Toolkit on Supplemental Educational Services* developed by the Council of Chief State School Officers (CCSSO) and the Education Quality Institute (EQ).

It is the policy of the Iowa Department of Education not to discriminate on the basis of race, color, national origin, gender, disability, religion, creed, age, or marital status in its programs or employment practices. If you have questions or grievances related to this policy, please contact the Chief, Bureau of School Improvement, Grimes State Office Building, Des Moines, Iowa 50319-0146, 515-725-2888.

## **Purpose and Intent**

This application is issued to select providers of supplemental education services that will be included on the Supplemental Education Services provider list. This is not a competitive grant. All providers that meet required criteria will be included on the approved provider list. The list will be maintained by the Iowa Department of Education and will indicate the geographical areas in which each provider offers supplemental education services.

The *No Child Left Behind Act* requires that the state promote maximum participation by providers to ensure, to the extent practicable, that parents have as many choices as possible. The state list will be updated on an annual basis. Each spring, the application process will be open to additional prospective providers. Providers of supplemental education services may also be removed from the list annually subject to the conditions listed in this application.

It is expected that instruction will be primarily in the areas of reading and math in order to help students achieve their local school district's standards as demonstrated by improved district wide achievement scores. Additional instruction in other curricular areas, such as language arts, science and social studies, can be provided if requested by parents of participating students.

## **Background**

Under the Title I, Part A, of the *No Child Left Behind Act* (Elementary and Secondary Education Act), low-income students attending schools that do not make adequate yearly progress for three consecutive years (i.e., schools in the second year of improvement) may receive supplemental education services. States are responsible for identifying eligible supplemental education service providers. Parents choose the provider for their children from among the providers approved by the state.

State education agencies must develop and apply objective criteria to create an approved list of providers. States must also consult with parents, teachers, school districts, and interested members of the public to identify a wide array of provider options for students. States must update this list of approved providers on at least an annual basis and must provide a list for school districts of the approved providers in their geographic area.

School districts are required to arrange for the provision of supplemental education services and must provide parents with information on the availability of supplemental education services, the approved providers, and, at a minimum, a brief description of the services, qualifications, and demonstrated effectiveness of each provider.

## **Definitions**

**Supplemental Education Services** are tutoring or other education services that provide extra academic assistance to students outside the regular school day. The *No Child Left Behind Act* states that these services must be of high quality, research-based, and specifically designed to increase the academic achievement of eligible children.

**Service Provider** is defined as a non-profit entity, a for-profit entity, or a school district. Entities eligible to apply to provide supplemental education services may include, but are not limited to:

- Community agencies
- Local Education Agencies
- Public schools
- Private schools

- After-school programs
- Child care centers
- Public schools
- Libraries
- Community colleges
- Private companies
- On-line schools
- Family literacy programs/Even Start programs
- Boards of Cooperative Educational Services (BOCES)
- Faith-based organizations

### **Eligibility Requirements**

To be approved as a supplemental education services provider, an applicant must meet the following minimum criteria:

- Have a demonstrated record of effectiveness or have a high probability of increasing student academic achievement.
- Provide supplemental education services that are consistent with the Iowa Core academic standards.
- Provide instruction that is of high quality, research-based, and specifically designed to increase academic achievement of eligible children on local school district assessments and attain proficiency in meeting the local school district's academic achievement standards. Reading instruction must be scientifically based and proven to be effective and include the National Reading Panel Report criteria (1) Alphabetics, (2) Fluency, (3) Comprehension, (4) Teacher Education and Reading Instruction, and (5) Computer Technology and Reading Instruction. ([www.nifl.gov](http://www.nifl.gov)).
- Be financially sound.
- Provide instruction in addition to what is provided during the school day.
- Provide instruction that is secular, neutral, and non-ideological.
- Meet all applicable Federal, State, and local health, safety, and civil rights laws.

