

Mississippi Department of Education

Office of Special Education

2021-2022 Extended School Year Application Fillable Forms

Revised 3/2022

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2021-2022 Extended School Year Application

Required Forms

FORM A

COVER PAGE EXTENDED SCHOOL YEAR APPLICATION SUMMER 2022 (SY 2021-2022)

A. SCHOOL DISTRICT:

DISTRICT CODE:

Date

Disability Category	Number Served	Disability Category	Number Served
Autism (AU)		Multiple Disabilities (MD)	
Deaf/Blind (D/B)		Orthopedic Impairment (OI)	
Developmentally Delayed (DD)		Other Health Impairment (OHI)	
Emotional Disability (EMD)		Specific Learning Disability (SLD)	
Hearing Impairment (HI)		Traumatic Brain Injury (TBI)	
Intellectual Disability (ID)		Visually Impaired (VI)	
Language/Speech Impairment (S/L)			
		TOTAL	

C. Beginning Date for ESY ______ (must be after the last day for students in the home district) Ending Date for ESY ______ (may not be after the first day for students in the home district)

D. ASSURANCES

As Superintendent of this district, I certify by my signature that:

- 1. This estimated budget for the ESY has been computed in accordance with Mississippi Department of Education regulations and guidelines.
- 2. All students with disabilities receiving an ESY meet criteria established in accordance with regulations and documentation is on file to support the individual decisions by the IEP Committee(s).
- 3. The specific skills to be maintained are clearly identified on the student's IEP as requiring the provision of an ESY. ESY IEP pages are kept on file for audit and monitoring purposes.
- 4. No expenditure(s) which would have been incurred if there were no ESY is (are) included in this budget. Documentation to support expenditures will be maintained on file for audit inspection.

Superintendent's Signature

E. ESTIMATED OVERA	LL COSTS:	APPROVAL:	
Salaries	\$		
Travel/ Transportation	\$	Division Director	Date
Contractual Services	\$	Office Director, District Fiscal Services	Date
Materials/Supplies/ Commodities	\$	Bureau Director, District Fiscal Services	Date
Private Placement to include Transportation	\$	PROJECTED APPROVAL AMO	DUNT:
Other	\$	\$	
Total	\$] [

FORM B

COVER PAGE AMENDMENT (if applicable) EXTENDED SCHOOL YEAR APPLICATION AMENDMENT REQUEST NUMBER SUMMER 2022 (SY 2021-2022)

Α. SCHOOL DISTRICT:

DISTRICT CODE:

B. STUDENT INFORMATION

Disability Category	Number Served	Disability Category	Number Served
Autism (AU)		Multiple Disabilities (MD)	
Deaf/Blind (D/B)		Orthopedic Impairment (OI)	
Developmentally Delayed (DD)		Other Health Impairment (OHI)	
Emotional Disability (EMD)		Specific Learning Disability (SLD)	
Hearing Impairment (HI)		Traumatic Brain Injury (TBI)	
Intellectual Disability (ID)		Visually Impaired (VI)	
Language/Speech Impairment (S/L)			
		TOTAL	

C. Beginning Date for ESY ______ (must be after the last day for students in the home district) Ending Date for ESY ______ (may not be after the first day for students in the home district)

D. ASSURANCES

As Superintendent of this district, I certify by my signature that:

- This estimated budget for the ESY has been computed in accordance with Mississippi Department of 5. Education regulations and guidelines.
- All students with disabilities receiving an ESY meet criteria established in accordance with regulations 6. and documentation is on file to support the decisions by the IEP Committee(s).
- The specific skills to be maintained are clearly identified on the student's IEP as requiring the provision 7. of an ESY. ESY IEP pages are kept on file for audit and monitoring purposes.
- No expenditure(s) which would have been incurred if there were no ESY is (are) included in this budget. 8. Documentation to support expenditures will be maintained on file for audit inspection.

Superintendent's Signature

Date

E. ESTIMATED OV COSTS:	ERALL	APPROVAL:	
Salaries	\$	7	
Travel/ Transportation	\$	Division Director	Date
Contractual Services	\$	Office Director, District Fiscal Services	Date
Materials/Supplies/ Commodities	\$	Bureau Director, District Fiscal Services	Date
Private Placement to include Transportation	\$	PROJECTED APPROVAL AM	OUNT:
Other	\$	\$	
Total	\$		

FORM C

NONPARTICIPATION ASSURANCE FORM (If applicable)

School Year 2021-2022

School District: _____ District Code: _____

As Superintendent of this district, I certify by my signature that there are no students eligible for Extended School Year Services based on individual IEP committee decisions. Documentation is on file supporting each IEP Committee decision that ESY services are not required.

