School Counselor Corps DISTRICT End of Year Report - 2020-2021

PART I - SCCG District Report End of Year

1. District: *
2. District Code: *
3. Name of District Contact: *
4. District Contact Phone Number: *
5. District Contact email: *

6. What year of SCCG funding was 2020-2021 school year for your school/district? (If you are not sure, please contact the SCCGP Team to confirm, schoolcounselorcorps@cde.state.co.us) *
© Year 2
© Year 3
C Year 4
7. Have staff changes been made using SCCGP funds during the 2020-21 school year? * O YES NO
8. If yes, please explain:
 9. The school counselors hired under the Colorado School Counselor Corps Grant Program in the district are licensed, which "means a person who holds a special services provider license with a school counselor endorsement issued pursuant to article 60.5 of Title 22 or who is otherwise endorsed or accredited by a national association to provide school counseling services" 22-91-102 (6): Yes No

10. Please list School Counselor Corps Goal 1.
 11. Report progress on the District/BOCES goal. Check the response that best describes progress at the end of the rating period, (September 30, 2021). © Exceeded goal © Met goal © Making progress © Not making progress
12. Please provide a brief narrative explaining how your goal was reached or not reached. (No more than 5 sentences.)
13. Provide data results for this goal.

14. How were these data collected and/or verified?
15. Describe special circumstances and/or factors that positively affected progress on achieving this goal.
16. Describe special circumstances and/or issues that negatively affected progress on achieving this goal.

17	7. P	lease mark the ONE outcome this goal is most directly related.
	0	Improved GPA
	0	Improved SAT
	0	Improved state testing
	0	Getting/Staying on track for graduation
	0	Credit accrual
	0	ICAP completion
	O	Increased number of postsecondary applications submitted
	0	Increase college acceptance
	0	Increased number of students completing FAFSA
	0	Decreased college academic remediation
	0	Increased attendance
	0	Increased school engagement
	0	Improved Comprehensive School Counseling Program (e.g., ASCA National Model)
	0	Improved retention and reduced number of drop-outs
	0	Improved postsecondary planning culture and capacity
	0	Increased career awareness
	0	Increased school/district performance
	O	Improved middle school to high school transitions
	0	Improved elementary school to middle school transitions
	0	Improved self-management and social skills
	0	Increased Social/Emotional skills development

18. Please list School Counselor Corps Goal 2.
 19. Report progress on the District/BOCES goal. Check the response that best describes progress at the end of the rating period, (September 30, 2021). © Exceeded goal © Met goal © Making progress © Not making progress
20. Please provide a brief narrative explaining how your goal was reached or not reached. (No more than 5 sentences.)
21. Provide data results for this goal.

22. How were these data collected and/or verified?
23. Describe special circumstances and/or factors that positively affected progress on achieving this goal.
24. Describe special circumstances and/or issues that negatively affected
progress on achieving this goal.

25	5. P	lease mark the ONE outcome this goal is most directly related.
	0	Improved GPA
	0	Improved SAT
	0	Improved state testing
	0	Getting/Staying on track for graduation
	0	Credit accrual
	0	ICAP completion
	0	Increased number of postsecondary applications submitted
	0	Increase college acceptance
	0	Increased number of students completing FAFSA
	0	Decreased college academic remediation
	0	Increased attendance
	0	Increased school engagement
	0	Improved Comprehensive School Counseling Program (e.g., ASCA National Model)
	0	Improved retention and reduced number of drop-outs
	0	Improved postsecondary planning culture and capacity
	0	Increased career awareness
	0	Increased school/district performance
	0	Improved middle school to high school transitions
	0	Improved elementary school to middle school transitions
	0	Improved self-management and social skills
	0	Increased Social/Emotional skills development

26. Please list School Counselor Corps Goal 3.
27. Report progress on the District/BOCES goal. Check the response that best describes progress at the end of the rating period, (September 30, 2021). © Exceeded goal © Met goal © Making progress © Not making progress
28. Please provide a brief narrative explaining how your goal was reached or not reached. (No more than 5 sentences.)
29. Provide data results for this goal.

30. How were these data collected and/or verified?
21 Describe appoint sireumstances and/or factors that positively affected
31. Describe special circumstances and/or factors that positively affected progress on achieving this goal.
32. Describe special circumstances and/or issues that negatively affected progress on achieving this goal.

33.	Р	lease mark the ONE outcome this goal is most directly related.
(0	Improved GPA
(0	Improved SAT
(0	Improved state testing
(0	Getting/Staying on track for graduation
(0	Credit accrual
(0	ICAP completion
(0	Increased number of postsecondary applications submitted
(0	Increase college acceptance
(0	Increased number of students completing FAFSA
(0	Decreased college academic remediation
(0	Increased attendance
(0	Increased school engagement
(0	Improved Comprehensive School Counseling Program (e.g., ASCA National Model)
(0	Improved retention and reduced number of drop-outs
(0	Improved postsecondary planning culture and capacity
(0	Increased career awareness
(0	Increased school/district performance
(0	Improved middle school to high school transitions
(0	Improved elementary school to middle school transitions
(0	Improved self-management and social skills
(0	Increased Social/Emotional skills development

34. Please list School Counselor Corps Goal 4.
35. Report progress on the District/BOCES goal. Check the response that best describes progress at the end of the rating period, (September 30, 2021). © Exceeded goal © Met goal © Making progress © Not making progress
36. Please provide a brief narrative explaining how your goal was reached or not reached. (No more than 5 sentences.)
37. Provide data results for this goal.

