



LOS ANGELES UNIFIED SCHOOL DISTRICT
REFERENCE GUIDE

TITLE: High School Locally Designed and Funded Credit Recovery and Intervention Programs

NUMBER: REF-6587.2

ISSUER: Vivian Ekchian, Associate Superintendent Support Services
 Alvaro Cortés, Senior Executive Director Beyond the Bell Branch

DATE: October 10, 2017

PURPOSE: The purpose of this Reference Guide is to provide guidance and assistance for high school locally designed and funded credit recovery and intervention programs.

MAJOR CHANGES: This Reference Guide replaces REF-6587.1, *High School Locally Designed and Funded Credit Recovery and Intervention Programs*, dated November 1, 2016. Attachment F-*Guidelines for Teacher Selection* has been updated.

GUIDELINES: I. Background

Schools receive various funds that may be used to provide additional credit recovery and/or intervention learning time to increase student achievement. School site decision-making and local budget authority have increased the responsibility of schools to provide their own locally designed credit recovery and/or intervention programs outside the school day, including during the summer. This Reference Guide provides recommended procedures to facilitate the implementation of these programs. All federally funded expenditures must be described in the school’s Single Plan for Student Achievement (SPSA). All locally designed credit recovery programs must be approved by the Local District Superintendent.

Federal Program Monitoring reporting has provided additional clarification regarding the use of Title I and Title III funds to supplement, not supplant, District services. Accordingly, neither Title I nor Title III funds may be used for programs in which students are provided test preparation for any state mandated assessment.

II. Guidelines

A. Response to Intervention

Effective first teaching is the foundation for all instructional programs. The classroom teacher provides intervention and additional instructional support for all students as described in [BUL-4827.1, Multi-Tiered Framework for Instruction, Intervention, and Support, dated September 1, 2009](#).

ROUTING
 Local District Superintendents
 Administrators of Operations
 Local District Administrators of Instruction
 Instructional Coach Coordinators
 Principals/Assistant Principals
 School Coordinators
 School Administrative Assistants



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Following classroom program modifications, students who continue to need assistance may need interventions designed to provide tiered support to help them meet grade level standards through:

1. Multi-tiered frameworks for instruction, intervention, and support.
2. Formative assessments that track student achievement.
3. Flexibility in scheduling, grouping, and class size.
4. Subject-specific curriculum that is flexible enough to target individual student needs.

B. Appropriate Funding for Credit Recovery/Intervention

All allocations and expenditures from school site funds must follow the respective program's guidelines and directions.

Title I funds may be used to provide credit recovery for students who previously earned a D or F grade mark. Class(es) must be specifically described as an intervention strategy in the approved SPSA. Classes may only be offered in the four (4) core subject areas of English language arts, mathematics, science and social science.

C. Support for Interventions

For assistance and suggestions in implementing locally designed programs, schools should contact their Local District (LD) Administrator of Instruction, LD Instructional Director, LD Categorical Coordinator, or Beyond the Bell Branch Academic Intervention Unit.

III. Student Eligibility Identification

A. Targeted Students

The school leadership team determines the targeted student population to receive intervention based on multiple criteria and assessments. School sites should refer to the data provided by student information systems, student grade marks, and progress monitoring when determining student eligibility for interventions. Any student not making adequate progress must be considered for additional support. Schools must seek council approval for interventions funded with categorical funds not written in the SPSA.

B. English Learners (ELs)

When ELs are not making adequate progress in English Language Development (ELD), it is important to determine, as precisely as possible, the specific area of need and provide accelerated supplemental instruction to meet those needs. To aid staff in determining eligibility for supplemental intervention services for ELs,



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it is recommended that schools review the [English Learner Master Plan \(Chapter 2\)](#) for minimum progress expectations for the various program options. Further guidance for intervention services for ELs can be found in the [English Learner Master Plan \(Chapter 3\)](#).

ELD intervention may be funded with Title III. More information is available from the Multilingual and Multicultural Education Department (MMED).

IV. Parent Notification

Parental notification is required before a student may participate in a credit recovery/intervention program. Parents should be notified that their child is at risk of not meeting grade level standards or graduation requirements. Schools may use the *Parent Notification Letters* (Attachment A) to inform parents of program dates, times and locations. A record should be kept of when and to whom a Parent Notification Letter was sent. Once signed and returned by the parent, the Parent Notification Letter should be filed at the school site.

At the conclusion of the intervention session, parents should receive a copy of the *Report of Student Progress in Intervention* (Attachment B) or a school generated report card for students who participated in credit recovery.

V. Organization of Instruction

A. Following are examples of options dependent upon appropriate funding:

1. During the school day
 - a. Zero period
 - b. Seventh period
 - c. Auxiliary
2. Saturday
3. Summer Term
4. Winter Break/Spring Break

B. Class size is determined by the school leadership team based on available funding, staff availability, and number of students who need support.

C. Schools are to complete the *Intent to Offer Intervention Form* (Attachment C) and submit a copy to the Beyond the Bell Branch Academic Intervention Unit by fax at (213) 241-7562 **OR** email to btb-intervention@lausd.net, Attention: High School Intervention Administrator, prior to the start of a planned intervention session.



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VI. Instructional Program

A. Curriculum

Based on an analysis of student achievement data and funding program guidelines, the school leadership team will determine the appropriate curriculum.

Schools may contact their Local District instructional support staff for guidance on materials to be used during a credit recovery/intervention program.

B. Instruction

Effective instruction must be focused and explicit in order to meet the specific needs of all students, including English Learners (ELs), Students with Disabilities (SWDs) and Socio-economically Disadvantaged (SEDs). Teachers must implement high quality standards-based learning activities with clear expectations for student learning. Implementation strategies for purposeful questioning, structured scaffolds for using academic language, and intentional differentiation to engage all participating students, are critical for student success.