Superintendent's Signature

Date

This form must be submitted on or before June 1, 2022. An email must be sent to Roscoe Jones notifying him that this form has been uploaded to SharePoint. (RJones@mdek12.org)

FORM D

ESY PROJECTED BUDGET SUMMARY Summer 2022 (SY 2021-2022)

DISTRICT NAME: _____

Expenditures	Amount
Expenditures must be thoroughly explained in the Budget Narrative.	
*Equipment, food, beverages, and incentives are not allowable for ESY.	
Salaries, Wages, Fees and/or Fringes:	\$
Travel/Transportation	\$
Contractual Services:	\$
Materials/Supplies/Commodities:	\$
Private Placement To include transportation costs for DHS/CPS placements. Appropriate Educable Child forms are required for reimbursement:	\$
Other: (ex: Utilities)	\$
Total Projected Budget:	\$

FORM E-1

ESY PROJECTED BUDGET NARRATIVE Summer 2022 (SY 2021-2022)

Enter the names of staff along with the projected salary to include benefits as projected for the SY22 ESY session. Documentation must be on file in the district to justify the necessity and reasonableness of each salary.

Salaries/Fringes

Use the section below to provide a description of the planned use of funds for salaries, wages, and/or fringe benefits. Certified/Licensed Personnel listed here are also listed on Form G. All Personnel listed here are listed on Form H.

Name of Personnel (Alphabetical by Last Name)	Position	Projected Salaries to include Fringe Benefits
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
Total for Salaries, Wages, H	Fees and/or Fringes:	\$

FORM E-2 TRANSPORTATION/TRAVEL *Private Placement Costs should be included on Form F, not this form.*

Bus Transportation

			2001	ransportation			
Bus #	Driver	# of	Miles per day	# of days	Total Miles	Mileage	Total
		Students				Rate	
						\$.585	
						\$.585	
						\$.585	
						\$.585	
						\$.585	
						\$.585	
						\$.585	
						\$.585	
						\$.585	
						\$.585	
						TOTAL	

Parent or Private Carrier

Parent or Private Carrier	# of	Miles per day	# of days	Total Miles	Mileage	Total
	Students				Rate	
					\$.585	
					\$.585	
					\$.585	
					\$.585	
					\$.585	
					\$.585	
					\$.585	
					\$.585	
					\$.585	
					\$.585	
					TOTAL	

Itinerant Personnel

Itinerant Teacher	Miles per day	# of days	Total Miles	Mileage	Total
				Rate	
				\$.585	
				\$.585	
				\$.585	
				\$.585	
				\$.585	
				\$.585	
				\$.585	
				\$.585	
				\$.585	
				\$.585	
				TOTAL	

Grand Total Form E-2 \$_ I Otal Form E-2\$______(Enter on Form D as Travel/Transportation)

FORM E-3 ESY PROJECTED BUDGET NARRATIVE Summer 2022 (SY 2021-2022)

ervices to include travel co Contractual Personnel	Service	Number of	Hourly Rate	Number	Amount
(Alphabetical by Last Name)	Provided	Hours	nouny nuc	of Students Served	Requested
1.					\$
2.					\$
3.					\$
4.					\$
5.					\$
6.					\$
7.					\$
8.					\$
9.					\$
10.					\$
11.					\$
12.					\$
13.					\$
14.					\$
15.					\$

Form E-4 ESY PROJECTED BUDGET NARRATIVE Summer 2022 (SY 2021-2022)

Item	ges, and incentives are not all Quantity	Unit Cost	Amount Requested
1.			\$
2.			\$
3.			\$
4.			\$
5.			\$
6.			\$
7.			\$
8.			\$
9.			\$
10.			\$
11.			\$
12.			\$
13.			\$
14.			\$
15.			\$

Г

Form E-5

ESY PROJECTED BUDGET NARRATIVE Summer 2022 (SY 2021-2022)

Other								
Use the section below to provide a description of the planned use of funds for other expenses incurred for								
Extended School Year. Other expenses should be clearly stated a	nd fully justified.							
Other:	Amount Requested:							
Total for Other:	\$							
	Ť							

FORM F ESY PRIVATE PLACEMENT Summer 2022 (SY 2021-2022)

*Eligibility dates must be current for the duration of ESY for reimbursement approval. IEP ESY pages must be submitted for all students who meet eligibility criteria for ESY services.

