Consolidated State Performance Report Student Information Sheet

*To be completed for every student in a Title I, Neglected, Delinquent, At-Risk Program*

## School Year:

### Facility: Completed by:

### **Student Demographic Information**

Last Name: First Name:

SSN: XXX-XX-\_\_\_\_ Gender:

Date of Birth: / / Age of Student:

Race/Ethnicity (*check* ***one***):  American Indian/Alaskan Native  Asian  Black

White  Pacific Islander/Native Hawaiian Hispanic  Multiple Races

Date of Entry: / / Previous School:

Current Grade Level: Proficient in English? Yes No

Has IEP? Yes No Migrant? Yes No Homeless? Yes No

### **Maintenance and Improvement of Academic Achievement**

### A student in a Title I-A tutoring program will submit semester public school report card grades if the tutoring program does not pre-/post-test.

#### Pre-Test Scores

Date Assessed: Assessments used:

Reading (*grade level equivalent*): Math (*grade level equivalent*):

#### Post-Test Scores for students in the facility 90 days

Date Assessed: Assessments used:

Reading (*grade level equivalent*): Math (*grade level equivalent*):

**Student Outcomes while Enrolled in Facility**

Was this the student’s first admission into this facility? Yes No

If no, what other dates was the student enrolled?

What age was the student when he/she was discharged?\_\_\_\_\_\_\_\_\_

What grade was the student enrolled in when he/she was discharged?\_\_\_\_\_\_\_\_\_\_

Check EACH outcome that the student achieved while enrolled in this facility.

Earned high school course credit Obtained external employment

Enrolled in a GED/HISET program Earned a GED/HISET

Obtained a high school diploma Accepted into and/or enrolled in a post-secondary education program

Enrolled in a job training course/program

**Total # of outcomes achieved in facility \_\_\_\_\_\_\_\_**

### **Student Outcomes after exit-90 days after exit**

Discharge Date:

Check EACH outcome that the student achieved within 90 days after exiting the facility:

Enrolled in his/h local district school Obtained employment

Earned high school course credit Earned a GED/HISET

Enrolled in a GED/HSET Accepted into and/or enrolled in a post-secondary education program

Obtained a high school diploma

Enrolled in a job training course/program

**Total # of outcomes achieved within 90 days of exit \_\_\_\_\_\_\_\_**

**\*\*Not able to collect exit outcomes \_\_\_\_\_ Please provide explanation: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

**Student received transition services that address further schooling and/or employment?**

YES NO

**\*\*Facility is not able/permitted to collect data on student outcomes \_\_\_\_**

***\*For state agency use ONLY:***

**Student has had prior involvement with the Department of Children’s Services.**

YES NO