Teachers and administrators are encouraged to review and use the *Intervention Observation Snapshot* form (Attachment D) when planning, implementing and monitoring their intervention programs.

VII. High School Credit

A. In order to provide course credit, high schools must assure the following:

1. The course offered must have an approved course number.
2. Teacher must be a highly qualified credentialed teacher in the subject of the course offered.
3. Principal must approve the course offering.
4. Mid-term and failure notices are required.
5. Local District Superintendent must approve the locally designed credit recovery program.

B. Courses may be held before school, after school, as an auxiliary period, on Saturdays, or during school breaks. Pre-approved virtual courses may also be scheduled.

C. Title I funds may be used for credit recovery for students who previously received a D or F in a core subject course. Special attention should be given to provide students an alternative instructional approach to the content when offering credit recovery courses. Title I



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funds may not be used to provide courses for enrichment or to “get ahead.” Credit recovery is limited to the core subject areas of English language arts, mathematics, science and history/social science.

VIII. Staffing

A. Teacher Selection

1. Teachers interested in teaching intervention are to complete the *Teacher Application* form (Attachment E).
2. Schools are to follow the priority and selection guidelines referenced in LAUSD/UTLA agreement, *Guidelines for Teacher Selection* (Attachment F).

B. Clerical and Custodial Support

1. Title I funds may not be used for Clerical OT or Custodial OT.
2. Schools are advised to check with their LD School Fiscal Specialist regarding the appropriate use of other funds for Clerical and/or Custodial Overtime.

C. Administrative Support

1. Administrative supervision is an indirect cost that is only allowed on Saturdays and unassigned time. It requires approval of the SSC and a budget adjustment request when funded with Title I.
2. Schools must submit to their LD Superintendent for signature and approval, a *Request for Extra Duty Pay for Certificated Administrators* (Attachment G) prior to the start date of the planned intervention. The request must follow the *Guidelines for Extra Duty Pay for Certificated Administrators* (Attachment H) established by the Human Resources Division. There will be no after-the-fact approval for extra duty pay.

IX. Attendance Accounting and Documentation

A. Placement in Intervention

1. Placement of eligible students to participate in a planned intervention occurs in MiSiS before the intervention begins.
2. Schools should go to the MiSiS website, <http://misis.lausd.net> and click on “Training”; click on “Job Aids” and then click on “Placement and Update Academic Intervention” which will generate the job aid “Updating Academic Intervention” dated July 2, 2015.
3. From the MiSiS Reports tab option, select the *Intervention Services Report* to generate a list of students placed in intervention. This report may be downloaded as an Excel document for greatest flexibility of use. Schools are to use this report to identify students with missing data, organize class lists, prepare class rosters and populate class attendance registers (when downloaded as an Excel document).



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4. Daily attendance will **not** be taken online **for intervention classes** through MiSiS. *Attendance Registers* (Attachment I) are to be used for recording daily attendance by the intervention teachers. Every intervention teacher is to have an accurate class attendance register. Attendance registers are official records and must be filed at the school site for 5 years.
 5. At the conclusion of the intervention program, teachers must complete the Attendance Register by:
 - a. Calculating total hours of attendance for each student.
 - b. Certifying the accuracy of attendance by signing each page of their attendance register.
 - c. Submitting all documentation to the office staff within one week of the conclusion of the intervention program.
 6. At the conclusion of the intervention program, office staff must enter the following information in the *Student Intervention Service* screen for all students placed in the intervention program:
 - a. Actual Participation Duration (total attendance).
 - b. For students who are placed in an intervention class, but do not show up, the office staff is to enter “0” (zero) hours for attendance and “No Show” for Participation End Reason.
 - c. For students that drop out or attend only part of the intervention program, the office staff is to enter the actual number of hours attended and may select “Dropped Out” for their Participation End Reason.
 7. Schools are to print and submit a copy of the MiSiS *Intervention Services Report* (without any missing required student information and signed by the principal) to Beyond the Bell Branch Academic Intervention Unit, ATTN: High School Intervention Administrator, at the conclusion of the intervention program via Fax at 213-241-7562 OR email to btb-intervention@lausd.net.
- B. Placement in Credit Recovery
1. All courses offered for credit recovery must have an approved course number entered in the subject/course line in the top portion of the *Attendance Register(s)* (Attachment I). Attendance registers must be kept on file for five years for audit purposes.
 2. If credit recovery courses are scheduled outside of the school day, they should be programmed in MiSiS without attendance and marks. Teachers should take attendance on paper and marks are reported at completion or end of the semester.
 3. Progress Grades/Marks must be assigned as letter grades A-F only. Teachers must comply with mid-term and failing grade notifications.
 4. All documentation records must be submitted to the APSCS no later than one week after the end of the program.
 5. The school APSCS is responsible for ensuring that course names, numbers and final grade marks are entered into MiSiS for every student. Refer to MEM-6733.3, *Credit Recovery Program Opportunities*, dated August 24, 2017 for assistance.



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- X. Budget Guidelines and Payroll Procedures
 - A. Time reporting records (e.g. time cards, semi-annual certifications, etc.) must be available to authorized personnel at any time for inspection or audit purposes. Records are to be saved at the school site for five years.
 - B. Payroll procedures require that a separate District timecard must be kept for each employee and funding source.
 - C. Schools are to follow the specific guidelines for each funding source used. If using Federal funds, schools should refer to [BUL-2643.8, *Documentation for Employees Paid from Federal and State Categorical Programs*, dated June 7, 2017.](#)

- XI. Food Services
 - A. Schools may complete an application for food services. Funding program guidelines must be followed regarding allocations for food services. Schools must contact the Cafeteria Manager and complete the *Request to Begin or Change Meal Service* (Attachment J), eight weeks prior to offering the session.
 - B. Schools may also purchase bulk items from the Food Services warehouse using appropriate funding.
 - C. If you have any questions, please contact your Area Food Services Supervisor or call Food Services at 213-241-6419 or 213-241-6422.