**Beginning date must be after the last day of school for the Home District.

***Ending date must be prior to the first day of school for the Home District.

(.	Student Name Alphabetical by Last Name)	Student MSIS Number	Eligibility Category	*Current Eligibility Date	Name of Facility	Date of IEP determination of eligibility for ESY	**Beginning Date of ESY Services	***Ending Date of ESY Services	# Days Served	Daily Rate	Total Amount
1										\$159.76	
2										\$159.76	
3										\$159.76	
4										\$159.76	
5										\$159.76	
6										\$159.76	
7										\$159.76	
8										\$159.76	
9								1		\$159.76	
10										\$159.76	

EDUCATIONAL

RESIDENTIAL

A	lphabetical order by last name: Student Name	Student MSIS Number	Eligibility Category	*Current Eligibility Date	Name of Facility	Date of IEP determinatio n of eligibility for ESY	**Beginnin g Date of ESY of Services	***Ending Date of ESY Services	# Days Served	Daily Rate	Total Amount
1										\$159.76	
2										\$159.76	
3										\$159.76	
4										\$159.76	

5					\$159.76	1
5					\$139.70	

				Form F (continued) PRIVATE PLACEN Summer 2022 (SY 2021-2022) TRANSPORTATION	IENT	
	Student Name	Date	(s) of Facility Closure	Date(s) of Therapy Participation	Mode(s) of Transportation	Cost(s) **Only Amounts Included for Private Placement Total**
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
	Educational Total:		Residentia	 Tuition Total:	Tran	sportation Total:

Form G ESY STUDENT ROLL Summer 2022 (SY 2021-2022)

List all students served in ESY

(Form F must also be completed for students served through Private Placement)

ESY IEP pages must be submitted for all students who meet eligibility criteria for ESY services

*Eligibility dates must be current for the duration of ESY for reimbursement approval.

*Beginning date must be after the last day of school for the Home District.

**Ending date must be prior to the first day of school for the Home District.

NAME OF STUDENT (Alphabetical by Last Name)	MSIS ID NUMBER	Date of Birth	*Current Eligibility Date	Eligibility Category	**Beginning Date of Services	***Ending Date of Services	Total Number of Days	Total Number of Hours	ESYS Justification R/R CPI 1 CPI2 EC	Location of Services	TEACHER	Aide Required Yes/No	List Related Services	Related Service Provider(s)	Transportation Bus(B)/Private Carrier (PC)
1															
2															
3															
4															
5															
6															
7															
8															
9															
10															
11															
12															
13															
14															
15															

TOTAL NUMBER OF STUDENTS SERVED

FORM H ESY PROJECTED SERVICE PROVIDER LISTING

(Personnel listed on Forms E-1, E-3, and G are also listed here)

	Service Provider (Alphabetical by Last Name)	Position	License Number (N/A if not required for position)	Number of Students Assigned	Total Hours
1					
2					
3					
4					
5					
6					
7					
8					
9					
10					

FORM I

REQUEST FOR REIMBURSEMENT EXTENDED SCHOOL YEAR

Summer 2022 (SY 2021-2022)

This form must be accompanied by an expenditure report from the district's software package.

DISTRICT NAME: _____ DISTRICT CODE: _____

ACTUAL ESY EXPENDITURES Salaries	\$	FOR MDE USI Approved for P	
Travel/Transportation	\$	\$	
Contractual Services	\$	Division Director	Date
Materials/Supplies/Commodities	\$		
Private Placement	\$	Office Director	Date
to include Transportation		Bureau Director	Date
Other	\$	Bureau Director	Date
Total	\$	Grants Management	Date

B. STUDENT INFORMATION

Disability Category	Number Served	Disability Category	Number Served
Autism (AU)		Multiple Disabilities (MD)	
Deaf/Blind (D/B)		Orthopedic Impairment (OI)	
Developmentally Delayed (DD)		Other Health Impairment (OHI)	
Emotional Disability (EMD)		Specific Learning Disability (SLD)	
Hearing Impairment (HI)		Traumatic Brain Injury (TBI)	
Intellectual Disability (ID) []		Visually Impaired (VI)	
Language/Speech Impairment (S/L)			
		TOTAL	

As Superintendent of this district, I certify by my signature below and that to the best of my knowledge:

- 1. This application for reimbursement represents the **actual cost** of operating ESY for the 2020-21 summer session. The accompanying expenditure report is reflective of expenses incurred in the provision of ESY services to students in this school district. Sufficient documentation is available for audit inspection.
- 2. The students with disabilities served met the ESY criteria established in accordance with the Mississippi Department of Education regulations and the educational services provided are specified in each student's Individualized Education Program. ESY IEP pages are kept on file for audit and monitoring purposes.
- 3. No expenditure(s) which would have been incurred if there had not been ESY is (are) included for reimbursement. Documentation to support expenditures is on file for audit inspection.

