

Oklahoma State Department of Education

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County

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District

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Site

County _____ District _____ School _____

2012-2013 APPLICATION FOR ACCREDITATION: JUNIOR HIGH/MIDDLE SCHOOL

ONE ORIGINAL and ONE COPY of this application must be filed with the Accreditation Division, State Department of Education, 2500 North Lincoln Boulevard, Oklahoma City, OK 73105-4599, **beginning on October 1, and received in the Accreditation office no later than October 15. (When October 1 or October 15 falls on a Saturday, Sunday or Holiday, the next business day will be the deadline).** A copy is to be kept on file in the superintendent's office at the local site.

Failure to file this report on time may result in a deficiency.

CERTIFICATE OF ACCURACY

I hereby certify that the information contained in the following report is complete and correct.

Superintendent (Please sign here)

Street address _____

Mailing address _____

City, State, Zip _____

Phone (Include area code) _____

Is this school located within the city limits of the city entered above? _____ YES _____ NO

2012-2013 Accreditation Application
Middle School/Junior High School

Statistical Information

Please indicate membership (total number of students enrolled in this site) as of October 1. Use only the grade levels included in this school.

Count each student only once in the appropriate grade level (Grade 5 through Out-of-Home).

United States Education Department Mandated Ethnicity and Race (E & R) Tabulation Categories																
GRADE		Non-Hispanics should be counted in one race tabulation category.														TOTAL
		Hispanic*		American Indian or Alaskan Native* (Non-Hispanic)		Asian* (Non-Hispanic)		Black* (Non-Hispanic)		Hawaiian or Pacific Islander* (Non-Hispanic)		White* (Non-Hispanic)		Two or More Races* (Non-Hispanic)		
		Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
5																
6																
7																
8																
9																
Out-of-Home Students+																
GRAND TOTAL																

* The student is a member of a specific ethnic group if he/she, or the community, considers him/her to be a member of that group.

+ Out-of-Home Students are out-of-home placement and not residents of the school district in which the residential child facility or treatment program or center is located. Therapeutic foster children should be listed in this category unless parents are residents of district.

Bilingual Total by Ethnicity++ (Do not exceed grand totals)															
Virtual/Internet Students on campus#															
Virtual/Internet Students off campus#															

++ See instruction sheet for Bilingual Eligibility criteria. This Bilingual count is part of the calculation used by State Aid. The Bilingual total must not exceed the grand total in each ethnic category.

List all students enrolled in Virtual/Internet classes on and off campus. Count these students in their grade level also.

1. SCHOOL CALENDAR

- a. School days taught _____ Professional days _____ Total days in session _____
- b. Our site reports by: Traditional Days Calendar (180) Hours Calendar (1,080 hours)
- c. **First day classes met** (Month/Day/Year) _____
- d. **Last day classes will meet** (Month/Day/Year) _____
- e. **Date first quarter ends** (Month/Day/Year) _____
- f. **Date spring break begins** (Month/Day/Year) if applicable _____
If not applicable, please describe _____
- g. **Does your site have a four day** _____ **Yes** _____ **No** _____
- h. **Scheduled parent/teacher conferences:**
Date: _____ Date: _____
Time: _____ Time: _____
- i. **INTERACTIVE CALENDAR:** List all dates when classes will be dismissed for functions and holidays.

2. CALENDAR DESCRIPTION. (Do not include Summer School.)

- a. Traditional
- Year-round (July to June)

3. SCHOOL DAY

- a. Length of school day in minutes (i.e., 360 do not include breakfast and or lunch period if included in the instructional day). _____
- b. Number of minutes for breakfast and or lunch _____
- c. Time first class period starts _____
- d. Time last class period of the day ends _____
- e. Are all students in Grades 9 through 12 enrolled in a minimum of six periods, or the equivalent in block scheduling, of rigorous academic and/or rigorous vocational courses each day, which may include arts, vocal and instrumental music, speech classes, and physical education classes. (Do not include alternative education students.) _____ Yes _____ No _____
- f. Number of minutes per week Physical Education is provided for Kindergarten through 5th grade? (Do not include recess) _____

4. DAILY SCHEDULE:

- a. Number of minutes for recess? _____ A.M. _____ P.M. _____ N/A _____
- b. Total number of hours in the school day (excluding breakfast and or lunch time)? _____ **HRS** _____

5. MISCELLANEOUS

- a. When are competitive athletic classes offered?
____ During the school day
____ After the school day
____ Nonapplicable
- b. List competitive athletic classes offered: (example: Football, Basketball, Track)