- XII. Transportation

Schools are advised to coordinate after school credit recovery/intervention programs with late buses when available. Schools may not use categorical funds to order additional buses. Schools may only use appropriate local funds to order additional buses using the *Application for Auxiliary Transportation/Trip* form (Attachment K).

**RELATED
RESOURCES:**

[BUL-1353.1, *Marking Practices and Procedures in Secondary Schools*, dated December 23, 2005](#)

[BUL-2643.8, *Documentation for Employees Paid from Federal and State Categorical Programs*, dated June 7, 2017](#)

[BUL-4827.1, *Multi-Tiered Framework for Instruction, Intervention, and Support*, dated September 1, 2009](#)

[LAUSD Teaching and Learning Framework Professional Learning and Leadership Development Division, June 2016](#)



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MEM-6733.3, *Credit Recovery Program Opportunities*, dated August 24, 2017

[REF-5670.2, *Online Programs for Secondary Schools*, dated July 15, 2015](#)

The following attachments will assist school personnel:

- A - Parent Notification
- B - Report of Student Progress in Intervention
- C - Intent to Offer Locally Designed Credit Recovery and/or Intervention
- D - Credit Recovery/Intervention Observation Snapshot
- E - Teacher Application
- F - Guidelines for Teacher Selection
- G - Request for Extra Duty Pay for Certificated Administrators
- H - Guidelines for Extra Duty Pay for Certificated Administrators
- I - Attendance Register
- J - Request to Begin or Change Meal Service
- K - Application for Auxiliary Transportation/Trips(s)

ASSISTANCE: For assistance or further information, please contact the Beyond the Bell High School Intervention Administrator at 213-241-7900.



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ATTACHMENT A

SCHOOL NAME

PARENT NOTIFICATION
Locally Designed Academic Support Program

To the Parent/Guardian of _____
 _____ (Student's Name) _____ (Date)
 _____ (Date of Birth) _____ (Grade) _____ (Room #)

This letter is to inform you that at this time your son/daughter is at risk of not meeting grade-level standards. Your son/daughter is not academically proficient as identified on the most recent academic test data. In order to provide additional academic support, we have scheduled your son/daughter to attend academic intervention in the following subject area(s):

- English Language Arts English Language Development Mathematics
 Science Social Science

Program Dates: _____ to _____

Days & Time: _____

Location: _____

Please complete the information below and return this form to your child's teacher. Daily attendance is critical and we look forward to your son/daughter participating in this program.

Sincerely,

 Principal's Signature Date

Return to : _____

Parent/Guardian Statement:

I have received and understand the above information regarding the Locally Designed Academic Support Program offered to students not meeting proficiency as identified on the most recent academic test data. I understand that my son/daughter is being provided this program because he/she is at risk of not meeting grade level standards.

- Yes, I give permission for my child to attend. No, I do not give permission for my child to attend.

 Student's Name (Please Print) Date

 Parent/Guardian Signature Parent/Guardian Contact Number

 Home Address



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ATTACHMENT A

SCHOOL NAME

NOTIFICACIÓN PARA LOS PADRES
Programas de Apoyo Académico Localmente Diseñado

Al padre o tutor de: _____
(Nombre del estudiante) (Fecha)

(Fecha de nacimiento) (Grado) (Número de salón)

El propósito de esta carta es informarles que su hija(o) corre el riesgo de no cumplir con los estándares correspondientes a su nivel de grado. De acuerdo a los datos mas reciente, su hija(o) no es académicamente proficiente. Para proporcionarle soporte académico adicional hemos registrado a su hija(o) para que asista a los servicios académicos de intervención en la siguiente materia(s):

- Inglés Desarrollo del Idioma Inglés Matemáticas Ciencias Ciencias Sociales

Fecha del Programa: _____ a _____

Días y Horas _____

Lugar: _____

Por favor complete la información de abajo y regrésela a el/la maestro(a) o consejero(a) de su hijo(a). La asistencia todos los días es critica y esperamos ansiosos a que su hijo(a) participe en este programa.

Sinceramente,

Firma del Director (Fecha)

Devuelto a: _____

Declaración del padre/tutor:

Yo he recibido y entiendo la información arriba con respecto al Programa de apoyo académico Diseñado Localmente que es ofrecido a los estudiantes identificados como no proficientes por los datos de exámenes académicos mas recientes. Yo entiendo que mi hijo(a) recibirá esta oportunidad porque el/ella esta a riezgo de no alcanzar los estándares de su nivel de grado.

- Sí, doy permiso para que mi hijo(a) asista. No, no doy permiso para que mi hijo(a) asista.

Nombre del estudiante (Fecha)

Firma del padre/tutor (Padre/Tutor Numero de teléfono)

Domicilio



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ATTACHMENT B

Locally Designed Academic Support Program
REPORT OF STUDENT PROGRESS

Student's Name _____ Grade _____ Teacher _____

School Name _____

Dates of Program: From: _____ To: _____

Attendance Days Present: _____ Days Absent: _____

SUBJECT	PRE-TEST	POST TEST	OVERALL PROGRESS
<input type="checkbox"/> English Language Arts			
<input type="checkbox"/> English Language Development	Date Taken _____	Date Taken _____	<input type="checkbox"/> Satisfactory
<input type="checkbox"/> Mathematics	Pre-Test Score _____	Post Test Score _____	<input type="checkbox"/> Unsatisfactory
<input type="checkbox"/> Science			<input type="checkbox"/> Incomplete*
<input type="checkbox"/> Social Science/History			

* Student attended less than 1/2 of program session

Student Progress	Satisfactory	Unsatisfactory	Incomplete *
Achievement: Student shows improvement in skills and concepts taught in class.			
Participation: Student engages in activities which contribute to learning.			
Perseverance: Student displays determination in learning without giving up.			
Attitude: Student respects others, accepts challenges, and has a positive outlook			
Attendance: Student comes to class on time and completes a full session each day.			