SUPERINTENDENT'S SIGNATURE

DATE

The reimbursement request with the required expenditure report must be uploaded into SharePoint on or before September 30, 2022 along with an email notifying Roscoe Jones (<u>RJones@mdek12.org</u>) that this application and any additional information has been uploaded to SharePoint.

Failure to submit documentation will impact reimbursement.

FORM J PRIVATE PLACEMENT REIMBURSEMENT FORM

Summer 2022 (SY2021-2022)

*Eligibility dates must be current for the duration of ESY for reimbursement approval.

**Beginning date must be after the last day of school for the Home District.

***Ending date must be prior to the first day of school for the Home District.

****If the student was not listed on original application, justification and documentation must be attached.

(4	NAME OF STUDENT Aphabetical by Last Name)	MSIS ID Number	*Current Eligibility Date	Date of Birth	**Beginning Date of Services	***Ending Date of Services	Exit Reason	Number of Days Served	Daily Educational Rate	Total Educational Cost	Transportation Cost as documented on Educable Child Form	Total Cost	****Student Listed in Original Application Yes/No
			*Curre	Da	**Begi	*** *	Ex	Num	Daily Ed	Total Ec	Transpo doci Educab	F	****St Origin
1									\$ 159.76	\$	\$	\$	
2									\$ 159.76	\$	\$	\$	
3									\$ 159.76	\$	\$	\$	
4									\$ 159.76	\$	\$	\$	
5									\$ 159.76	\$	\$	\$	
6									\$ 159.76	\$	\$	\$	
7									\$ 159.76	\$	\$	\$	
8									\$ 159.76	\$	\$	\$	
9									\$ 159.76	\$	\$	\$	
10									\$ 159.76	\$	\$	\$	
	TOTAL									\$	\$	\$	

Form J must be accompanied by Proof of Attendance in compliance with State Board Policy 9.2: Attendance Reporting (see page 40)

OPTIONAL FORMS *Do Not submit with Application

These forms are to be used as worksheets and kept on file in the district

FORM K

OPTIONAL FORM *Do Not submit with Application ESY WORKSHEET SUMMER SCHEDULE FOR EACH TEACHER

Summer 2022 (SY2021-2022)

NAME OF T	NAME OF TEACHER:												
	JUNE			JULY			AUGUST						
DATES OF INSTRUCTION	NUMBER OF HOURS OF INSTRUCTION PER DATE	NUMBER OF HOURS OF TRAVEL PER DATE	DATES OF INSTRUCTION	NUMBER OF HOURS OF INSTRUCTION PER DATE	NUMBER OF HOURS OF TRAVEL PER DATE	DATES OF INSTRUCTION	NUMBER OF HOURS OF INSTRUCTION PER DATE	NUMBER OF HOURS OF TRAVEL PER DATE					

TOTAL NUMBER OF DAYS		TOTAL HOURS OF INSTRUCTION		TOTAL TRAVEL HOURS	
GRAND TOTAL OF HO	URS OF I	NSTRUCTION AND TRAVEL			

FORM L OPTIONAL FORM *Do Not submit with Application ESY WORKSHEET SUMMER SCHEDULE FOR EACH CONTRACTUAL SERVICE PROVIDER Summer 2022 (SY 2021-2022)

NAME:_____

	JUNE		JULY		AUGUST
DATES OF	NUMBER OF HOURS	DATES OF	NUMBER OF HOURS	DATES OF	NUMBER OF HOURS
SERVICE	PER DATE	SERVICE	PER DATE	SERVICE	PER DATE

TOTAL NUMBER OF DAYS	TOTAL HOURS OF SERVICES	

FORM M

<u>OPTIONAL FORM</u> *Do Not submit with Application

ESY WORKSHEET BUS TRANSPORTATION Summer 2022 (SY 2021-2022)

Use the following formulas to calculate bus transportation costs. If the driver is transporting more than one student, the names of all students can be listed on one line.

TRANSPORTATION BY BUS

Driver's Name:	
Student's Name:	
Miles per Day X Number of Days Total Number of Miles Rate per Mile X	=
Total Cost =	\$
Driver's Name:	
Student's Name:	
Miles per DayXNumber of DaysTotal Number of MilesRate per MileXTotal Cost=	=
Driver's Name:	
Student's Name:	
Miles per Day X Number of Days Total Number of Miles Rate per Mile X	\$585
Total Cost =	\$
	TOTAL COST \$
	(enter on Form E-2)

FORM N

OPTIONAL FORM *Do Not submit with Application

ESY WORKSHEET PARENT OR PRIVATE CONTRACT TRANSPORTATION Summer 2022 (SY 2021-2022)

Use the following formulas to calculate transportation costs. If transporting more than one student, the names of all students can be listed on the same line.

