



Master Calendar of Reporting Requirements

2020-21

Education One, L.L.C.
One University Avenue
Angola, Indiana 46703
Telephone: 260-665-4600

Overview

The following calendar includes deadlines for submitting key information to Education One, L.L.C during the 2020-21 school year. The requirements outlined in this calendar are not all-inclusive and are subject to change. The Education One Strategic Engagement Coordinator & Compliance Officer will attempt to notify all schools of changes to this calendar and/or reporting requirements and will give schools a reasonable period of time to meet any altered deadlines. Required reports are listed based on the month they are due. Required reports are listed based on the month they are due. Please complete all school specific information highlighted in yellow on Forms A-E.

All reporting requirements are to be sent electronically as one (1) PDF by the 15th of each month to monthlyreporting@education1.org. Should the 15th fall on a weekend or observed holiday, the report will be due the following business day.

July 2020

Please indicate in writing any items that are not applicable.

| | |
|--|---|
| | Reporting Template – Form C (Quarter 4) |
| | Reporting Template – Form D (2019-20 year) |
| | School calendar for 2020-21 school year |
| | Assessment calendar for 2020-21 school year |
| | Professional development calendar for 2020-21 school year |
| | Updated roster for Board of Directors, including resumes and verification of background checks for new members. |
| | Schedule of Board Meetings for 2020-21 school year |
| | Projected vs. actual enrollment by grade level and whole school for 2020-21 school year |
| | Board-approved letter of engagement from accounting firm performing accrual based audit |

August 2020

Please indicate in writing any items that are not applicable.

| | |
|--|---|
| | Reporting Template – Form A |
| | Reporting Template – Form B |
| | Electronic copy of Biannual Financial Statement (Form 9) submitted to the IDOE |
| | Board approved 2020-21 budget |
| | Organizational chart for 2020-21 school year (including all levels of school personnel) |
| | Quarterly financial statement for 6/30/20 |

September 2020

Please indicate in writing any items that are not applicable.

| | |
|--|--|
| | Reporting Template – Form B |
| | Reporting Template – Form E |
| | Copy of IDOE School Improvement Plan (if applicable) |
| | Excel version of DOE-ME Report (Count Day Information), including STN and Grade Level |
| | Excel version of DOE-SR Report, including STN, Street Address, City, Zip Code, and Grade Level |
| | Board Approved Minutes – May, June, July meetings |
| | School Safety Plan |

October 2020

Please indicate in writing any items that are not applicable.

| | |
|--|---|
| | Reporting Template – Form B |
| | Reporting Template – Form C (Quarter 1) |
| | ISTEP+ (10) winter retest schedules for all applicable teachers/grade levels, if applicable |
| | Any updated data related to school-specific educational goals or IDOE School Improvement Plan |

November 2020

Please indicate in writing any items that are not applicable.

| | |
|--|---|
| | Reporting Template – Form B |
| | Reporting Template – Form E |
| | Quarterly financial statement for 9/30/20 |
| | Any updated data related to school-specific educational goals or IDOE School Improvement Plan |

December 2020

Please indicate in writing any items that are not applicable.

| | |
|--|---|
| | Reporting Template – Form A |
| | Reporting Template – Form B |
| | Board Approved Minutes – August, September, October meetings |
| | Copy of School Leader Performance Evaluation |
| | ISTEP+ (10) spring retest schedules for all applicable teachers/grade levels, if applicable |
| | Any updated data related to school-specific educational goals or IDOE School Improvement Plan |

January 2021

Please indicate in writing any items that are not applicable.

| | |
|--|---|
| | Reporting Template – Form B |
| | Reporting Template – Form C (Quarter 2) |
| | Copy of completed audit from the previous fiscal year |
| | Any updated data related to school-specific educational goals or IDOE School Improvement Plan |

February 2021

Please indicate in writing any items that are not applicable.

| | |
|--|---|
| | Reporting Template – Form B |
| | Reporting Template – Form E |
| | Excel version of DOE-ME Report (Count Day Information), including STN and Grade Level |
| | Quarterly financial statement for 12/31/20 |

March 2021

Please indicate in writing any items that are not applicable.