Teacher Comments:

Teacher Signature _____ Date _____ Principal _____

Copy to: Guardian/Parent
 Student File



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ATTACHMENT B

Programa de Apoyo Académico Localmente Diseñado
PROGRESO DEL ESTUDIANTE

Nombre: _____ Grado: _____ Maestro: _____

Escuela: _____

Fecha del Programa: _____ Desde: _____ Hasta: _____

Asistencia: _____ Días Presente: _____ Días Ausente: _____

SUBJECT	PRE-TEST	POST TEST	OVERALL PROGRESS
<input type="checkbox"/> Artes del Lenguaje Inglés	Fecha del Examen _____ Puntuación _____	Fecha del Examen _____ Puntuación _____	<input type="checkbox"/> Satisfactorio <input type="checkbox"/> No satisfactorio <input type="checkbox"/> Incompleto*
<input type="checkbox"/> Desarrollo del Idioma Inglés			
<input type="checkbox"/> Matemáticas			
<input type="checkbox"/> Ciencias			
<input type="checkbox"/> Ciencias Sociales/Historia			

*Estudiante asistió a menos de la mitad de las sesiones del programa total.

Progreso del Estudiante	Satisfactorio	Insatisfactorio	Incompleto*
Alto Logro: Estudiante demuestra mejoras en las estándares y los conceptos discutidos en clase.			
Participación: Estudiante participa en las actividades que contribuyen al aprendizaje.			
Perseverancia: Estudiante demuestra determinación en aprender sin darse por vencido.			
Actitud: Estudiante respeta a los demás, tiene una actitud positiva, y acepta los retos.			
Asistencia: Estudiante viene a clase puntualmente y completa la sesión cada día.			

Comentarios del Maestro(a):

Firma del Maestro(a) _____ Fecha _____ Directora(or) _____

Copia a: Guardianes/Padres
 Archivo del estudiante



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ATTACHMENT C-Sample

BEYOND THE BELL BRANCH, ACADEMIC INTERVENTION UNIT
Intent to Offer Locally Designed High School Credit Recovery and/or Intervention

High School _____ Location Code _____ LD _____

Contact Person _____ Title _____ Email _____@lausd.net Telephone & Extension _____

Please specify program funding (e.g. – Title I, TSP, SIG, etc.) _____

Student Eligibility Criteria: Students in grades 9-12 who previously earned a D or F in a core subject-English, math, science, history/social science

Following are 3 examples of calculating paid hours for credit recovery sessions:

1. Classes held on weekdays only. (Column D X Column E = Column F per teacher)
2. Classes held on Saturdays only. (Column H X Column I = Column J per Teacher)
3. Classes held on both weekdays and Saturdays times number of sections. ((Column F + Column J] x Column K = Total hours paid per teacher)

A	B	C	D	E	F	G	H	I	J	K	L
Course Title	Start & End Dates of Course Session	Start & End Times of Classes <i>Weekdays M, T, W, Th, F</i>	Hrs./Mins. per Class Meeting <i>(M-F)</i>	Number of Class Mtgs <i>(M-F)</i>	Total # of Weekday Hours <i>Column D x Column E</i>	Start & End Times Saturdays <i>(includes 30 mins. nonpaid break)</i>	Hrs./Mins. per Class Meeting <i>(Saturdays)</i>	Number of Class Mtgs <i>(Saturdays)</i>	Total # of Saturday Hours <i>Column H x Column I</i>	Number of Course Sections	Total Number of Hours X Number of Sections <i>Column F + Column J x Column K</i>
Algebra 1B	10-2-17 to 12-15-17	M, W & Th 3:15 p.m.- 5:15 p.m.	2 hrs.	30	60					2	120
English 10B	10-7-17 to 3-17-18					9:00 a.m.- 1:30 p.m.	4 hrs.	15	60	3	180
Biology B	10-2-17 to 12-15-17	M & W 3:15 p.m.- 5:15 p.m.	2 hrs.	14	28	8:30 a.m.- 1:00 p.m.	4 hrs.	8	32	1	60

Principal Signature _____

Date _____

Return this form to Beyond the Bell Branch Academic Intervention Unit for review **prior to the start of the credit recovery or intervention program/session** at FAX # (213) 241-7562 or email: btb-intervention@lausd.net, Attn: High School Intervention Administrator.



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BEYOND THE BELL BRANCH, ACADEMIC INTERVENTION UNIT
Intent to Offer Locally Designed High School Credit Recovery and/or Intervention

High School: _____ Location Code: _____ LD: _____

Contact Person: _____ Title: _____ Email: _____ @lausd.net Telephone & Extension: _____

Please specify program funding (e.g. –Title I, TSP, SIG, etc.): _____

Student Eligibility Criteria: _____

A	B	C	D	E	F	G	H	I	J	K	L
Course Title	Start & End Dates of Course Session	Start & End Times of Classes <i>Weekdays M, T, W, Th, F</i>	Hrs./Mins. per Class Meeting <i>(M-F)</i>	Number of Class Mtgs <i>(M-F)</i>	Total # of Weekday Hours <i>Column D x Column E</i>	Start & End Times Saturdays <i>(includes 30 mins. nonpaid break)</i>	Hrs./Mins. per Class Meeting <i>(Saturdays)</i>	Number of Class Mtgs <i>(Saturdays)</i>	Total # of Saturday Hours <i>Column H x Column I</i>	Number of Course Sections	Total Number of Hours X Number of Sections <i>Column F + Column J x Column K</i>

Principal Signature _____

Date _____

Return this form to Beyond the Bell Branch Academic Intervention Unit for review **prior to the start of the credit recovery or intervention program/session** at FAX # (213) 241-7562 or email: btb-intervention@lausd.net, Attn: High School Intervention Administrator.



