# Attachment D: Overview of Evaluation End-of-Year Performance Report

**OVERVIEW OF PERFORMANCE MEASURES AND EVALUATION**

Pursuant to C.R.S. 22-32-138.5, the Educational Stability Grant Program shall be evaluated for effectiveness for each year that state funds are appropriated. Each grantee is required to provide fiscal reports and student and program information as primary components of the program evaluation.

The program evaluation for this grant program is designed to meet the statutory requirements for evaluation and reporting, promote continuous program improvement, and track progress on student and program outcomes.

**Timeline for Reporting in Year 1 of the Grant:**

July 15, 2026 – End-of-Year Performance Report due to CDE

**Elements of reporting include:**

**Record-keeping** – To prepare for evaluation reporting, grantees are asked to maintain accurate records on the students served, programs and services provided, and results. In addition, progress notes on challenges, successes, collaborations, and partnerships will support accuracy in completing the evaluation survey.

**Data Entry** – CDE will provide grantees access to an online survey system to complete evaluation questions. Educational Stability grantees will enter data into an online survey system to report on their grant status and progress. To reduce reporting burden, information from each grantee’s application is used to pre-populate the online survey (e.g., name of program, contacts, performance measures…) Grantees will have access to a summary of their responses after their survey has been submitted. Examples of items covered in the online evaluation survey:

* Basic grant information (prepopulated in the survey, however grantees can make updates to program and fiscal contacts)
* Number of students served (reported in total and by student group – homeless, foster care and migrant)
* Program strategies and services provided (Inventory of programming in areas such as, academics/course completion, student attendance, social emotional/behavioral supports, and coordination of services)
* Progress on performance measures identified in grant application and approved by CDE (status of performance goal and identification of measures.)
* Successes (areas that contributed to meeting or exceeding performance measures)
* Challenges (areas that negatively impacted meeting or exceeding performance measures)
* Reporting on student outcomes (Examples include - grade promotion, drop out, graduation and completion)
* Reporting on program outcomes (Examples include - students served successfully completed services, refused services, discontinued services)
* Reporting on efforts toward sustainability and capacity building (Types of actions taken)
* Identification of technical assistance and training needs (topics of interest, preferred professional development offerings)

**SASID Reports** – Grantees will provide SASIDs of all students served by the grant through a secure, CDE data collection system. CDE will provide access to the system and distribute an Excel spreadsheet to assist grantees in preparing for the upload. Submission of SASIDs eliminates duplication of reporting on student demographics, dropout rates and graduation rates, and reduces inaccuracies in reporting. It enables CDE to meet the statutory requirement of the grant program to analyze and report on grade progression, dropout rates and graduation/completion rates. Student level data will be collected, used, shared, and stored in compliance with CDE student privacy and security procedures and protocols.

**Fiscal Reports**

* Interim financial Report (IFR) – due quarterly, but may be more often if flagged for high balance
* Annual Financial Report (AFR) – it is anticipated that the first AFR will be due in September 2023
* May include budget revision requests for personnel, equipment and/or substantial changes.

**QUESTIONS: END-OF-YEAR PERFORMANCE REPORT**

**CONTRACT AND GRANT INFORMATION**

Grantee Name

Name of Program

District Code or Facility School Code

Name of Contact

Contact Phone Number

Contact Email Address

Grant Year

Anticipated Number of First-Year Served Students

Program Description

**STUDENTS SERVED**

**Total Served:** How many total students (unduplicated) have you served in your program?

Of the students served, provide total by student group. Note: A student may be counted in more than one category.

* **Homeless Students:** How many of the total number of students served were homeless?
* **Foster Care Students:** How many of the total number of students served were in foster care?
* **Migrant Students:** How many of the total number of students served were migrant?

**PROGRAM STRATEGIES AND SERVICES PROVIDED**

**Highly Mobile Student Framework for Service and Support**.

Indicate which elements were supported by your Educational Stability Grant *(Check all that apply)*

**Essential needs**

* Food
* Housing
* Safety
* Clothing
* Hygiene
* Language Interpreter (if needed)

**Connectedness (in and out of school)**

* Enhanced mentoring (programs that connect to adults and peer networks)
* Extracurricular
* Academic engagement/interest exploration
* Community engagement
* School climate

**Innovative solutions to address barriers to learning**

* Academic progression and course completion
* Seamless transfer of coursework
* Assessment of academic gaps due to school mobility
* Essential classroom skills
* Assessment of educational milestones
* Complete and up-to-date student assessment
* Credit accrual and attainment

**Multiple pathways**

* Complete and up-to-date career and academic plan
* Opportunity to explore interests
* Opportunity to build on areas of strength and talent
* Opportunity to explore a multitude of postsecondary and career options

**Other:** Please describe other strategies and services funded by your Educational Stability Grant.

**Follow-up.** Describe specific strategies and practices applied that support the components selected above.

**Comment:** Of the strategies/programs/elements that were funded by your Educational Stability Grant (indicated above), list the three most effective in achieving successful outcomes for students served. Please list these strategies in order of effectiveness.

