NGS QUALITY CONTROL CHECKLIST
2017-2018 School Year

Name: _____   Date of Review: _____

District: _____   Campus: _____   SIS: _____

1. NGS State Training (MEP Compliance Indicator)

Was the NGS training for current school year completed by **October 1**?   **Yes** ____ **No** ____

If yes, enter date of NGS training: ☐08/23/17 Brownsville ☐09/14/17   ☐09/28/17 ☐Other: _____

If no, please explain: _____

Additional trainings attended: ☐ ESC NGS Overview Training   ☐ ESC Follow-Up Training 01/31/18
☐ ESC End of Year Training 05/04/18   ☐ ESC Summer 06/07/18   ☐ NGS Hands-On Training 10//26-27/17

2. Proper Search

Talk about the different ways to do a complete and thorough search. Why is it important to conduct a thorough search?

☐ NGS #   ☐ Mother's Name   ☐ Alternate Student ID #   ☐ MSIX #   ☐ Last Name, First Name, DOB
☐ Family ID #   Response: _____

3. NGS Reports

- Do you have an email address?   **Yes** ____ **No** ____
- Do you know how to generate a report?   **Yes** ____ **No** ____
- Are you familiar with each report and the usage of it?   **Yes** ____ **No** ____
- Do you know how to format a report?   **Yes** ____ **No** ____
- Do you have recent reports on file to support documentation?   **Yes** ____ **No** ____

Observations:
☐ Additional technical assistance or training needed on how to use reports.

Recommendations: _____

4. New COEs

- Are these received within 5 and/or 7 working days of parent signature date?   **Yes** ____ **No** ____

- Are the COEs complete?   **Yes** ____ **No** ____
  ☐Boxes not checked   ☐RV incomplete   ☐Not using most updated copy of COE/SDF

- Are the COEs being processed within 5 working days after receipt from the reviewer? **Yes** ____ **No** ____
  ☐There is more than 5 days between reviewer signature date and NGS data entry.

  ☐SDF lacking comment regarding time lapse.

- Do you know how to use the "Multiple Enrollment" process? (This process must only be used when there is no new QAD.)
  ☐District does not use.   **Yes** ____ **No** ____

- Do you know how and when to use the "New Family Enrollment," "Family Enrollment" and "New Student" processes?   ☐Provided on-site training/technical assistance.   **Yes** ____ **No** ____

- Are the COEs date stamped and marked "Received" and "Processed?"   **Yes** ____ **No** ____

Observations:
☐ Additional technical assistance or training needed on how to conduct enrollments.
☐ Stamping must not cover any COE information.   ☐ No local district information on COE (i.e., local IDs, "new", etc.)
☐ NGS clerk did not return COE to reviewer/recruiter when incomplete.

Recommendations: _____

5. Residency Verification

- Are you entering the residency verification dates within 5 working days after receipt? **Yes** ____ **No** ____

- Do you know how to use the "Multiple Residency Verification" process?   **Yes** ____ **No** ____

- Is this data date stamped and marked "Received" and "Processed?"   **Yes** ____ **No** ____

Observations:
District uses: ☐ NGS Clerk uses School records.   ☐ NGS Clerk uses the COE.   ☐ NGS Clerk uses Other Document.
☐ There are no school records (data source) for data entry. ☐ Data source does not have a print date.
☐ Section H and NGS do not match.   ☐ Stamping for RV is not evident on data source (local district report).
☐ Stamping for RV is not evident on COE.   ☐ Stamping for RV is not evident on SDF for P2 turning P3.

Recommendations: _____

6. Alternate Student ID Numbers K-12 with "R" enrollment only (MEP Compliance Indicator)

- Are the PEIMS numbers and the Student Unique ID being entered on the system?   **Yes** ____ **No** ____
  ☐NGS Alt ID Report for October was not requested using **BOTH**.   ☐Local Alt ID District Report was not requested.
  Note: NGS Clerk must verify that NGS matches with district Alt ID Report.

- Are you requesting the Alternate Student ID Number Report by **February 1**?   **Yes** ____ **No** ____
  ☐NGS Alt ID Report for February was not requested using **BOTH**.   ☐Local Alt ID District Report was not requested.
  Note: NGS Clerk must verify that NGS matches with district Alt ID Report.

- Are all student records without a PEIMS number and Student Unique ID **OR** with incorrect numbers being updated by the last working day in February?   **Yes** ____ **No** ____
  ☐If applicable, Local District Report was not requested.