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ATTACHMENT D

CREDIT RECOVERY / INTERVENTION OBSERVATION SNAPSHOT
 Adapted from the Teaching and Learning Framework



Observer Name/Title _____

School _____

Date/Time _____

Teacher/Room # _____

Course(s) _____

of Students _____

<u>STANDARD/ELEMENT</u>	<u>STRATEGIES</u>	<u>EXAMPLES</u>	<u>OBSERVATION NOTES/EVIDENCE</u>
1d1 <i>Standards-based Learning Activities</i>	Activities are designed to engage students in cognitively challenging work that is aligned to the standards. Needs of diverse student subgroups, including English Learners (ELs), Students with Disabilities (SWDs), Socio-economically Disadvantaged (SEDs) are addressed.	Teacher moves around continually, asking questions, listening to student discussions, clarifying information and encouraging multiple solutions. Graphic organizers, Thinking Maps, rubrics, criteria charts, and manipulatives, etc. are used in place of low rigor, rote activities, such as, textbook "end of chapter" seat work, drill sheets or copying. Learning is differentiated for diverse learners.	
2b2 <i>Expectations for Learning and Achievement</i>	The culture of the classroom reflects a growth mindset with clear and high expectations about what is expected of students in order for them to learn and achieve.	Students are directed to what they are learning, "Look at...; take note of...; be aware of..." When questioned, students are able to explain the objective, rationale/purpose and expected learning from completing a task. Students are recognized for effort and perseverance put into tasks.	
3a4 <i>Use of Academic Language</i>	Academic language is used to communicate and deepen understanding of the content.	Teacher models correct use of academic language through structured opportunities for students. High utility word banks, word walls, notebooks and study logs are used to practice/record academic vocabulary. Sentence/language frames and academic language structures/templates are provided to support students' use of academic vocabulary verbally and in writing.	
3b1 <i>Quality and Purpose of Questions</i>	Questions are designed to challenge all students and elicit high level thinking.	Questions cannot be answered with yes or no answers; explanations or justifications are required. Models, examples, visuals, language structures are provided to enable diverse learners to answer questions.	
3b2 <i>Discussion Techniques and Student Participation</i>	Techniques are used to ensure that all students share their thinking around challenging questions.	All students participate through the use of intentionally selected strategies, such as, "Think/Pair/Share/Capture," "Quote Your Neighbor," "Stop and Talk," etc. Teaching strategies are intentionally selected to differentiate and engage all students in rigorous, intellectual discussions. Room is set up to allow for flexible grouping.	



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ATTACHMENT E

TEACHER APPLICATION
Locally Designed Credit Recovery/Intervention Program

FOR PRINCIPAL USE:
 Selection Priority #: _____
 Seniority Date: _____
 Date Assigned _____

APPLICATION
 Filing Deadline: _____
 15 Working Days before Class Begins
 Date Received: _____

Please fill in this application completely. Indicate "N/A" if not applicable. Print in ink or type all information.

1. _____
 Payroll Name (Last) (First) (Middle) LAUSD Employee No.

2. _____
 Address (Street) (City) (State) (Zip Code)

3. Contact Number () _____ School Telephone () _____

4. _____
 Present Position Grade Level/Subject

5. _____
 Present School or Office Local District

6. Please list any special credentials or specialized and intensive training you have completed in the area of literacy and/or math intervention.

7. Authorization: BCLAD/BCC CLAD/LDS SB 1969

If selected for this assignment, I agree to complete the entire assignment and attend any required training.

 Teacher's Signature

 Date



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ATTACHMENT F

GUIDELINES FOR TEACHER SELECTION
Locally Designed Credit Recovery/Intervention Program

The Locally Designed Intervention Program is designed to provide targeted academic support to identified students. Scheduling of sessions will be locally determined. Teachers who volunteer for this additional assignment agree to teach the entire session and to attend training if required. School site teachers have priority.

SELECTION

Priority #1

Permanent teacher at the local site in the affected grades/subject fields with appropriate authorization and extensive training in the grade/subject field as evidenced by:

- i. Special credential and/or certificate or Board Permit or
- ii. Successful completion of specialized training and
- iii. Necessary qualifications to teach English Language Learners, Special Ed., etc.

Priority #2

Same as above with experience in any other grades/subject field.

Priority #3

Same as above with basic training in grades/subject field and in affected grades.

Priority #4

Same as above with basic training in other than the affected grades/subject field.

Priority #5

Permanent teacher in same priority order as above (#1-#4) but at other locations – A Local District-wide list of such employees who would be willing to work at another location will be established. All teachers with the appropriate qualifications within each of the above categories will be selected in seniority order.

Priority #6

Retiree with appropriate credentials, authorization and training.

Priority #7

Probationary teachers by seniority at the local site.

Priority #8

Emergency Permit teachers by contract date at the local site.

If there are more eligible applicants within each priority to teach a specific course at any one school than there are positions available, District seniority on a rotational basis, shall determine the selection. An applicant, who taught in the program during the previous session, shall not be eligible for service until all teachers in the priority grouping who did not teach the previous session are assigned. Ties in District seniority shall be broken under the provisions of Article XI, Section 6.