Driver's Name:				
Student's Name:				
Miles per Day Number of Days Total Number of	X Miles =			
Rate per Mile	X X	\$	585	
Total Cost	=	\$		
Driver's Name:				
Student's Name:				
Miles per Day Number of Days Total Number of	X Miles =			
Rate per Mile	X	\$	585	
Total Cost	=	\$		
Driver's Name:				
Student's Name:				
Miles per Day Number of Days Total Number of	X Miles =			
Rate per Mile	X	\$.585	
Total Cost	π =	\$		
	Т	OTAL	COST \$	

(enter on Form E-2)

FORM O

OPTIONAL FORM *Do Not submit with Application

ESY WORKSHEET ITINERANT PERSONNEL TRAVEL Summer 2022 (SY 2021-2022)

Use the following formulas as needed to calculate transportation costs. If transporting more than one student, the names of all students can be listed on the same line.

TRAVEL BY ITINERANT PERSONNEL

Name:	<u> </u>	
	Miles per Day X	
	Number of Days	
	Total Number of Miles =	<u> </u>
	Rate per Mile X	\$585
	Total Cost =	\$
Name:		
	Miles per Day X	
	Number of Days	
	Total Number of Miles $=$	
	Rate per Mile X	\$585
	Total Cost =	\$
Name:		
	Miles non Dev. V	
	Miles per Day X Number of Days	
	Total Number of Miles =	
	Rate per Mile X	\$585
	Total Cost	= \$
		+
	TO	FAL COST \$
		(enter on Form E-2)

Form P

<u>OPTIONAL Worksheet</u> *Do Not submit with Application. ESY SALARY WORKSHEET Summer 2022 (SY 2021-2022)

A. PERSONNEL

NAME	POSITION	Projected Total Salary to include Fringe Benefits
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

B. SALARY CALCULATION FOR EACH SERVICE PROVIDER

Compute each salary using the formula for each individual.

PERSONNEL 1.	a) Hourly Rate, Session Rate, or Daily Rate	\$
Rate Formula	b) Total # of Hours, Sessions, or Days	\$
	c) Total Salary [multiply (a) times (b)]	\$
	d)% Social Security times (c) =	\$
	e) % Retirement times (c) =	\$
	f) % Workman's Compensation times (c) =	\$
	g) Total (Add c+d+e+f)	\$

PERSONNEL 2.	a) Hourly Rate, Session Rate, or Daily Rate	\$
Rate Formula	b) Total # of Hours, Sessions, or Days	\$
	c) Total Salary [multiply (a) times (b)]	\$
	d)% Social Security times (c) =	\$
	e)% Retirement times (c) =	\$
	f) % Workman's Compensation times (c) =	\$
	g) Total (Add $c+d+e+f$)	\$

PERSONNEL 3.	a) Hourly Rate, Session Rate, or Daily Rate	\$
Rate Formula	b) Total # of Hours, Sessions, or Days	\$
	c) Total Salary [multiply (a) times (b)]	\$
	d)% Social Security times (c) =	\$
	e) % Retirement times (c) =	\$
	f) % Workman's Compensation times (c) =	\$
	g) Total (Add $c+d+e+f$)	\$

Continued

PERSONNEL 4.	a) Hourly Rate, Session Rate, or Daily Rate	\$
Rate Formula	b) Total # of Hours, Sessions, or Days	\$
	c) Total Salary [multiply (a) times (b)]	\$
	d)% Social Security times (c) =	\$
	e)% Retirement times (c) =	\$
	f) % Workman's Compensation times (c) =	\$
	g) Total (Add $c+d+e+f$)	\$

PERSONNEL 5.	a) Hourly Rate, Session Rate, or Daily Rate	\$
Rate Formula	b) Total # of Hours, Sessions, or Days	\$
	c) Total Salary [multiply (a) times (b)]	\$
	d)% Social Security times (c) =	\$
	e)% Retirement times (c) =	\$
	f) % Workman's Compensation times (c) =	\$
	g) Total (Add $c+d+e+f$)	\$

PERSONNEL 6.	a) Hourly Rate, Session Rate, or Daily Rate	\$
Rate Formula	b) Total # of Hours, Sessions, or Days	\$
	c) Total Salary [multiply (a) times (b)]	\$
	d)% Social Security times (c) =	\$
	e)% Retirement times (c) =	\$
	f) % Workman's Compensation times (c) =	\$
	g) Total (Add $c+d+e+f$)	\$

