

# STUDENT ASSESSMENTS AND ASSOCIATED GROWTH MODELS FOR TEACHER AND PRINCIPAL EVALUATION

FORM C

#### PUBLICLY AVAILABLE SERVICES SUMMARY

This form will be posted on the New York State Education Department's Web site and distributed through other means for all applications that are approved in conjunction with this RFQ to allow districts and BOCES to understand proposed offerings in advance of directly contacting Assessment Providers regarding potential further procurements.

Assessment Provider Information		
Name of Assessment Provider:	Locust Valley Central School District	
Assessment Provider Contact	Dr. Janine Sampino	
Information:	Assistant Superintendent	
Name of Assessment:	Locust Valley Fluency Monitor	
Nature of Assessment:		
What are the grade(s) for which the assessment can be used to generate a 0-20 APPR score?	K-2	
What are the subject area(s) for which the assessment can be used to generate a 0-20 APPR score?	ELA	
What are the technology requirements associated with the assessment?	None	
Is the assessment available, either for free or through purchase, to other districts or BOCES in New York State?	☐ YES ☑ No	

Please provide an overview of the assessment for districts and BOCES. Please include:

- A description of the assessment;
- · A description of how the assessment is administered;
- A description of how scores are reported (include links to sample reports as appropriate);
- A description of how the Assessment Provider supports implementation of the assessment, including any technical assistance. (3 pages max)

#### Description:

Locust Valley Central School District is proposing to use well established, research based methods of checking student reading fluency in grades K-2. Research has shown that fluency checks are excellent predictors of future reading success. This application focuses on the methods and protocols rather than the materials used.

#### Administration:

Fluency checks are administered on a 1:1 basis by trained staff and last one minute per student. Both a baseline and an end of year assessment are given.

#### **Score Reporting:**

Trained staff record scores for each student using spreadsheets.

#### Implementation:

All staff is trained on the proper administration of the fluency checks.

Please provide an overview of the student-level growth model or target setting model for SLOs for districts and BOCES, along with how student-level growth scores are aggregated to the create teacher-level scores, and how those teacher-level scores are converted to New York State's 0-20 metric.

At the beginning of the year each student in grades K-2 has their reading fluency measured. Students then assigned targets that represent a year's worth of growth, that take into account attendance and other factors. A 0-20 and HEDI score is provided using the state provided SLO table.

<b>New York State Next Generation A</b>	ssessment Priorities
	posed supplemental assessment I or assessment to be next Generation Assessment Priorities below.
Characteristics of Good ELA and Math Assessments (only	The common core standards value fluency in both ELA and mathematics. These brief fluency checks are directly
applicable to ELA and math assessments):	tied to the NYS Next Generation Standards and mirror skills emphasized in lessons posted on engage NY.
Assessments Woven Tightly Into the Curriculum:	These fluency measures are tightly aligned with the academic goals of the teacher.
Performance Assessment:	This is a Performance assessment as students are asked to read letter/words.
Efficient Time-Saving Assessments:	The fluency assessment lasts one-minute. This is extremely time-efficient and is incorporated into the instruction of a regular school.
Technology:	As oral reading is a performance task, there is no requirement for technology but it may be used. All scores are stored in a database for analysis.
Degree to which the growth model must differentiate across New York State's four levels of teacher effectiveness (only applicable to supplemental assessments):	NA



### STUDENT ASSESSMENTS FOR TEACHER AND PRINCIPAL EVALUATION



### APPLICANT CERTIFICATION FORM —ASSESSMENTS FOR USE WITH STUDENT LEARNING OBJECTIVES

Please read each of the items below and check the corresponding box to ensure the fulfillment of the technical criteria.

PLEASE SUBMIT ONE "FORM H" FOR EACH APPLICANT. CO-APPLICANTS SHOULD SUBMIT SEPARATE FORMS.

The Applicant makes the following assurances:

Assurance	Check each box:
The assessment is rigorous, meaning that it is aligned to the New York State learning standards or, in instances where there are no such learning standards that apply to a subject/grade level, alignment to research-based learning standards.	
To the extent practicable, the assessment must be valid and reliable as defined by the Standards of Educational and Psychological Testing.	×
The assessment can be used to measure one year's expected growth for individual students.	$\boxtimes$
For K-2 assessments, the assessment is not a "Traditional Standardized Assessment" as defined in Section 1.3 of this RFQ.	$\boxtimes$
For assessments previously used under Education Law §3012-c, the assessment results in differentiated student-level performance. If the assessment has not produced differentiated results in prior school years, the applicant assures that the lack of differentiation is justified by equivalently consistent student results based on other measures of student achievement.	
For assessments not previously used in teacher/principal evaluation, the applicant has a plan for collecting evidence of differentiated student results such that the evidence will be available by the end of each school year.	
At the end of each school year, the applicant will collect evidence demonstrating that the assessment has produced differentiated student-level results and will provide such evidence to the Department upon request. <sup>4</sup>	

Please note, pursuant to Section 2.3 of this RFQ, an assessment may be removed from the approved list if such assessment does not comply with one or more of the criteria for approval set forth in this RFQ

## To be completed by the Copyright Owner/Assessment Representative of the assessment being proposed and, where necessary, the co-applicant LEA:

1. Name of Organization (PLEASE PRINT/TYPE)	Signature of Authorized Representative (PLEASE USE BLUE INK)
2. Name of Authorized Representative (PLEASE PRINT/TYPE)	5. Date Signed
3. Title of Authorized Representative (PLEASE PRINT/TYPE)	

Locust Valley Central School District  1. Name of LEA (PLEASE PRINT/TYPE)	4. Signature of School Representative (PLEASE USE BLUE INK)
Anna Hunderfund 2. School Representative's Name (PLEASE	10/26/2015 5. Date Signed
PRINT/TYPE)	955

3. Title of School Representative (PLEASE PRINT/TYPE)