LOS ANGELES UNIFIED SCHOOL DISTRICT
REFERENCE GUIDE

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 October 10, 2017

ATTACHMENT G

Los Angeles Unified School District
Human Resources Division
Certificated Administrative Services

REQUEST FOR EXTRA DUTY PAY FOR CERTIFICATED ADMINISTRATORS

TO: _____ **Date:** _____
 Local District Instructional Area Superintendent/Division Head

 Local District/Division

FROM: _____ _____ _____
 Principal/Administrator Title Location Code
 _____ _____ _____
 School/Office Name Email Telephone

RE: Extra Duty Pay Request – Administrator Information

Name of Administrator: _____ Emp. No: _____
 Current Position: _____ Basis: _____ Location: _____

Description of services provided and rationale:

Date of Services: Start Date: _____ End Date: _____
 Day(s) of the Week: _____ Start Time: _____ End Time: _____
 Total Hours Requested: _____

Cost Center to be Charged:

School/Office: _____ Location Code: _____
 Cost Center: _____ **Fund: _____ Functional Area: _____

** Use of Categorical Funds (Title I and EIA) also requires written approval on the Budget Adjustment Request (BAR) from the appropriate central office categorical personnel, either Federal & State Education Programs or Multilingual & Multicultural Education.

Approved My signature approving this request for extra duty pay is also verification that this assignment, in combination with any other assignment(s), does not exceed the 200-hour per pay period limit for this employee (per Human Resources Policy Guide A7 – Assignment Multiple).

Not Approved

 Local District Instructional Area Superintendent/Division Head Signature Date

Note: The approved HR Form 9051 is to be kept on file at the school/time reporting location as part of the required payroll support documentation.





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ATTACHMENT H

Los Angeles Unified School District
Human Resources Division

GUIDELINES FOR EXTRA DUTY PAY FOR CERTIFICATED ADMINISTRATORS

I. Summary/Guidelines

It has been a longstanding District expectation and practice that administrators devote the time necessary to perform their duties. Although, in recognition of the “professional workday,” when the administrator’s schedule requires extended work hours on a given day, flexible work hours on a subsequent day may be taken with the prior approval of the immediate supervisor, in accordance with LAUSD/AALA Collective Bargaining Agreement, Article X, Sections 1.2 and 1.3. Generally, administrators are not provided extra pay or compensatory time off for performing job-related duties.

However, in very limited circumstances, administrators may be eligible for “extra duty” pay (X or Z Basis) when administrators perform services and/or duties on unassigned days that are related to the supervision of the core academic instructional program. The circumstances in which extra duty pay may be warranted are exceptions, rather than the rule. An unassigned day is defined as a non-business day which falls “outside” of the administrator’s regular calendar basis/work week.

Extra duty pay (X or Z Basis) is not to be approved or reported for any extended work hours on a regular work day in which regular time pay hours are reported, regardless of the funding source or reason. The only exception to this is at School Improvement Grant (SIG) schools on days in which the school day has been extended. Administrators at School Improvement Grant (SIG) schools are eligible for X Basis for the extended instructional work time on any day in which the schedule provides extended instructional time for students.

In addition, extra duty pay (X or Z Basis) is not to be approved or reported for “catch-up work done on weekends, holidays, unassigned days, or on a regular work day in which regular time pay hours are reported, **regardless of the funding source or reason.**

Prior written approval for all extra duty pay (X or Z Basis) for administrators must be obtained from the appropriate ESC Instructional Area Superintendent/Division Head, before the service commences and time reporting takes place, regardless of the funding source or reason. As part of the approval process, appropriate funding must be identified and available in the school or office budget.

II. Funding for Extra Duty Pay for Administrators

- A. Appropriate funding must be identified and available in the school or office budget.
- B. *Imprest Funds* or the *P Card* cannot be used to pay any extra duty pay, any salary payment, or for professional services of any kind.



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Guidelines for Extra Duty Pay for Certificated Administrators

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- C. The use of categorical funds for administrator X Basis, Title I 7S046/70S46, EIA-EDY 7V462/74V62, EIA-LEP 7S536, EIA-LEP 7V603, and EIA-SCE 7S539, requires the PRIOR approval of the applicable advisory council, the School Site Council, and written approval on the Budget Adjustment Request (BAR) from the appropriate central office categorical personnel (either Deborah Ernst, Director, Federal & State Education Programs, or Hilda Maldonado, Director, Multilingual & Multicultural Education).
1. Categorical funds expended prior to written approval on the Budget Adjustment Request (BAR) from the appropriate central office categorical program personnel (either Deborah Ernst, Director, Federal & State Education Programs, or Hilda Maldonado, Director, Multilingual & Multicultural Education) must be repaid to the applicable Federal and/or State funding source.
 2. There will be no after-the fact approval for extra duty pay when funding with categorical resources.
 3. When using categorical funds, the professional development and/or intervention must be focused on ELA, Math, or ELD. ELD intervention may only be funded with resources for English Learners.
 4. Administrative salaries for intervention and/or site-based professional development on unassigned days cannot be budgeted (allocated) during the categorical budget development process. As a result, categorical funds cannot be used for extra duty pay (X or Z Basis) for administrators for work performed between the period of time when the administrator's regular basis ends (for one school year) and begins for the new school year (Summer Break).
 5. After approval of the applicable advisory council and the School Site Council, a budget adjustment request for X Basis is to be prepared and these salaries must be factored into the indirect cost.
 - a. For professional development pertaining to ELA, mathematics, science, social studies, and ELD, the agenda(s) must be attached to the Budget Adjustment Request (BAR).
 - b. For intervention programs, a flyer or notification to parents describing the intervention must be attached to the Budget Adjustment Request (BAR). The description should include the following:
 - i. The date(s) and time.
 - ii. Number of sessions/days
 - iii. Approximate number of students.



Guidelines for Extra Duty Pay for Certificated Administrators
Page 3

6. The use of Title III 7S176 is not allowed for extra duty pay (X or Z Basis) for administrators, regardless of the reason or program.
7. Questions regarding the use of categorical funds for administrator X Basis and categorical fund expenditure approval should be directed to the appropriate central office categorical program personnel as follows:
 - a. Deborah Ernst, Director, Federal & State Education Programs, at (213) 241-6990.
 - b. Hilda Maldonado, Director, Multilingual & Multicultural Education, at (213) 241-5582.