38. How were these data collected and/or verified?
39. Describe special circumstances and/or factors that positively affected progress on achieving this goal.
40. Describe special circumstances and/or issues that negatively affected progress on achieving this goal.

41. P	lease mark the ONE outcome this goal is most directly related.
0	Improved GPA
O	Improved SAT
O	Improved state testing
O	Getting/Staying on track for graduation
0	Credit accrual
O	ICAP completion
O	Increased number of postsecondary applications submitted
O	Increase college acceptance
0	Increased number of students completing FAFSA
0	Decreased college academic remediation
0	Increased attendance
O	Increased school engagement
O	Improved Comprehensive School Counseling Program (e.g., ASCA National Model)
O	Improved retention and reduced number of drop-outs
O	Improved postsecondary planning culture and capacity
0	Increased career awareness
0	Increased school/district performance
0	Improved middle school to high school transitions
0	Improved elementary school to middle school transitions
О	Improved self-management and social skills
O	Increased Social/Emotional skills development

PART III - Program Strategies and Services

42. ASCA IMPLEMENTATION: Please indicate the development strategies and/or activities in accordance to the ASCA National Model at the district level. (No more than three paragraphs).
43. PROGRAM DATA: Please outline special programming, interventions and efforts by school or district/BOCES made possible by SCCG. Please highlight what has not already been captured through goal narratives.
PART IV - PROFESSIONAL DEVELOPMENT
44. Professional Development Activity 1 (Name of Training)
45. Number of attendees:

46. Approximate number of hours per attendee:
47. Topic Areas(s):
48. Brief summary of impact, (three to four sentences):
49. Implementation strategies, (three to four sentences addressing results):
50. Professional Development Activity 2 (Name of Training)

51. Number of attendees:
52. Approximate number of hours per attendee:
53. Topic Areas(s):
54. Brief summary of impact, (three to four sentences):
55. Implementation strategies, (three to four sentences addressing results):

56. Professional Development Activity 3 (Name of Training)
57. Number of attendees:
58. Approximate number of hours per attendee:
59. Topic Areas(s):
60. Brief summary of impact, (three to four sentences):

61. Implementation strategies, (three to four sentences addressing results):
62. Professional Development Activity 4 (Name of Training)
63. Number of attendees:
64. Approximate number of hours per attendee:
65. Topic Areas(s):

66. Brief summary of impact, (three to four sentences):
67. Implementation strategies, (three to four sentences addressing results):
68. Professional Development Activity 5 (Name of Training)
69. Number of attendees:
70 A : 1 (1 (1)
70. Approximate number of hours per attendee:

71. Topic Areas(s):
72. Brief summary of impact, (three to four sentences):
73. Implementation strategies, (three to four sentences addressing results):
PART V: Colorado School Counselor Corps Grant Information
74. How many school counselors were hired with the School Counselor Corps Grant by your district? *

75. Please give a clear explanation of how you define postsecondary and workforce readiness for students. (Three to four sentences)
76. Who leads the ICAP process in your district? (Titles only, no names).
77 Priofly describe the ICAP process in your district
77. Briefly describe the ICAP process in your district.
78. Briefly describe the ways in which the ICAP process is meaningful for your students.

Part VI: Supplemental Funding Information

79. Did your district recieve supplemental funds from SCCG for the purpose of increasing State Aid and/or FAFSA completion?
© Yes
O No
80. Please provide a brief description of the use of the supplemental funds you received to increase State Aid Applications and/or FAFSA. (The big picture of the project.)
81. Please give information on any professional development and activities these funds provided and who was involved in the PD. (Ex: 5 teachers were trained on the line by line FAFSA completion via the ed.gov webinar series-OR-trained _ staff members on line by line FAFSA completion via the ed.gov FAFSA webinar series.)

82. Did your district have an increase in State Aid and/or FAFSA completion this school year?
Yes
O No
83. How many students in your district completed state aid applications and/or FAFSA in 2019-2020?
84. How many students graduated from your district this school year, (2019-2020)?
85. How many students in your district completed state aid applications and/or FAFSA in 2020-21)?
86. How many students graduated from your district this school year, (2020-21)?

87. Did your district receive additional SCCG Funds for unmet need? Yes No
88. Please provide a brief description of the use of the additional funds.
89. Please provide any data collected on the use of the supplemental funds and how the additional funds enhanced your current SCCG award.
Part VI: Continuation Plan
90. What is your district/BOCES/school plan for sustaining counselors hired utilizing SCCG funds after completion of the grant? (No more than three paragraphs.)