### **Responsibilities of the Approved Provider**

A supplemental education services provider is required to do the following:

- Ensure that the instruction provided is aligned with the local school district's academic achievement standards and, in the case of a student with disabilities, is consistent with the student's individualized education program under section 614(d) of the Individuals with Disabilities Education Act.
- Provide parents of children receiving supplemental education services and the appropriate school with information on the progress of the children in a format and, to the extent practicable, in a language that the parents can understand.
- Ensure that all employees who will interact with students will be fingerprinted and have a background check.
- Submit required annual report and other data and/or information as requested by the Iowa Department of Education.
- Enter into an agreement with the local school district that includes:
  - A statement of specific achievement goals for each student based upon the child's specific educational needs
  - A description of how the student's progress will be measured
  - A timetable for improving achievement, that, in the case of a student with disabilities, is consistent with the student's Individual Education Program
  - The amount of instructional time to be provided
  - The location where services will be provided

- The means of transporting the child to the place of instruction if the services will be provided in a location other than the student's school
- A description of how the student's parents, teacher(s), and school district will be regularly informed of the student's progress
- Provisions for the termination of agreement
- Provisions for payment to the provider by the school district
- An assurance from the provider that the identity of any student eligible for or receiving supplemental education services will not be disclosed without the written permission of the parents of the student
- Provisions for evidence of interaction with students if the provider uses a web-based program
- A description of the scientifically based program to be utilized
- The qualifications of staff responsible for the delivery of the instructional program

### **Responsibilities of the School District**

A school district is required to:

- Identify eligible students
- Notify parents annually (in an understandable and uniform format, and, to the extent practicable, in a language the parents can understand) of:
  - The availability of supplemental education services
  - The approved providers whose services are within the school district or whose services are reasonably available in neighboring school districts
  - A brief description of the services, qualifications, and demonstrated effectiveness of each approved provider to assist the parent in selecting a provider
- Contact providers selected by the parents and enter into a contractual agreement on behalf of the student
- Monitor the "Responsibilities of the Approved Provider" listed above

A district is not required to provide transportation to those services offered away from the school location. A district must continue to offer supplemental education services until the school(s) in question is/are no longer identified as a School In Need of Assistance.

### **Funding**

The school district is responsible for paying the provider for services rendered. Statute limits the cost of services to the district's per-pupil allocation under Title I, Part A or the actual cost of the supplemental services, whichever is less ( i.e. a district per pupil Title I allocation might be \$250, therefore only \$250 or less per child may be allocated by this district for supplemental education services and the cost should be directly related to the services provided).

### **Duration and Monitoring**

The Iowa Department of Education, in cooperation with the appropriate school districts, is required to monitor the quality and effectiveness of the services offered by approved providers and to withdraw approval from providers that fail, for two years, to contribute to increasing the academic proficiency of students to whom they provide services or that fail to meet any of the other eligibility requirements, assurances, or reporting requirements. The Iowa Department of Education monitoring will be conducted through contact with local school districts to ascertain the effectiveness of providers. A violation of any of the above referenced service provider responsibilities constitutes grounds for immediate removal from the state list. In addition to an evaluation of the provider's responsibilities listed above, a provider's effectiveness will be evaluated through its students' achievement.

## **Reporting**

At the end of each year, the Iowa Department of Education will provide a year-end report to the provider to complete and submit to the Iowa Department of Education. This report will summarize the progress of all students provided with supplemental services. This information, along with a report completed by each school district with which a provider contracts, will be used to determine if a provider will remain on the state approved list. The report will be e-mailed to each approved provider.

## **How To Submit An Application**

E-mail a completed application to Susan Selby at [susan.selby@iowa.gov](mailto:susan.selby@iowa.gov). Once an application is received, a confirmation e-mail will be provided indicating that the application has been received. If you receive no confirmation, please contact Susan Selby at 515-281-4732.

## **How the Applicants are Selected**

The Iowa Department of Education will train reviewers to read and score the applications. Based on the quality of the applications, results of the review will be one of the following:

1. Full approval as a supplemental education service provider for the following two years
2. Conditional approval as a supplemental education service provider for the following one year if the applicant has no prior history of delivering supplemental services to students in Iowa
3. Denial as a supplemental education service provider if the applicant does not meet the federally required criteria or, if format criteria are not followed.

## **Scoring**

There are two rounds of the review process:

1. Each application that has been submitted as directed will be reviewed for format criteria.
2. Applications that meet format criteria will be reviewed for federally required criteria. To be approved, an applicant must meet all federally required criteria.