III. Process to Request Extra Duty Pay (X or Z Basis) for Certificated Administrators

- A. Effective immediately, before commencing service and time reporting, prior written approval (using HR Form 9051, *Request for Extra Duty Pay for Certificated Administrators*) for all extra duty pay (X or Z Basis) must be obtained from the applicable ESC Instructional Area Superintendent/Division Head.
- B. The completed HR Form 9051, *Request for Extra Duty Pay for Certificated Administrators*, is to be sent by the principal/site administrator to the respective ESC Instructional Area Superintendent/Division Head for approval, even when the request is for extra duty pay (X or Z Basis) for the principal/site administrator.
- C. The approved HR Form 9051 should be returned to the requesting principal/site administrator, with a copy retained by the applicable Educational Service Center/Division.
- D. A copy of the approved HR Form 9051, *Request for Extra Duty Pay for Certificated Administrators*, is to be provided to the time reporter and kept on file at the school/time reporting location as part of the required payroll support documentation for audit purposes for five years.

IV. Limit on Additional Assignments for Certificated Employees

- A. Certificated employees are limited to additional assignments (including, but not limited to X and Z Basis), certificated or non-certificated, in which regular time pay hours and additional assignment(s) hours do not exceed 200 hours in any pay period. (Policy Guide A7 – Assignment Multiple)
 1. This 200 hour maximum per pay period limit applies to all certificated assignments regardless of whether the additional assignment is certificated, classified, or unclassified.
 2. The signature of an ESC Instructional Area Superintendent or Division Head on a *Request for Extra Duty Pay for Certificated Administrators* (HR Form 9051) is considered by the Human Resources Division as verification that the assignment will not exceed the 200 hour per pay period limit.



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Guidelines for Extra Duty Pay for Certificated Administrators Page 4

- B. If an assignment will cause the certificated employee to exceed the 200 hour per pay period limit, the requesting school/office must obtain a written pre-approval from the applicable ESC Instructional Area Superintendent/Division Head and respective Deputy Superintendent.
- C. A copy of the written approval by the respective Deputy Superintendent to exceed the 200 hour per pay period limit is to be provided to the applicable time reporter and kept on file at the school/time reporting location as part of the required payroll support documentation for audit purposes for five years.

If you have any questions or need more information, please contact Maria Voigt, Administrative Assignments, at (213) 241-6365.

ATTENDANCE REGISTER

Locally Designed Credit Recovery/Intervention Programs

School Name: _____ **Location Code:** _____ **LD:** _____
Teacher: _____ **Course Title and Number:** _____ **Program Fund Code:** _____
Dates: From: _____ **To:** _____ **Schedule:** M T W Th F Sat **Start Time:** _____ **End Time:** _____ **Total # of Hours Offered for Complete Program/Session:** _____

Student Information		Grade	DATE (In the columns below, please indicate the date when your class is meeting) [‡]																Hours Absent	Hours Present	Marks		
Student Name	Student ID #																						
1																							
2																							
3																							
4																							
5																							
6																							
7																							
8																							
9																							
10																							
11																							
12																							
13																							
14																							
15																							

I certify to the best of my knowledge and belief, the hours reported are true and accurate, and reflect the actual students' attendance.

Original: KEEP IN SCHOOL FILE

Teacher's Signature

Date

Page ___ of ___

[‡] "E" in students on the first day of attendance, "X" if the student is absent, and "-" for minutes missed.



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ATTACHMENT J

Request to Begin or Change Meal Service



Instructions

1. Complete one form for each program or requested change.
2. Send completed form to Area Food Services Supervisor for approval

CAFETERIA (PARENT) SITE INFORMATION (Must be completed for all requests):			
Café/Parent Site Location Code:	Café/Parent Site Location Name:	District:	Date:
Café/Parent Site Location Address:		AFSS:	
MEAL PROGRAM INFORMATION (Must be completed for all requests):			
Program Type (Select one): <input type="radio"/> Self <input type="radio"/> Offsite <input type="radio"/> Snack <input type="radio"/> Supper	Change Type (Select one): <input type="radio"/> New Meal Program <input type="radio"/> Change/Extension (Date/Days/Times) <input type="radio"/> Add a Supper Student Organization/Group <input type="radio"/> Add Supper Saturday Service <input type="radio"/> Close Program	Grade Level: _____ to _____ Start Date: ____/____/____ End Date: ____/____/____ Serving Time: (Circle am or pm) Start: _____ am pm End: _____ am pm	
Program Loc Code (if Offsite):	Program/Organization/Group Name:	Program Address (if Offsite):	Program/Organization/Group Location on Campus:
Program/Organization/Group Contact Name:		Phone #:	Email:
Site Type (select one): <input type="radio"/> Elementary <input type="radio"/> Middle School <input type="radio"/> High School <input type="radio"/> Special Ed <input type="radio"/> Span <input type="radio"/> PC <input type="radio"/> Other _____		Type of Service Requested: <input type="radio"/> Breakfast <input type="radio"/> Lunch <input type="radio"/> Snack <input type="radio"/> Supper	Service Days: <input type="radio"/> Monday <input type="radio"/> Tuesday <input type="radio"/> Wednesday <input type="radio"/> Thursday <input type="radio"/> Friday <input type="radio"/> Saturday
Additional Remarks:			
FOR NEW PROGRAMS: I am submitting this request a minimum of 6-8 weeks before program begins. I will submit signed "Meal Service Agreement" at least 2 weeks prior to start of the program. I understand meals will not be provided prior to Food Services for approval since State approval is required. Program Administrator or Designee: _____ Date: _____			
AREA FOOD SERVICES SUPERVISOR REVIEW & APPROVED: <input type="radio"/> Yes (if No, notify cafeteria manager and/or organization/group.) Signature: _____ Date: _____			
FOOD SERVICES/OPERATIONS USE (if no changes, select N/A for each item. For multiple site changes, attach list.):			
Site Information: State Site Id#: _____ Check all meal services offered as applicable: <input type="radio"/> NSL <input type="radio"/> SFSP <input type="radio"/> CCFP If CCFP, select from the following: <input type="radio"/> EEC <input type="radio"/> IC <input type="radio"/> KIDCARE For contracted meal services, check the type of contract: <input type="radio"/> N/A <input type="radio"/> Charter <input type="radio"/> County Program Check if applicable to the site: <input type="radio"/> N/A <input type="radio"/> ISIC <input type="radio"/> High Priority <input type="radio"/> Headstart	Site Type: <input type="radio"/> Prep <input type="radio"/> NNC Area Eligible: <input type="radio"/> Yes <input type="radio"/> No % _____ Funding Line _____ Especially Needy: <input type="radio"/> Yes <input type="radio"/> No % _____	Provision 2 – Check the applicable year: <input type="radio"/> N/A <input type="radio"/> Base Year <input type="radio"/> Year 2 <input type="radio"/> Year 3 <input type="radio"/> Year 4 <input type="radio"/> Year 5 <input type="radio"/> Year 6 <input type="radio"/> Year 7 Adjusted Attendance Factor: <input type="radio"/> N/A % _____	