| | |
|--|---|
| | Reporting Template – Form B |
| | Board Approved Minutes – November, December, and January meetings |
| | Written documentation of recruitment strategies, application procedures, and lottery and/or wait list processes for the 2020-21 school year (include lottery date and location if applicable) |
| | I AM, ILEARN (3-8), and ECA testing schedules for all applicable teachers/grade levels |
| | Electronic copy of DOE-SE Special Education Report submitted to the IDOE |
| | Copy of Annual Performance Report submitted to the IDOE |
| | Evidence that the Annual Performance Report is posted on the school's website |
| | Any updated data related to school-specific educational goals or IDOE School Improvement Plan |

April 2021

Please indicate in writing any items that are not applicable.

| | |
|--|---|
| | Reporting Template – Form A |
| | Reporting Template – Form B |
| | Reporting Template – Form C (Quarter 3) |
| | Any updated data related to school-specific educational goals or IDOE School Improvement Plan |

May 2021

Please indicate in writing any items that are not applicable.

| | |
|--|---|
| | Reporting Template – Form B |
| | Reporting Template – Form E |
| | Quarterly financial statement for 3/31/21 |
| | Projected budget for upcoming fiscal year, beginning July 1, including number of enrolled students upon which the budget is based |

Annual Review Data

Submit by June 1, 2021

Please refer to communication regarding due dates and data input information.

| | |
|--|-----------------------------------|
| | Attendance Rates |
| | Benchmark Legacy Proficiency Data |
| | Benchmark Value Added Data |
| | School Satisfaction Survey Data |

June 2021

Please indicate in writing any items that are not applicable.

| | |
|--|--|
| | Reporting Template – Form B |
| | Board Approved Minutes – February, March, April meetings |
| | Copy of School Leader Performance Evaluation |



Reporting Templates

SCHOOL NAME - MONTH

Reporting Form A: Staffing Report

Please indicate in writing any items that are not applicable.
All information should be current.

Resignation/Termination

| Employee Name | Position | Resignation | Termination | Reason |
|---------------|----------|-------------|-------------|--------|
| | | | | |

New Hire

| Employee Name | License Number | License Expiration Date | Verification of Background Check | Position |
|---------------|----------------|-------------------------|----------------------------------|----------|
| | | | | |

All Employees

| Employee Name | License Number | License Expiration Date | Verification of Background Check | Position |
|---------------|----------------|-------------------------|----------------------------------|----------|
| | | | | |

SCHOOL NAME - MONTH

Reporting Form B: Enrollment and Leadership Report

Please indicate in writing any items that are not applicable.
All information should be current.

Expulsions

| STN | Student Name | Grade Level | Reason for Expulsion |
|-----|--------------|-------------|----------------------|
| | | | |

Total Number of Expulsions this Month: _____ Total Number of Expulsions to Date: _____

Enrollment

Indicate number of students enrolled in each grade level.

| | |
|---|--|
| K | |
| 1 | |
| 2 | |
| 3 | |
| 4 | |
| 5 | |
| 6 | |

| | |
|---------|--|
| 7 | |
| 8 | |
| 9 | |
| 10 | |
| 11 | |
| 12 | |
| Overall | |

Board Governance

Indicate any individuals leaving or joining the Board.

| Name | Phone | Leaving | Joining | Address |
|------|-------|---------|---------|---------|
| | | | | |

Administrative Changes

Indicate any individuals resigning from or newly hired to hold a leadership position in the operation of the school.

| Name | Phone | Resignation | New Hire | Effective Date |
|------|-------|-------------|----------|----------------|
| | | | | |

SCHOOL NAME - MONTH

Reporting Form C

Please adjust all highlighted items and complete the form as necessary.
This form should be signed and submitted as a PDF.

Attn: Lindsay Omlor
Managing Director
Education One, L.L.C.
One University Avenue
Angola, IN 46703

| | |
|----------------------|--|
| Current Date: | Reporting Quarter (previous quarter): |
|----------------------|--|

| | |
|---------------------|-----------------|
| School Name: | Address: |
|---------------------|-----------------|

I hereby certify that **SCHOOL NAME** has operated the Charter School in compliance with the Charter Agreement and applicable law, during the previous quarter.