PERSONNEL 7.	a) Hourly Rate, Session Rate, or Daily Rate	\$
Rate Formula	b) Total # of Hours, Sessions, or Days	\$
	c) Total Salary [multiply (a) times (b)]	\$
	d)% Social Security times (c) =	\$
	e)% Retirement times (c) =	\$
	f) % Workman's Compensation times (c) =	\$
	g) Total (Add $c+d+e+f$)	\$

PERSONNEL 8.	a) Hourly Rate, Session Rate, or Daily Rate	\$
	b) Total # of Hours, Sessions, or Days	\$
	c) Total Salary [multiply (a) times (b)]	\$
	d)% Social Security times (c) =	\$
	e)% Retirement times (c) =	\$
	f) % Workman's Compensation times (c) =	\$
	g) Total (Add $c+d+e+f$)	\$

TOTAL COST \$ _____ (enter on Form D)

State Board Policy 9.2

Chapter 9: Attendance Reporting Rule 9.2 Reporting Attendance for Virtual Learning

Background As a part of Mississippi's response to coronavirus (COVID-19), many local education agencies (LEAs) will utilize one (1) of three (3) options (traditional schedule, hybrid schedule, or virtual schedule), or any combination thereof, beginning with the 2020 - 2021 school year to meet the statutorily mandated 180-day teaching day requirement. *See* Miss. Code Ann. § 37-13-63. This policy contains the requirements for LEAs to report attendance beginning with the 2020 - 2021 school year for traditional, hybrid, and virtual schedules.

School Year Attendance Collection Policy Beginning 2020 - 2021 School Year

Mississippi Code Ann. § 37-13-91 makes education for any child between the age of 6 and 17 compulsory, requires schools to report daily attendance, and requires referrals to other entities when attempts to secure enrollment and/or attendance of a compulsory-school-age child are unable to effect the enrollment and/or attendance.

Existing regulations governing the collection of attendance assume physical presence. Beginning with the 2020 - 2021 school year, attendance shall be collected as follows:

- Schools shall report daily attendance using the following types: traditional (in-person) and virtual (i.e., online/distance learning).¹
 - For in-person attendance, consistent with existing regulations, a student will be marked present or absent.²
 - For virtual (online/distance learning) attendance, the student shall be marked present or absent based on the following:
 - For a student to be marked present when attending school through virtual learning, the LEA shall meet one (1) of the following conditions:
 - If the LEA uses a learning management system (LMS),³ the student shall be authenticated and engaged in education consistent with the LEA's prescribed policy; or If the LEA does not use an LMS, the LEA shall make one-on-one contact with a student for the day to authenticate their presence *and* provide daily evidence of engagement consistent with the LEA's policy.⁴

Types of Traditional, Hybrid, and Virtual Scheduling Based on Restart/Digital Learning Plan/Home Connectivity

1. In-Person Mode (Traditional) a. Hours at school⁵

¹ For attendance reporting purposes, in-person is defined as classes where the student accesses instruction within the physical school building or on the school campus. Virtual learning is defined as the student accesses instruction outside of the physical school building such as online or through distance learning mechanisms.

² See Miss. Code. Ann. §§ 37-13-91 and 37-151-5(j)

³ A learning management system (LMS) is a software application that allows schools to create, manage and deliver instructional content, and that includes collaboration and reporting tools (e.g., Google Classroom, Instructure Canvas and Schoology).

⁴ LEAs shall describe their local board-approved attendance policies and what constitutes authentication and engagement to verify attendance in a virtual learning environment.

⁵ Based on a waiver granted by the State Board of Education on June 11, 2020 for Miss. Code Ann. § 37-13-67 and Process Standard 13.1 of the *Mississippi Public School Accountability Standards, 2019*, LEAs are required to

- b. Reporting
 - i. Report attendance in Local SIS⁶ daily
 - ii. Report attendance to MSIS⁷ monthly
- 2. Mixed Mode (Hybrid)
 - a. Designate in MSIS which days of attendance are counted via which mode (**daily** or **weekly**)
- 3. Synchronous⁸ Online Mode (Digital-Virtual)
 - a. Daily assignment [a minimum of 240 minutes of instruction] completed = hours toward daily attendance
 - b. Attending scheduled daily interactions = hours toward daily attendance
 - c. Reporting
 - i. Daily metadata for accessing software, completing assignments, and participating
 - ii. Report engagement in Local SIS daily [data integration with LMS]
 - iii. Report attendance to MSIS monthly
 - iv. Automated metadata report to MDE via LMS monthly
- 4. Asynchronous⁹ Online Mode (Digital-Virtual)
 - a. Daily assignment [a minimum of 240 minutes of instruction] completed = hours toward daily attendance
 - b. Attending scheduled weekly interactions [one-on-one or in groups] = hours toward daily attendance
 - c. Reporting
 - i. Daily metadata for accessing software, completing assignments, and participating
 - ii. Report engagement in Local SIS daily [data integration with LMS]
 - iii. Report attendance to MSIS monthly
 - iv. Automated metadata report to MDE via LMS monthly
- 5. Asynchronous Offline Mode (Digital-Virtual)
 - a. Daily assignment [a minimum of 240 minutes of instruction] completed = hours toward daily attendance

