Port Orford-Langlois School District

Code: IGBHA-AR(2)
Adopted:

Evaluation of Alternative Education Programs - District Summary

(for district use only)

The district's alternative education program evaluator should complete the following and file with materials submitted by the alternative education program coordinator.

Program Name _____ Date _____

Program Coordinator _____

Staff

1. ☐ Meets criteria ☐ Does not meet criteria

   Comments: _____

   _____

Curriculum

1. ☐ Meets criteria ☐ Does not meet criteria

   Comments: _____

   _____

2. ☐ Meets criteria ☐ Does not meet criteria

   Comments: _____

   _____

3. ☐ Meets criteria ☐ Does not meet criteria

   Comments: _____

   _____

4. ☐ Meets criteria ☐ Does not meet criteria

   Comments: _____

   _____

Discrimination

1. ☐ Meets criteria ☐ Does not meet criteria

Comments: _____

_____

Registration (Private alternative education programs only)

1. ☐ Meets criteria ☐ Does not meet criteria

Comments: _____

_____

Site Evaluation

1. ☐ Meets criteria ☐ Does not meet criteria

Comments: _____

_____

Tuition and Fees

1. ☐ Meets criteria ☐ Does not meet criteria

Comments: _____

_____

Contract

1. ☐ Meets criteria ☐ Does not meet criteria

Comments: _____

_____

2. ☐ Meets criteria ☐ Does not meet criteria

Comments: _____

_____

Expenditures

1. ☐ Meets criteria ☐ Does not meet criteria

Comments: _____

_____

Advertising

1. ☐ Meets criteria ☐ Does not meet criteria

Comments: _____

_____

_____

District Evaluator's Signature Date