

Sherlock, Connex or Follow-up Survey Action Plan

Organization Name: _____ **Assessment (Sherlock, Connex, or FuS):** _____


Programs or Subdivisions Using: _____

Considerations	Determination		
Who will serve as the assessment manager and who will have access to assessment system as administrators and users? See role definition below:	Assessment Manager:	Assessment Administrators:	Assessment Data Users:
<div>Assessment Manager</div> <div>Assessment Administrators</div> <div>Assessment Data Users</div>	<div>Overall responsibility for the assessment and designation of administrators</div> <div>Full privileges in assessment system (manage users, registration groups, survey items, respondent data)</div> <div>View assessment data and create reports</div>		
What grade levels will be assessed? Which assessment form(s) will be used?			
Group administration? Who will administer the assessment?			
Where will assessment take place? Reservation of equipment or facilities needed?	Where:	Reservation:	
When will assessment take place?	Pre-assessment	Post-assessment	
Describe assessment frequency (schedule).			
Describe the exit assessment of high school seniors and students graduating early.	<div>It is essential to capture data from respondents in the final year of high school late in the school year.</div> <div>Describe your organization's plan for collecting these data.</div>		

How will respondents access the assessment?	<input type="checkbox"/> desktop shortcut that automatically selects form and inserts authorization code <input type="checkbox"/> school/program website hyperlink that automatically selects form and inserts authorization code <input type="checkbox"/> through Assessment Menu in CIS – students select form and enter authorization code <input type="checkbox"/> via hyperlink contained in email message <input type="checkbox"/> other:
Describe plans to inform administrators, teachers, and support staff about the assessment. Who creates the information?	
Describe plans to inform respondents and parents/guardians prior to the assessment administration. Who creates the information?	
Identify groups or interventions that will utilize assessment on a pre-post basis (optional).	
List any registration group subdivisions ¹ (optional).	
Describe any form customization plans. Who will be in charge of creating the custom form? (optional)	
Describe any plans for evaluation and whether you authorize data release to your evaluator.	<p>Evaluation plans:</p> <p>Name of evaluator _____ Permission to release data <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>Email address of evaluator _____</p>

¹ Registration groups are major subdivisions that are associated with all respondents. Examples include block assignments, career pathways, and curriculum options. Registration groups appear at the top of the About You page (the first page on which students enter data) and are forced-choice options. Do not use registration groups for data fields that are already part of the assessment, such as grade level. Registration groups allow reports to be run for students who indicate membership in a specific registration group.

In the area below, place a check mark next to the intended uses of the assessment data. For each intended use, identify when data is needed, who needs the data, and specific assessment reports that would be appropriate to the intended use.

	Intended Use(s)	When Data Needed	Who Needs Data	Relevant Reports
	1. Identify individuals in need of services			
	2. Support work with parents/guardians in assisting their children			
	3. Use in improvement planning process			
	4. Identify guidance, counseling, and advising programming needs and issues			
	5. Use in dropout prevention programming			
	6. Improve college readiness			
	7. Improve career readiness			
	8. Identify policies and practices that better meet student needs			
	9. Collect background data for accreditation or licensure			
	10. Use in evaluation process			
	11.			
	12.			
	13.			

	14.			
	15.			
	16.			

Assessment Manager Approval: _____
Signature

Date: _____

Authorizing Official Approval: _____
Signature

Date: _____