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ATTACHMENT K

TODAY'S DATE

(mm/dd/yy)

**LOS ANGELES UNIFIED SCHOOL DISTRICT
TRANSPORTATION SERVICES DIVISION
APPLICATION FOR AUXILIARY TRANSPORTATION/TRIP(S)**

FOR OFFICE USE

JOB NO.

Funding Source (check one): Reimbursable Student Body
 Program **FUND** _____ **AREA** _____ **PROG CODE** _____

SCHOOL

REQUESTING SCHOOL'S NAME _____
LD _____

SCHOOL PHONE NUMBER & EXT. _____

LOCATION CODE _____

SCHOOL FAX NUMBER _____

ESC _____

CALENDAR TRACK _____

SCHOOL TYPE _____

PK-K 1 2 3 4 5 6 7 8 9 10 11 12

CHECK GRADES

MR. MS.

RESPONSIBLE ADMINISTRATOR _____

RESPONSIBLE ADMINISTRATOR E-MAIL ADDRESS _____

MR. MS.

CONTACT PERSON _____

CONTACT PERSON E-MAIL ADDRESS _____

DATE(S)

DATE OF TRIP (OR OF 1ST TRIP) (mm/dd/yy) _____

DATE OF LAST TRIP (IF A MULTI-DATE TRIP) (mm/dd/yy) _____

M T W TH F SA SU
CHECK DAY(S) OF TRIP(S)

TIMES

AM PM
REQUESTED PICK UP TIME (hh:mm) _____

AM PM
REQUESTED ARRIVAL TIME (hh:mm) _____

AM PM
REQUESTED DEPARTURE TIME (hh:mm) _____

AM PM
REQUESTED RETURN TIME (hh:mm) _____

OF PUPILS _____

OF ADULTS _____

OF WHEELCHAIRS _____

OF BUSES REQUIRED _____

YES NO
IS THIS A ONE-WAY TRIP?

SEATBELT / LAP RESTRAINTS
STORAGE COMPARTMENTS
CHECK IF REQUIRED

IMPORTANT:

- ALL TRIPS MUST BE BETWEEN THE HOURS OF 9:00 AM – 2:00 PM UNLESS APPROVED IN ADVANCE BY THE TRANSPORTATION SERVICES DIVISION SENIOR BUS DISPATCHER. ANY QUESTIONS, CONTACT 213-580-2900.
- CANNOT EXCEED 65 PASSENGERS PER BUS.
- ADDITIONAL PASSENGERS MAY REQUIRE THE SCHEDULING OF AN ADDITIONAL BUS.

FOR SCHOOL JOURNEY TRIPS ONLY

1 LIST 3 CHOICES IN COMMENT SECTION (FROM FIELD TRIP HANDBOOK, APPENDIX D, PART A).

2 HAS APPOINTMENT BEEN MADE BY SCHOOL WITH THE SITE? YES NO

TIME OF APPT. _____

3 DATES PREFERRED

(mm/dd/yy)

(mm/dd/yy)

(mm/dd/yy)

(mm/dd/yy)

(mm/dd/yy)

(mm/dd/yy)

4 DATES TO AVOID

(mm/dd/yy)

(mm/dd/yy)

(mm/dd/yy)

(mm/dd/yy)

(mm/dd/yy)

(mm/dd/yy)

COMMENTS/CHOICES

DEPART FROM/FIRST PICK UP

SCHOOL / LOCATION NAME _____

ADDRESS, CITY, ZIP _____

DESTINATION NAME

LOCATION CODE (IF APPLICABLE) _____

PLACE NAME _____

PHONE NO. & EXT. _____

ADDRESS, CITY, ZIP _____

SIGNATURE

PRINCIPAL/ADMINISTRATOR _____

E-MAIL ADDRESS

NOTE:

Refer to *Field Trip Handbook* for detailed instructions on arranging trips. Submit this completed form **15** working days before the requested trip date to enable buses to be allocated in a timely and cost-efficient manner and trip confirmations to be received by schools prior to the day of the trip.

FOR TRANSPORTATION DISPATCH USE ONLY:

School Journey Tracking # _____

ENTRY DATE _____

ROUTE #(S) _____

ENTERED BY _____

D# _____

REVIEWED BY _____

A# _____

Submit to Transportation Services Division. Retain a Signed Copy at School.