## **Notification of Acceptance**

An applicant will be notified via e-mail of the results of the review. The approved provider list will be posted on the Iowa Department of Education web site at <https://www.educateiowa.gov/pk-12/no-child-left-behind/supplemental-educational-services-ses>. Applicants who do not meet the qualifications may reapply in future years.

## Application Instructions

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

- Applications must adhere to any required formatting, page limits or attachments.
- Any alterations or modifications to this document (other than to fill in the required information) will disqualify the application.
- No supplemental material will be considered.
- Attachments are limited to those specifically requested in the document. No CDs, DVDs or other multimedia productions will be accepted.
- **All** attachments must have a header that includes the following information. This is also the format for saving/titling the attachment.
  - Company Name.Attachment Identifier.Section.Question Identifier/Definition of Attachment (See examples below)

ABC Tutors.Attachment A.Section B.Question1B.Letters of Reference

ABC Tutors.Attachment B.Section B.Question7A.Resumes

- Address each section/component as it appears in the application. Applications will not be accepted with narratives or information provided as attachments unless otherwise specified in a section of the application.

### **How To Submit An Application**

1. Save the application with the following format:

**Company Name SES Provider Application 2015**

Example below:

**ABC Tutors SES Provider Application 2015**

- **Submit the application and attachments (see directions above for formatting attachments)** in one email with a subject line that is the same as your saved application (ABC Tutors SES Provider Application 2015). Applications are due no later than April 1, 2015. If you have a problem submitting all the documents in one email, contact Susan Selby.
- Once an application/attachments are received, a confirmation e-mail will be provided indicating that the application has been received. If you receive no confirmation, please contact Susan.

Contact information:

Susan Selby  
**Title I Consultant**  
Iowa Department of Education  
[susan.selby@iowa.gov](mailto:susan.selby@iowa.gov)  
Phone: 515-281-4732

**Section A. Basic Program Information**

|   |   |
|---|---|
| <b>Program Name</b>                           |   |
| <b>Date organization formed</b>               |   |
| <b>Specific student populations served</b>    | Low-income<br>Minority<br>Migrant<br>Limited English proficient<br>Special education<br>Other:            |
| <b>Service Areas</b>                          | Statewide<br>Region(s):<br>District(s):   |
| <b>Place of Service</b>                       |   |
| <b>Subject Areas</b>                          | Reading    Math    Other  |
| <b>Grade Levels</b>                           |   |
| <b>Time of Service</b>                        | Before school<br>After school<br>Weekends<br>Summer<br>Other:   |
| <b>Mode of Instruction</b>                    | Face to face<br>Online<br>Other:  |
| <b>Maximum number of students served</b>      |   |
| <b>Teacher/student ratio</b>                  |   |
| <b>Minimum qualifications of staff</b>        | Masters/PhD                      4 Year Degree<br>Licensed Teacher                2 Year Degree<br>Other: |
| <b>Is transportation offered by provider?</b> | Yes    No   |
| <b>Cost per session</b>                       |   |
| <b>Contact Information</b>                    | Name:<br>Address:<br>Phone:<br>E-mail:<br>Website:  |

**Has your organization provided supplemental education services in Iowa in the past?**

No. Application will be considered for 1-year approval .For providers that do not have a history of services in Iowa: Applications will be evaluated based on the extent to which you can demonstrate that your proposed program and services are based on effective practices.

Yes. Application will be considered for 2-year approval

**Has your organization been removed as an approved provider from another state?**

No  
Yes            State(s):

Detailed explanation of removal:

## Section B. Indicators of Quality

### 1. Evidence of Effectiveness

Your application in this area will be evaluated based on the extent to which you can demonstrate that your program and services are effective in raising student achievement. **You must address information about the impact on low-income students.** Where appropriate, cite research that supports your program. See the What Works Clearinghouse website on scientifically based research for more guidance: <http://ies.ed.gov/ncee/wwc/>.

**All applicants answer the following:**

- 1A. Describe the positive impact on student achievement as demonstrated on district &/or other independent, valid, and reliable performance tests. (Limit of 5000 characters.)

