

# 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:	Western Suffolk BOCES	
Assessment Provider Contact	507 Deer Park Road PO Box 8007	
Information:	Huntington Station, NY 11746	
Name of Assessment:	WSB developed course specific assessments	
Nature of Assessment:		
What are the grade(s) for which the	Grades 9-12 for courses that do not culminate in a State	
assessment can be used to	Assessment as checked and listed in Form B1	
generate a 0-20 APPR score?		
What are the subject area(s) for	All subject areas listed in Form B1 that do not culminate	
which the assessment can be used	in a State Assessment.	
to generate a 0-20 APPR score?		
What are the technology	Technology/adaptive devices can be used in accordance	
requirements associated with the	with student IEP.	
assessment?	□ V=2	
Is the assessment available, either	YES	
for free or through purchase, to other districts or BOCES in New	⊠ No	
York State?		

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)

Assessments are directly linked to NYS Standards for the subject area. The assessments are available for pre and post assessment.

The assessments are administered during one class period. Pre-assessments are administered at the beginning of the school year. Post-assessments are administered at the end of the school year.

Scores are reported through our student/teacher management system.

All assessments are implemented using the same criteria found in the Examination Administration Documents for Regents exam administration. All exams are kept locked until the day of administration.

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.

Assessments are administered for pre and post assessment. Assessments are aligned to NYS Standards for each course. Targets are set for each student to achieve a passing score on the exam. The percentage of students that met their targets is calculated to determine teacher scores, accounted for in the teachers SLO and are applied to the approved HEDI scale.

New York State Next Generation Assessment Priorities		
Please provide detail on how the proposed supplemental assessment I or assessment to be		
used with SLOs addresses each of the Next Generation Assessment Priorities below.		
Characteristics of Good ELA and	Good ELA and Math assessments are directly tied to the	
Math Assessments (only	NYS standards.	
applicable to ELA and math		
assessments):		
Assessments Woven Tightly Into	The assessments are seamlessly administered in	
the Curriculum:	conjunction with class instruction, the goals of the teacher	
	and NYS Learning Standards	
Performance Assessment:	Performance assessments are strongly encouraged, if	
	applicable for the course.	
Efficient Time-Saving	Assessments are multiple choice and allow for the	
Assessments:	student to demonstrate their individual knowledge and	
	understanding. An administration window is developed to	
	ensure consistency across the programs. Scantron	
	sheets are utilized for efficiency.	
Technology:	Technology/adaptive devices can be used in accordance	
	with student IEP.	
Degree to which the growth model must	Not applicable	
differentiate across New York State's four levels of teacher effectiveness (only		
applicable to supplemental assessments):		



### 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:

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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.	$\boxtimes$
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.	$\boxtimes$
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>3</sup>	

<sup>&</sup>lt;sup>3</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:

Western Suffolk BOCES  1. Name of Organization (PLEASE PRINT/TYPE)	4. Signature of Authorized Representative (PLEASE USE <b>BLUE</b> INK)
Nancy Kelsey 2. Name of Authorized Representative (PLEASE PRINT/TYPE)	12/11/15 5. Date Signed
Executive Director, CTE 3. Title of Authorized Representative (PLEASE PRINT/TYPE)	
1. Name of LEA (PLEASE PRINT/TYPE)	Signature of School Representative (PLEASE USE <b>BLUE</b> INK)
2. School Representative's Name (PLEASE PRINT/TYPE)	5. Date Signed
3. Title of School Representative (PLEASE PRINT/TYPE)	