Insert School Name

|  |
| --- |
| Close-up image showing the leaf-sides of two oversized books side-by-side on a bookshelf, with additional books in soft focus background |
| Equitable Services Plan for Services  For the School Year:  July 1, 2021 – June 30, 2022 |
|  |

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School Year: 2021-2022

# Equitable Services Plan for Services

| Private School Name | Private School Number | Private School Site Administrator | Email | Telephone |
| --- | --- | --- | --- | --- |
|  |  |  |  |  |

**2021-2022 Funding Allocation Profile**:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Funding Source** | **Preliminary $**  **07/01/2021** | **Revision $** | **Revision $** | **Final $** |
| Title I – 50643 | $ | $ | $ | $ |
| Title I – 50647 (Parent) | $ | $ | $ | $ |
| Title II – 53750 | $ | $ | $ | $ |
| Title III – | $ | $ | $ | $ |
| Title IV – 51010 | $ | $ | $ | $ |
| CARES Act | $ | $ | $ | $ |

**Carryover Funding Allocation Profile**:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Funding Source** | **Preliminary $**  **07/01/2021** | **Revision $** | **Revision $** | **Final $** |
| Title I | $ | $ | $ | $ |
| Title II | $ | $ | $ | $ |
| Title III | $ | $ | $ | $ |
| Title IV | $ | $ | $ | $ |
| CARES Act | $ | $ | $ | $ |

## Purpose and Description

Briefly describe the purpose of this plan.

Briefly describe the school’s plan to meet the ESSA requirements in alignment with Title I, II, III, IV and/or CARES Act programs.

## Private School Demographics

**2020-2021 Funding Allocation Profile**:

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **2017-2018** | **2018-2019** | **2019-2020** | **2020-2021** |
| Total Student Population |  |  |  |  |
| Total Low-Income Students |  |  |  |  |
| Total Low-Income Students in Attendance Area |  |  |  |  |
| Total Students At-Risk or Failing |  |  |  |  |

## Stakeholder Involvement

How, when, and with whom did the school consult as part of the planning process for this Equitable Services Plan?

## 

## Comprehensive Needs Assessment Summary

How was the comprehensive needs assessment process conducted?

What were the results of the comprehensive needs assessment process? What information was concluded as a result of analyzing perception, student achievement, school programs/process, and demographic data?

Student Achievement Data: Discuss trends seen in curriculum embedded assessments, school-wide assessments, review/calibration of student work, writing, etc.

School Accreditation Findings: Discuss WASC findings/recommendations, Diocese/school initiatives.

Faculty Survey for Professional Development Needs: Administer survey and discuss results.

How are the school goals connected to priority needs and the needs assessment process? It is clear that a detailed analysis of multiple types of data was conducted to select the goals.

How do the goals address the needs of Title I, II, and IV student population? How is special recognition paid to meeting the needs of children who are disadvantaged?

## Goals, Actions/Services, Expenditures, & Annual Review

Complete a copy of the Goal table for each of the school’s goals. Duplicate the table as needed.

### School Goal 1

(Must be a SMART Goal)

### Measurable Outcomes

| Metric/Indicator | Baseline/Actual Outcome |
| --- | --- |
|  |  |
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|  |  |
|  |  |

### Action/Service 1

**Students to be Served by this Action/Service**

(Identify the student group(s) the applicable to the action/service implementation.)

Action/Service Narrative/Description

**Proposed Expenditures for this Action/Service 1**

List the amount(s) and funding source(s) for the proposed expenditures.

Fund Source - Title I:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
| $ |  |  |
| $ |  |  |
| $ |  |  |
| $ |  |  |
| $ |  |  |

Fund Source – Title II:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
| $ |  |  |
| $ |  |  |
| $ |  |  |

Fund Source – Title IV:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
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| $ |  |  |
| $ |  |  |

Fund Source – CARES Act:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
| $ |  |  |
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| $ |  |  |

### Action/Service 2

**Students to be Served by this Action/Service**

(Identify the student group(s) the applicable to the action/service implementation.)

Action/Service Narrative/Description

**Proposed Expenditures for this Action/Service 2**

List the amount(s) and funding source(s) for the proposed expenditures.

Fund Source - Title I:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
| $ |  |  |
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Fund Source – Title II:

| $ Amount(s) | Object Code | Description |
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Fund Source – Title IV:

| $ Amount(s) | Object Code | Description |
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Fund Source – CARES Act:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
| $ |  |  |
| $ |  |  |
| $ |  |  |

### Action/Service 3

**Students to be Served by this Action/Service**

(Identify the student group(s) the applicable to the action/service implementation.)

Action/Service Narrative/Description

**Proposed Expenditures for this Action/Service 3**

List the amount(s) and funding source(s) for the proposed expenditures.

Fund Source - Title I:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
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Fund Source – Title II:

| $ Amount(s) | Object Code | Description |
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Fund Source – Title IV:

| $ Amount(s) | Object Code | Description |
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Fund Source – CARES Act:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
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### Annual Review/Evaluation – Goal 1

**SPSA Year Reviewed:**

Respond to the following prompts relative to this goal. If the school is in the first year of implementing the goal, an analysis is not required.

#### Analysis

Describe the overall implementation of the strategies/activities and the overall effectiveness of the strategies/activities to achieve the articulated goal.

Briefly describe any major differences between the intended implementation and/or the budgeted expenditures to implement the strategies/activities to meet the articulated goal.