**All applicants select and address two of the following indicators:**

1B. Positive impact on student performance using a measure that is not national or statewide (e.g., a test that is unique to your organization, school grades, homework completion, school/teacher-administered test) (Limit of 5000 characters.)

1C. Letters of reference: Please label and include letters as an attachment. (See instructions on page 6)

Attachment Titled:

1D. Provide additional evidence of improved outcomes for districts you have served in the past. (e.g. student attendance, retention/promotion/graduation rates, family/parent satisfaction, student behavior) (Limit of 5000 characters.)

## 2. Evidence of Links Between Research & Program Design

Your application in this area will be evaluated based on the extent to which you are able to clearly and specifically explain how the key instructional practices and major design elements of your program meet the following criteria:

1. High quality
2. Research-based
3. Specifically designed to increase academic achievement

For programs that offer reading instruction, the findings of the National Reading Panel (Alphabetics, Fluency, Comprehension, Teacher Education and Reading Instruction, and Computer Technology and Reading Instruction) (<http://www.nationalreadingpanel.org/>) must be addressed. You must include research citations.

2A. Explain the instructional practices used with students including the theoretical and empirical rationale behind major elements of your program. Examples of major elements may include mode of instruction, class size, time on task, etc. Ensure that your narrative includes information about the three points mentioned above. (Limit of 5000 characters.)

2B. Research Citations: (Limit of 5000 characters.)

### **3. Connections to Iowa Core Academic Standards**

Your application in this area will be evaluated based on the extent to which you are able to clearly and specifically describe your program's connection to Iowa Core academic reading and math standards.

3A. Describe the ways in which your program's curriculum and instructional methods directly connect to Iowa Core academic standards, specifically those for reading and math. Provide examples of specific standards your curriculum and lessons address. (Limit of 5000 characters.)

#### **4. Monitoring Student Progress**

Your application in this area will be evaluated based on the extent to which you clearly describe the specific programs and practices you use to diagnose a student's needs, prescribe an instruction program to meet the student's needs, and evaluate and monitor the student's progress towards clearly identified goals. **All indicators must be addressed.**

4A. Describe the specific process you use to assess/diagnose student needs, identify skill or knowledge gaps, and prescribe an instructional program based on the student's individual needs. (Limit of 2000 characters.)

4B. Describe the specific process you use to evaluate, monitor, and track student progress on a continuous and regular basis. (Limit of 2000 characters.)

4C. Describe how you develop a timetable for each student's achievement gain that includes clear goals for the student. (Limit of 2000 characters.)

**5. Communication with Schools & Districts** (This section is optional for school districts)

Your application in this area will be evaluated based on the extent to which you demonstrate a clear link between the academic program a student experiences in the regular school day and the instruction and content of the supplemental education program you provide. Clearly explain the specific methods, tools, and processes you use to communicate student progress to schools and describe how you ensure a connection between the school program and your own services. **Both indicators must be addressed.** Unless you are a school district.

I am a school district, skip to question 6.

5A. Describe how you ensure a connection between your instructional program and the program in place at the students' school(s). If your program differs from the district's prevailing instructional or curricular approach, explain why it differs and how it meets student academic needs. (Limit of 3000 characters.)

5B. Describe the specific procedures you use to report on student progress to your students' teacher(s) and appropriate school or district staff. Procedures must reference frequency of this communication. (Limit of 3000 characters.)

## 6. Communication with Parents & Families

Your application in this area will be evaluated based on the extent to which you demonstrate a consistent and specific process for providing parents and families with information about the progress of their child and providing that information in a format and language that parents can understand. Clearly explain what methods, tools, and processes you use to communicate students' progress to your students' parents and families. **All indicators must be addressed.**

6A. Describe the specific procedures you use to report on student progress to your students' parent/families. Procedures must reference frequency of this communication. (Limit of 1000 characters.)

6B. Describe how you involve parents in determining goals and a timetable for their child's academic progress. (Limit of 1000 characters.)

6C. Describe how you accommodate the needs and schedules of working parents. (Limit of 1000 characters.)

6D. Describe your process for resolving any disputes or conflicts you or your staff may have with parents. (Limit of 1000 characters.)

