LEA/Site Level Budget School Improvement Grant 1003(g)/Cohort 5 **Cover Page** School Improvement Grant 1003(g)

Project Code 516

Due: Friday, May 1, 2015

| District | Temple 1 | Elementary School | I101 | County | Cotton | 17 | |
|--------------------|----------------------|---------------------------|----------------------------------------|----------------------|-------------------|------------------|--|
| | Name | | Code | | Name | Code | |
| Address | 206 School Road | | | | Temple | 73568 | |
| | Mailing Address | | | | City | Zip (9-digit) | |
| Phone | 580-342-6230 | | Fax | 580-342-0 | 2-6463 | | |
| | Area Code and Number | | | Area Code and Number | | | |
| Application | n Contact | Kolby Johnson | | | 580-342-6230 | | |
| | | Type or Print Name | | | School Phone | | |
| | | kjohnson@temple.k12.ok.us | | | 918-623-6080 | | |
| | | E-mail Address | | | Summer Phone | | |
| School SIG Contact | | Kolby Johnson | 580-342-6230 kjohnson@temple.k12.ok.us | | | | |
| | | Type or Print Name | Telephone | | E-mail Address | | |
| Superintendent | | Kolby Johnson | | | kjohnson@temple.k | <u>(12.ok.us</u> | |
| | | Type or Print Name | | | E-mail Address | | |

Submission Guidelines:

| | Before proceeding: | | | | |
|---------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|--|--|--|
| STOP | * Has the district engaged in comprehensive planning for all Priority schools to ensure effective implementation/integration of selected school improvement activities? | | | | |
| | * Has the district developed a sustainability plan? | | | | |
| | * Have the appropriate groups participated in consultation and planning? | | | | |
| | * Has the LEA planned and budgeted for the required activities including establishing a Turnaround Office or Officer(s), and providing oversight and monitoring of the implementation of the selected intervention models at all Priority schools to be served? | | | | |
| To be completed by the Oklahoma State Department of Education | | | | | |
| Authorized SDE Staff | Date | | | | |