Describe any changes that will be made to this goal, the annual outcomes, metrics, or strategies/activities to achieve this goal as a result of this analysis. Identify where those changes can be found in the Equitable Services Plan.

### School Goal 2

(Must be a SMART Goal)

### Measurable Outcomes

| Metric/Indicator | Baseline/Actual Outcome |
| --- | --- |
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### Action/Service 1

**Students to be Served by this Action/Service**

(Identify the student group(s) the applicable to the action/service implementation.)

Action/Service Narrative/Description

**Proposed Expenditures for this Action/Service 1**

List the amount(s) and funding source(s) for the proposed expenditures.

Fund Source - Title I:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
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Fund Source – Title II:

| $ Amount(s) | Object Code | Description |
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Fund Source – Title IV:

| $ Amount(s) | Object Code | Description |
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Fund Source – CARES Act:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
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| $ |  |  |

### Action/Service 2

**Students to be Served by this Action/Service**

(Identify the student group(s) the applicable to the action/service implementation.)

Action/Service Narrative/Description

**Proposed Expenditures for this Action/Service 2**

List the amount(s) and funding source(s) for the proposed expenditures.

Fund Source - Title I:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
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Fund Source – Title II:

| $ Amount(s) | Object Code | Description |
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Fund Source – Title IV:

| $ Amount(s) | Object Code | Description |
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Fund Source – CARES Act:

| $ Amount(s) | Object Code | Description |
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| $ |  |  |

### Action/Service 3

**Students to be Served by this Action/Service**

(Identify the student group(s) the applicable to the action/service implementation.)

Action/Service Narrative/Description

**Proposed Expenditures for this Action/Service 3**

List the amount(s) and funding source(s) for the proposed expenditures.

Fund Source - Title I:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
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Fund Source – Title II:

| $ Amount(s) | Object Code | Description |
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Fund Source – Title IV:

| $ Amount(s) | Object Code | Description |
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Fund Source – CARES Act:

| $ Amount(s) | Object Code | Description |
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### Annual Review/Evaluation – Goal 2

**SPSA Year Reviewed:**

Respond to the following prompts relative to this goal. If the school is in the first year of implementing the goal, an analysis is not required and this section may be deleted.

#### Analysis

Describe the overall implementation of the strategies/activities and the overall effectiveness of the strategies/activities to achieve the articulated goal.

Briefly describe any major differences between the intended implementation and/or the budgeted expenditures to implement the strategies/activities to meet the articulated goal.

Describe any changes that will be made to this goal, the annual outcomes, metrics, or strategies/activities to achieve this goal as a result of this analysis. Identify where those changes can be found in the Equitable Services Plan.

### School Goal 3

(Must be a SMART Goal)

### Measurable Outcomes

| Metric/Indicator | Baseline/Actual Outcome |
| --- | --- |
|  |  |
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### Action/Service 1

**Students to be Served by this Action/Service**

(Identify the student group(s) the applicable to the action/service implementation.)

Action/Service Narrative/Description

**Proposed Expenditures for this Action/Service 1**

List the amount(s) and funding source(s) for the proposed expenditures.

Fund Source - Title I:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
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Fund Source – Title II:

| $ Amount(s) | Object Code | Description |
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Fund Source – Title IV:

| $ Amount(s) | Object Code | Description |
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Fund Source – CARES Act:

| $ Amount(s) | Object Code | Description |
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### Action/Service 2

**Students to be Served by this Action/Service**

(Identify the student group(s) the applicable to the action/service implementation.)

Action/Service Narrative/Description

**Proposed Expenditures for this Action/Service 2**

List the amount(s) and funding source(s) for the proposed expenditures.

Fund Source - Title I:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
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Fund Source – Title II:

| $ Amount(s) | Object Code | Description |
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Fund Source – Title IV:

| $ Amount(s) | Object Code | Description |
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Fund Source – CARES Act:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
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| $ |  |  |

### Action/Service 3

**Students to be Served by this Action/Service**

(Identify the student group(s) the applicable to the action/service implementation.)

Action/Service Narrative/Description

**Proposed Expenditures for this Action/Service 3**

List the amount(s) and funding source(s) for the proposed expenditures.

Fund Source - Title I:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
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| $ |  |  |
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| $ |  |  |
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Fund Source – Title II:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
| $ |  |  |
| $ |  |  |
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Fund Source – Title IV:

| $ Amount(s) | Object Code | Description |
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| $ |  |  |

Fund Source – CARES Act:

| $ Amount(s) | Object Code | Description |
| --- | --- | --- |
| $ |  |  |
| $ |  |  |
| $ |  |  |

### Annual Review/Evaluation – Goal 3

**SPSA Year Reviewed:**

Respond to the following prompts relative to this goal. If the school is in the first year of implementing the goal, an analysis is not required.

#### Analysis

Describe the overall implementation of the strategies/activities and the overall effectiveness of the strategies/activities to achieve the articulated goal.

Briefly describe any major differences between the intended implementation and/or the budgeted expenditures to implement the strategies/activities to meet the articulated goal.

Describe any changes that will be made to this goal, the annual outcomes, metrics, or strategies/activities to achieve this goal as a result of this analysis. Identify where those changes can be found in the SPSA.

## 

## Budget Summary

#### Budget Spreadsheet Overview – Title I, II, III, IV, and/or CARES Act