6E. Are parents required to participate in the service you provide? If yes, describe their expected role and how you work with parents to explain this role. (Limit of 1000 characters.)

6F. Do you train staff to work with parents? If yes, please describe this training, including an explanation of the content, to whom it's offered, and when it's offered. (Limit of 1000 characters.)

6G. Are you able to provide information to parents and families in languages other than English? If so, which languages? (Limit of 1000 characters.)

## 7. Qualifications of Instructional Staff

Your application will be evaluated based on the extent to which you offer evidence of highly qualified staff and demonstrate a commitment to ongoing professional development and improvement of your own products and services.

You may use the following as sources of evidence:

- The amount and quality of training provided to program staff
- Years and level of work experience, particularly in working with Title I students
- Highest degree attained
- Certification of staff

If you employ fewer than five staff members, please submit as attachments a resume for each staff member that outlines employment experience, professional development experiences, and professional affiliations.

### **All indicators must be addressed.**

7A. Do you employ five staff or less?                      Yes        No

Attachment Titled:

7B. Describe your staff qualifications to provide high quality supplemental education services.

Attachment Titled:

7C. Describe your (and/or your staff's) experience working with Title I students. (Limit of 3000 characters.)

7D. Describe professional development you (and/or your staff) attend to improve your instruction, products, and services (include an explanation of the content, to whom it is/was offered, and when the training is/was offered). (Limit of 3000 characters.)

7E. Describe your process for recruiting and hiring high quality staff, offering ongoing training opportunities, and regularly reviewing staff performance. (Limit of 3000 characters.)

**8. Financial & Organizational Capacity** (This section is optional for school districts)

Your application will be evaluated based on the financial security and capacity to deliver quality services over time and at scale. All applicants must address financial security and two organizational capacity indicators.

**Financial Security Indicator (Required of all applicants)**

8A. I am a school district, skip to question 9.

8B. Provide a narrative that includes information explaining the financial soundness of your organization. (Limit of 3000 characters.)

8C. In addition to this narrative, select at least one of the following is to be included as an attachment(s):

Audited financial statements

Credit ratings from an independent rating agency

Proof of liability insurance (company name & policy number or copy of policy cover page)

Descriptions of financial and staff resources, organizational budgets that account for revenues, expenses, and cash flow activity; outline of roles and responsibilities of staff

Attachment Titled:

**Organizational Capacity Indicators (All applicants must address two indicators)**

8D. Explain the structure of your organization and how management is involved in setting direction and maintaining a leadership system that enables your students to increase academic achievement. If this indicator is chosen, a narrative is required. (Limit of 3000 characters.)

In addition to the narrative, select at least one of the following is to be included as an attachment(s):  
(See instructions on page 6)

Business plans or profiles that include goals, timelines, and expected outcomes, detailed action steps

Outline of roles and responsibilities of management team (e.g., CEO, CFO, COO, Marketing Director, Director of Staff Development, etc.) and senior staff

Attachment Titled:

8E. Explain how your organization possesses adequate resources to meet consumer demand. If this indicator is chosen, a narrative is required. (Limit of 2000 characters.)

In addition to the narrative, at least one of the following is to be included as an attachment(s):  
(See instructions on page 6)

Business plans or profiles that include goals, timelines, and expected outcomes, detailed action steps; descriptions of financial and staff resources, organizational budgets that account for revenues, expenses, and cash flow activity; outline of roles and responsibilities of staff

Samples or descriptions of formal contracts, data collection, accounting, and communications processes and systems

Attachment Titled:

8F. Do you issue contracts, warranties, or guarantees for services provided? If yes, please describe this process and submit and include as an attachment a sample document. If this indicator is chosen, a narrative is required in addition to the attachment(s). (See instructions on page 6)  
(Limit of 2000 characters.)

Attachment Titled:

8G. Do you maintain formal contracts, data collection, accounting, and communications processes and systems? If yes, please describe these systems. If this indicator is chosen, a narrative is required. (Limit of 2000 characters.)

8H. Submit and include as an attachment(s) copies of a business license or articles of incorporation from the State of Iowa. If this indicator is chosen, a narrative that explains how the attachment(s) demonstrate(s) your organizations capacity is required. (See sample attachments)

Attachment Titled:

(Limit of 2000 characters.)