provide a minimum of 240 instructional minutes per day to students for the 2020 - 2021 school year. Districts are encouraged to schedule in-person instructional days at 330 minutes when possible. However, minutes may be reduced to allow for altered transportation schedules, health screenings, class transitions, modified food service schedules, and other activities to maximize health and safety of staff and students.

⁶ Student Information System

⁷ Mississippi Student Information System

⁸ Synchronous instruction: two-way, real-time/live, virtual instruction between teachers and students when students are not on campus.

⁹ Asynchronous instruction: instruction that does not require having the instructor and student engaged at the same time.

- b. Attending scheduled weekly interactions [one-on-one or in groups] = hours toward daily attendance
- c. Reporting
 - i. Weekly metadata for accessing software, completing assignments, and participating
 - ii. Report engagement in Local SIS weekly [data integration with LMS]
 - iii. Report attendance to MSIS monthly
 - iv. Automated metadata report to MDE via LMS monthly
- 6. Asynchronous Offline Mode (Learning Packets)¹⁰
 - a. Daily assignment [a minimum of 240 minutes of instruction] completed = hours toward daily attendance
 - b. Attending scheduled weekly interactions [one-on-one or in groups] = hours toward daily attendance
 - c. Reporting
 - i. Report attendance in Local SIS¹¹ weekly
 - ii. Report attendance to MSIS¹² monthly

In the LEA's plan required by the MDE for the 2021 – 2022 school year, the LEA shall clearly outline the LEA-defined policies it is using to meet the criteria for reporting students present in a virtual learning environment. Attendance shall be collected daily and reported in accordance with the requirements outlined in Miss. Code Ann. §§ 37-13-91 and 37-151-5(j) and Miss. Admin. Code 7-3: 30.2, State Board of Education Chapter 30, Rule 30.2, and Policy 2.1 of the current edition of the *Mississippi Public School Accountability Standards*.

Based on a waiver granted by the State Board of Education on June 11, 2020 for Miss. Code Ann. § 37-13-67 and Process Standard 13.1 of the *Mississippi Public School Accountability Standards*, 2019, LEAs are required to provide a minimum of 240 instructional minutes per day to students for the 2020 – 2021 school year. The daily instructional minutes need not be consecutive but shall occur within the same day. A program meets the synchronous online method requirements if the minimum daily instructional minutes are met, even if part of the day includes asynchronous activities.

LEAs are required to maintain daily schedules that document the amount of instruction a student or group of students is scheduled to receive on a given day. The schedule shall detail the amount and type of instruction being provided that the LEA has approved for the purpose of recording attendance in accordance with Miss. Code Ann. §§ 37-13-91 and 37-151-5(j).

Dual Enrollment - When dually enrolled, the student may be counted, for adequate education program funding purposes, in the average daily attendance of the public school district in which the student attends high school. (*See* Miss. Code Ann. § 37-15-38(7)) Therefore, during dual credit class periods on days when the college schedule does not align with the LEAs schedule, students should not be counted as absent.

¹⁰ Asynchronous Offline Mode is typically used for students who do not have access to content via an electronic device and who are present for class off-site, completing assignments via pencil and paper.

¹¹ Student Information System

¹² Mississippi Student Information System

Absences shall be entered as either excused or unexcused consistent with definitions defined in Miss. Code Ann. § 37-13-91 and Miss. Admin. Code 7-3: 30.2, State Board Policy Chapter 30, Rule 30.2. Unexcused absences will result in the same reporting of truancy referrals.

Source: Miss. Code Ann. §§ 37-1-3, 37-13-91, and 37-151-5(j). (Adopted 8/2020)

Frequently Asked Questions Regarding State Board Policy 9.2 can be found at <u>https://www.mdek12.org/OA/Accred/SBP9.2QandA</u>.