**PROGRESS ON PERFORMANCE MEASURES**

For each of the Performance Objective ratings, check the response that best describes progress at the end of the rating period (June 30). Please use the following guidance for rating your Performance Objectives:

* Exceeded: 5% or more beyond goal
* Met: Within 5% of goal
* Making progress: From 50% of goal to 5% below goal
* Not Making Progress: Less than halfway to goal

**Academic Performance Measure:**Please report your progress on your academic performance measure. *(Select one)*

* Exceeded goal
* Met goal
* Approaching
* Not making progress

**Data Validation**

* 1. Justify your rating for this performance objective:
	2. What data did you examine to determine your rating?
	3. Number of students who needed improvement in this area or the number of students assessed for this performance objective at baseline:
	4. Number of students who significantly improved or met specifically set criteria as measured by your selected indicator:

**Attendance Performance Measure:**Please report your progress on your attendance performance measure. *(Select one)*

* Exceeded goal
* Met goal
* Approaching
* Not making progress

**Data Validation**

1. Justify your rating for this performance objective:
2. What data did you examine to determine your rating?
3. Number of students who needed improvement in this area or the number of students assessed for this performance objective at baseline:
4. Number of students who significantly improved or met specifically set criteria as measured by your selected indicator:

**Social-Emotional and Behavioral Performance Measure:**Please report your progress on your social-emotional and behavioral performance measure. *(Select one)*

* Exceeded goal
* Met goal
* Approaching
* Not making progress

**Data Validation**

1. Justify your rating for this performance objective:
2. What data did you examine to determine your rating?
3. Number of students who needed improvement in this area or the number of students assessed for this performance objective at baseline:
4. Number of students who significantly improved or met specifically set criteria as measured by your selected indicator:

**STUDENT OUTCOMES**

Of the total number of students served

* Will continue receiving services
* Refused services or discontinued services
* Successfully received/completed services and remains in school
* Transferred to another school district in Colorado, another state or country
* Transferred to detention center or facility school
* Home-schooled
* Discontinued schooling/dropped out.
* Exited to an unknown educational setting/status
* Expelled
* High School Equivalency Transfer
* High School Equivalency Diploma
* Transfer to a Career and Technical Education program
* Graduated with regular diploma
* Other (*please explain*)

**SUCCESS STORIES**

**Student Success Story.** Please describe below a student’s success story from your Educational Stability Grant program. The success should be related to the services made possible by the grant and connected to the reasons the student needs the services. Based on your story, please include the following.

* Describe student’s circumstances related to services without using names or other personally identifiable information
* Program intervention/services provided:
* Describe the success:

**Partnership Success Story.** Please describe below an example of successful partnerships with an internal or external group that complements the work of your Educational Stability Grant program. Based on your story, please include the following.

* Name of Partner
* Program intervention/services provided:
* Describe the success

**SUSTAINABILITY**

Please describe the actions that have been taken to sustain your program:

(Please select all that apply and provide an explanation of what has been accomplished)

* + Applied for grants *(Please describe)*
	+ Budget line items specified Recaptured Per Pupil Revenue to be re-invested in your ESG-funded strategies *(Please describe)*
	+ Shared ESG program results with district administrators or board members (Please describe)
	+ Full absorption of general funds *(Please describe)*
	+ Other *(Please describe)* *Open Response-1500 characters or less*.

**TECHNICAL ASSISTANCE**

What state technical assistance, professional development (including training topics) or other state activities would help to better serve you and your program? (*Please select all that apply*)

* Visits from CDE staff or consultants
* Statewide meeting with other programs
* Regional meetings with other programs
* Referrals to similar programs
* Technical assistance by phone
* Technical assistance by e-mail
* Webinars
* Other (*Please describe*) *Open Response-1500 characters or less.*

**Topics.** Please list and describe professional development and training topics that would be of benefit in implementing your grant. *Open Response-1500 characters or less.*

**Additional Supports.** What supports from CDE would be most helpful in the successful implementation of your program?*Open Response-1500 characters or less.*

**Additional Feedback to CDE.** *Open Response-1500 characters or less.*

**CONTINUATION APPLICATION**

**Changes in Application:** If the grantee’s competitive proposal executive summary has changed from the original application, please provide a short description of your current program.

**Updates to Performance Measures\*:**

* **Academic Performance Measure Update:** If Academic Performance Measure has changed for next fiscal year, please enter it in the space provided. Please provide a justification for this change.
* **Attendance Performance Measure Update:** If Attendance Performance Measure has changed for next fiscal year, please enter it in the space provided. Please provide a justification for this change.
* **Behavioral and Social Emotional Performance Measure Update:** If Behavioral and/or Social Emotional Performance Measure has changed for next fiscal year, please enter it in the space provided. Please provide a justification for this change.

**Budget Explanation:** Describe below how the requested budget supports attainment of performance measures.

**New Use of Funds:** If any new use of funds is being proposed in the budget for next year, please describe how the funds will be used.

**In-Kind:** Please describe below the non-Educational Stability Grant dollars (in-kind) that will support the program in the next year.