6. LIBRARY MEDIA

- a. Is there a central library at this school site? _____ Yes _____ No _____
If no, where is the library located? _____
- b. Does this library serve more than one site? _____ Yes _____ No _____
If yes, list other locations _____
- c. Name of person serving as Library Media Specialist/Librarian _____
- d. Library Media Specialist/Librarian is:
_____ certified Library Media Specialist _____ exempt from certification/Statutory Waiver
_____ not certified _____ other _____
- e. Library is staffed in the following way:
_____ a half-time certified librarian _____ one-fifth time certified librarian with a full-time library assistant
_____ one full-time certified librarian _____ a half-time librarian with a full-time library assistant
_____ two full-time certified librarians _____ one full-time librarian and a half-time library assistant
_____ vacant _____ one full-time librarian and one full-time library assistant
_____ other _____
- f. Is the library accessible to students and staffed during the entire school day? _____ Yes _____ No _____
- g. EXCLUDING federal funds, give the amount of LOCAL FUNDS spent during the 2011-2012 school year for books, software, periodicals (not hardware or supplies) at this site. _____ \$ _____
- h. Total number of students enrolled **on-site** as reported on 2011-2012 Application for Accreditation (number used to calculate required library expenditures). _____

7. CPR PROVIDER

- What contracted organization provides CPR training? _____ American Red Cross
- American Heart Association Emergency Medical System County Health Department
- Local Fire Department List Other provider: _____

8. HIGH SCHOOL CREDIT FOR 7TH AND 8TH GRADE STUDENTS

- a. Does this site have 7th or 8th grade? _____ Yes _____ No _____
(If you answered "NO" above, check "NO" to the following questions.)
- b. Are any 7th or 8th grade students enrolled in classes for high school credit?
at the Elementary _____ Yes _____ No _____
at the High School _____ Yes _____ No _____

If yes, please complete the High School portion of the application.

9. COLLEGE PREPARATORY/CORE CURRICULUM

- a. Number of the current year 9th grade students enrolled in the college preparatory/work ready curriculum _____
- b. Number of the current year 9th grade students enrolled in the core curriculum. _____
a.+ b. = total number of 9th graders for the 2012-2013 school year _____
(This number should equal the number of 9th graders on the grade grid.)

2012-2013 Paraprofessional Report

This form must be completed and returned with the Application for Accreditation, due by October 15, 2012.
(Questions regarding this form only, should be directed to Title I at (405) 521-2846.)

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County District Site

Paraprofessional Definition

A paraprofessional is an individual with instructional duties. Individuals who work solely in non-instructional roles, such as food service, cafeteria or playground supervision, personal care services, and non-instructional computer assistance are not considered to be paraprofessionals for Title I programs.

1. Select the Title I information that describes your school site.

Schoolwide _____ Targeted Assistance _____ Not a Title I School _____

Complete the rest of this form only if your school site receives Title I, Part A funds.

2. How many Title I, Part A paraprofessionals are currently employed at this school site? _____
3. How many Title I, Part A paraprofessionals are involved in instruction of students? (Note: Only paraprofessionals directly involved in student instruction must meet the Title I, Part A paraprofessional quality requirement. See definition above.) _____
4. How many of the paraprofessionals who are involved in the instruction of students have already met the Title I, Part A paraprofessional quality requirement (two years of college [48 hours], Associate's Degree, passed the Oklahoma General Education Test or Para Pro Assessment available from the Educational Testing Service, or a local school district academic assessment approved by the Oklahoma State Board of Education)? _____

Migrant Student Program

If a school site serves migrant students please report the following:

1. How many of the paraprofessionals are involved in the instruction of migrant students? _____
2. How many of these paraprofessionals involved in the instruction of migrant students have already met the "highly qualified" requirement? _____

Counseling Services

This form must be completed and returned with the Application for Accreditation, due by October 15, 2012. Each school is required by 70 O.S. § 3-104.4 to provide this information.

County Number		District Number				Site Number	

County Name	District Name	School Site Name
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1. Are counseling services provided by a **certified** school counselor employed at this school site? Yes ___ No ___
- 1a. If this is an elementary or charter school and you answered no, are guidance services provided by a person specially trained in the area of guidance? Yes ___ No ___
- 1b. If other staffing, please specify. (List the name, address, and certification of the provider.) _____

2. Total number of students enrolled at this school site as of, **October 1, 2012**: _____

3a. List only the names of certified school counselors employed at this site:	3b. Teacher number:	3c. Number of clock hours per day as counselor at this site: OR Time assigned to this site: (For example: 5 hours per week)	3d. Number of students the counselor is responsible for serving at this site:
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____
_____	_____	_____	_____

4. Identify the duties and responsibilities of all counselors (check all that apply):
- | | |
|---------------------------------------|--|
| a. _____ Individual/group counseling | f. _____ Serve on duty schedule |
| b. _____ Academic and career guidance | g. _____ Substitute for teachers |
| c. _____ Consult with parents/staff | h. _____ Coordinate special education |
| d. _____ Plan/coordinate guidance | i. _____ Student discipline duties |
| e. _____ Facilitate referrals | j. _____ Work on master schedule |
| | k. _____ Coordinate/administer student tests |