Approved Educable Child Facilities

DISTRICT	NAME/TITLE	EMAIL ADDRESS	ADDRESS	PHONE	FAX
Brentwood- Crossroads	Leslie Lee, Principal	leslie.lee@uhsinc.com	3531 Lakeland Drive Flowood, MS 39232	601-936-2024	601-936-7863
CARES, School	Charles Lacy, Principal	charles.lacy@my canopy.org	402 Wesley Avenue Jackson, MS 39202	601-360-0583	601-709-5527
CARES, School- Hattiesburg	Dr. Robin Davis, Principal	robin.davis@mycanopy.org	6752 US Hwy 98 Hattiesburg, MS 39402	601-264-0200	601-264-7733
Crossroads- Meridian	Rae Andreacchio, Director	rae.andreacchio@uhsinc.com	5000 Hwy 39 North Meridian, MS 39301	601-483-6211	601-483-5452
Diamond Grove Center	Lisa Thompson, Principal	Lisa.Thompson@uhsinc.com	2311 Hwy 15 South Louisville, MS 39339	662-779-0119	662-779-0151
Gulf Oaks Therapeutic Day School	Jim Baldree, Principal	james.baldree@hma.com	180-C DeBuys Rd. Biloxi, MS 39531	228-388-0679	228-388-0657
Magnolia Speech	Valerie Linn, Principal Beverly Cunningham	valerie.linn@magnoliaspeechschool.org beverly.cunningham@magnoliaspeechschool.org	733 Flag Chapel Rd. Jackson, MS 39209	601-922-5530	601-922-5534
Memphis Oral School for the Deaf	Shelly Crais, Principal	scrais@mosdkids.org	7901 Poplar Ave. Germantown, TN 38138	901-758-2228	901-531-6735
Millcreek- Batesville	Barry Goolsby, Principal Ed Hood, CEO	<u>barry.goolsby@millcreekofpontotoc.com</u> ed.hood@acadiahealthcare.com	171 Buckhorn Rd. Batesville, MS 38620	662-563-1442 662-488-8878	662-563-1445 662-488-8767
Millcreek-Golden Triangle	David Poss, Principal Ed Hood, CEO	david.poss@millcreekofpontotoc.com ed.hood@acadiahealthcare.com	1380 Motley Rd Columbus, MS 39701	662-657-1090	662-657-1093
Millcreek- Greenville	Brenda Henderson, Principal Ed Hood, CEO	brenda.henderson@millcreekofpontotoc.com ed.hood@millcreekofpontotoc.com	1656 Union Street Greenville, MS 38701	662-332-5360 662-488-8878	662-332-5363 662-488-8767

Millcreek- Kosciusko	Roger Hill, Principal	roger.hill@millcreekofpontotoc.com	162 Aponaug Road Kosciusko, MS 39090	662-289-7902	662-289-7905
Millcreek-Magee	John Buchanan, Principal	John.Buchanan@millcreekofmagee.com	P. O. Box 1160 Magee, MS 39111	601-849-4221	601-849-6962
Millcreek- Meadville	Letha Presley, Principal	letha.presley@millcreekofmagee.com	P. O. Box 864 Meadville, MS 39653	601-384-3884	601-384-3886
Millcreek-Newton	Butch Newman, Principal	Butch.newman@millcreekofmagee	800 Decatur Street Newton, MS 39345	601-683-7208	601-683-7438
Millcreek-Pearl	Roy Balentine, Principal	Roy.Balentine@millcreekofmagee	P. O. Box 2338 Clinton, MS 39060	601-326-7762	601-326-7765
Millcreek-Pontotoc	Vince Jordan, Principal Ed Hood, CEO	vince.jordan@millcreekofpontotoc.com Ed.Hood@acadianhealthcare.com	P. O. Box 619 Pontotoc, MS 38863	662-488-8878	662-488-8767
Nativity B.V.M. Elementary School	Traci Kessler, Principal	http://www.nativitybvm.org/	1046 Beach Blvd. Biloxi, MS 39530	228-432-2269	228-432-9421
Our Lady of Lourdes	Christie Jonley	cjonley@stjoeirish.org	1501 VFW Rd. Greenville, MS 38701	662-334-3287	662-332-9877
Park Academy	Jillene Poole, Principal	jillene.poole@uhsinc.com	8135 Goodman Road Olive Branch, MS 38654	662-893-7104	662-893-7078
St. Joseph- Greenville	Craig Mandolini, Principal	cmandolini@stjoeirish.org	1501 VFW Rd. Greenville, MS 38701	662-378-9711	662-378-3496
St. Richard School	Jennifer David, Principal	jdavid@strichardschool.org	100 Holly Dr. Jackson, MS 39206	601-366-1157	601-366-4344
Youth Villages	Lydia Nicks, DBA Contract Dept	Lydia.nick@youthvillagers.org	3320 Brother Blvd Bartlett, TN 38133	731-288-4609	731-288-4652