## 9. Compliance with Federal, State & Local Health & Safety Standards

Your application will be evaluated based on the extent to which you comply with federal, state, and local health and safety standards. **All indicators must be addressed.**

9A. Do you fingerprint and conduct criminal background checks on all employees before hiring?

Yes      No

9B. Describe your safety record procedures. (Limit of 2000 characters.)

9C. Describe the location and environment in which your services are provided. (Limit of 2000 characters.)

**10. Compliance with Federal, State, & Local Civil Rights Protections**

Limit: One piece of evidence per indicator

Your application will be evaluated based on the extent to which you comply with federal, state, and local civil rights protections for program employees and participants. It should be noted that providers who are religiously affiliated are prohibited from refusing to hire otherwise qualified tutors or denying students who are not of a particular religion. Providers must ensure that instruction is secular, neutral, and non-ideological.

Please note that narratives are not acceptable evidence. Acceptable forms of evidence include, but are not limited to, employee or student handbooks, company policy, or other company documentation. **Evidence must be included as attachments and should address all of the following indicators.**

10A. Indicate below the evidence that demonstrates your organization complies with federal state and local civil rights protections for your employees, such as board policy, company policy, or an excerpt from an employee manual.

Evidence:

Attachment Titled:

10B. Indicate below the evidence that demonstrates your organization complies with federal state and local civil rights protections for your students, such as board policy, company policy, or an excerpt from an employee manual.

Evidence:

Attachment Titled:

10C. If you intend to provide services to students with disabilities, indicate below the evidence that demonstrates your organization complies with IDEA and ADA requirements, such as board policy, company policy, or an excerpt from an employee manual.

Evidence:

Attachment Titled:

**11. Summarize your services and the positive impact they have on student achievement. This description will be used for our state approved provider list. Limited to 650 characters.**

## Assurances and Signatures Form

In submitting this application to become an approved Supplemental Educational Provider in the State of Iowa, I certify and/or understand that:

1. The organization has presented information in this application in a factual manner. No information in the application has been falsified, exaggerated, or misrepresented.
2. This organization meets all applicable federal, state and local health, safety, and civil rights laws.
3. If approved as a Supplemental Education Services provider, the organization will conduct its program in the manner it has described in its approved application.
4. All organization employees and other individuals who will interact with students will be fingerprinted and undergo background checks.
5. All instruction and content are secular, neutral, and non-ideological.
6. All eligible children whose parents request services from the organization will be served equally and without restriction.
7. The organization will not disclose to the public the identity of any student eligible for or receiving Supplemental Education Services without the written consent of the parents.
8. The organization is financially stable and will be able to fulfill services to the student and fulfill the terms of the contract with the school.
9. If approved as a Supplemental Education Services provider, the organization understands that approval does not constitute a guarantee of employment, payment, or funding. The organization further understands that if approved, payment will be provided by eligible school districts through a contractual arrangement only for services rendered to eligible students.
10. The organization will not apply additional admission criteria to eligible students.
11. The organization will participate in any and all data reporting and evaluation activities as requested or required by the U.S. Education Department, the Iowa Department of Education, and the school district with which the organization is contracted. The organization will submit additional data and/or information as requested by the Iowa Department of Education.
12. The organization will submit a renewal application to continue as an approved Supplemental Education Services provider in Iowa beyond the timeframe of approval. The organization understands that it is not guaranteed a renewal notification from the Iowa Department of Education and that any renewal notification is provided as a courtesy.
13. The organization will adhere to the Education Industry Association (EIA) Code of Professional Conduct and Business Ethics for Supplemental Education Providers as found in this application packet.
14. The organization will be removed from the state approved list of providers in the event that it is unable to enact the elements as described in the application, fails to submit a renewal application or reports as requested by the Iowa Department of Education, or violates the standards of the Iowa Code of Ethics for SES Providers.
15. The organization will inform the Iowa Department of Education of any changes in contact information as listed in its application. The organization understands that it is the responsibility of the organization to ensure that contact information is accurate on the state approved provider list by responding to e-mail/phone inquiries of the Iowa Department of Education.