NAME
Board Chair
SCHOOL NAME

NAME
Principal
SCHOOL NAME

SCHOOL NAME – MONTH

Reporting Form D

Please indicate in writing any items that are not applicable.
All information should be current.

ECA 2019-20

| | <i>Insert Test Name</i> | <i>Insert Test Name</i> | <i>Insert Test Name</i> |
|----------------------|--------------------------------|--------------------------------|--------------------------------|
| Winter | (# passed)/(# took assessment) | (# passed)/(# took assessment) | (# passed)/(# took assessment) |
| Spring | (# passed)/(# took assessment) | (# passed)/(# took assessment) | (# passed)/(# took assessment) |
| Summer | (# passed)/(# took assessment) | (# passed)/(# took assessment) | (# passed)/(# took assessment) |
| Total Passing | (# passed)/(# took assessment) | (# passed)/(# took assessment) | (# passed)/(# took assessment) |

**Please do not double count the amount of students in the total passing percentage.

WIDA 2019-20

| | Students Tested | Average Proficiency Level | Highest Average Domain | Lowest Average Domain | # of Students Meeting Growth Target | # of Students Attaining EL Proficiency |
|---------------|-----------------|---------------------------|------------------------|-----------------------|-------------------------------------|--|
| K | | | | | | |
| 1 | | | | | | |
| 2 | | | | | | |
| 3 | | | | | | |
| 4 | | | | | | |
| 5 | | | | | | |
| 6 | | | | | | |
| 7 | | | | | | |
| 8 | | | | | | |
| 9 | | | | | | |
| 10 | | | | | | |
| 11 | | | | | | |
| 12 | | | | | | |
| School | | | | | | |

IREAD-3 2020

| | Spring 2020 | Summer 2020 (Include Spring Numbers) |
|---|-------------|---|
| Number of Students Tested | | |
| Number of Good Cause Exemptions | | |
| Number of Students Passing without Good Cause Exemptions | | |
| Number of Students Passing with Good Cause Exemptions | | |
| Overall Passing Percentage | | |

SCHOOL NAME – MONTH

Reporting Form E: Student Discipline Report

Please indicate in writing any items that are not applicable.
All information should be current.

Ethnicity

Identify the enrollment percentages. Calculate the percentage of office referrals, suspensions, and expulsions within each category identified.

| | Enrollment | Office Referrals | Suspensions | Expulsions |
|---------------------------------------|------------|------------------|-------------|------------|
| <i>Insert Ethnicity Category Here</i> | | | | |
| <i>Insert Ethnicity Category Here</i> | | | | |
| <i>Insert Ethnicity Category Here</i> | | | | |
| <i>Insert Ethnicity Category Here</i> | | | | |
| Total | | | | |

Gender

Identify the enrollment percentages. Calculate the percentage of office referrals, suspensions, and expulsions within each category identified.

| | Enrollment | Office Referrals | Suspensions | Expulsions |
|---------------|------------|------------------|-------------|------------|
| Male | | | | |
| Female | | | | |
| Other | | | | |
| Total | | | | |

Socioeconomic Status

Identify the enrollment percentages. Calculate the percentage of office referrals, suspensions, and expulsions within each category identified.

| | Enrollment | Office Referrals | Suspensions | Expulsions |
|---------------------------|------------|------------------|-------------|------------|
| Free/Reduced Lunch | | | | |
| Paid Lunch | | | | |
| Total | | | | |

Special Education

Identify the enrollment percentages. Calculate the percentage of office referrals, suspensions, and expulsions within each category identified.

| | Enrollment | Office Referrals | Suspensions | Expulsions |
|--------------------------|------------|------------------|-------------|------------|
| General Education | | | | |
| Special Education | | | | |
| Total | | | | |

English Language Learners

Identify the enrollment percentages. Calculate the percentage of office referrals, suspensions, and expulsions within each category identified.

| | Enrollment | Office Referrals | Suspensions | Expulsions |
|--------------------------------------|------------|------------------|-------------|------------|
| Non English Language Learners | | | | |
| English Language Learners | | | | |
| Total | | | | |