- Do you know how to delete and update incorrect PEIMS/Student UID Numbers?   **Yes** ____ **No** ____

- Is this data date stamped and marked "Received" and "Processed?"   **Yes** ____ **No** ____

Observations:
☐ Alternate Student IDs were not requested. Personnel must use school records/hard copy/printout.
☐ Alternate Student IDs were not received.
☐ Data source (local district report) was not stamped received.
☐ Data source (local district report) was not stamped processed.
☐ Monthly NGS Alternate ID Report was not requested using Students W/O

Recommendations: _____

7. Early Withdrawals

- Are these submitted within 2 working days after early withdrawal? **Yes** ____ **No** ____

- Are these processed within 1 working day after receipt of early withdrawal data? **Yes** ____ **No** ____

- Is the early withdrawal data date stamped and marked "Received" and "Processed?" **Yes** ____ **No** ____
  ☐Early WD/Transfer Form or local district form was not requested.

- Is all required data being encoded on NGS? **Yes** ____ **No** ____
  (e.g., partial/full grades, immunizations, state assessments, recommended courses etc.)
  ☐NGS Transfer Document was not requested.   ☐District Withdrawal/Transfer Form was not requested.

- Is data date stamped and marked "Received" and "Processed?" **Yes** ____ **No** ____

Observations:
☐ Early WD process not in place at district level   ☐ NGS Clerk did not enter withdrawal date
☐ NGS Clerk did not enter other WD data (i.e., grades, immunizations, assessments for students who transfer out of district)
☐ Data source was not stamped received.   ☐ Data source was not stamped processed

Recommendations: _____

8. Transfer Document

- Do you know how to request a transfer document? **Yes** ____ **No** ____
- Do you know how to request multiple transfer documents? **Yes** ____ **No** ____

Observations:
☐Additional technical assistance needed on how to request multiple transfer documents.

Recommendations: _____

9. Graduation Plans (For all migrant students in grades 9-12.) (MEP Compliance Indicator)

- Are these submitted by October 1 or 10 working days after initial enrollment? **Yes** ___ **No** ___
  ☐NGS Student Graduation Plan and Year Report for October was not requested using **BOTH**.
  ☐Updated Graduation Plan and Year Report or Graduation Plan list not received.
  Note: NGS Clerk must verify that NGS matches with district Graduation Plan List.
- Are these processed within 5 working days after receipt? **Yes** ____ **No** ___

- Is the graduation plan data date stamped and marked "Received" and "Processed?" **Yes** ____ **No** ___

- Do you know how to delete and update a graduation plan? **Yes** ____ **No** ___

Observations:
☐ Graduation Plan Information was not requested.   ☐ Graduation Plan Information was not received.
☐ Data source was not stamped received.   ☐ Data source was not stamped processed.
☐ Data source lacks signature and date by district designee (i.e., counselor, strategist, etc.).
☐ Lacking monthly NGS Student Graduation Plan and Year Reports using students without.

Recommendations: _____

10. Limited English Proficient (LEP)

- Are you receiving LEP information by the last working day of October or 5 working days after initial enrollment?   If no, _____.   **Yes** ____ **No** ____

- Are you entering LEP information within 5 working days after receipt?   **Yes** ____ **No** ____

- Is the LEP information date stamped and marked "Received" and "Processed?"   **Yes** ____ **No** ____

Observations:
☐ LEP Data not requested.   ☐ LEP Data not received.
☐ Monthly NGS LEP Reports were not requested and printed.
☐ If applicable, district LEP data was not requested to update NGS.
☐ Data source was not stamped received.   ☐ Data source was not stamped processed.
Note: District LEP Report and NGS LEP Count Report must match.

Recommendations: _____

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11. Missing Credits and Withdrawal Grades Consolidation

- Is the information being submitted within 5 working days after enrollment, receipt of updated records, or completed partial work in designated school of graduation?   **Yes** ____ **No** ____

- Did you request the Partial Credit Report by January 15?   **Yes** ____ **No** ____

- Is this report given to the high school counselor or person in charge of grades?   **Yes** ____ **No** ____

- Did you get back the Partial Credit Report with the updates?   **Yes** ____ **No** ____

- Are these report and/or updates being processed within 5 working days of receipt or by January 31?   **Yes** ____ **No** ____

- Do you know how to delete partial grades?   **Yes** ____ **No** ____

- Is data date stamped and marked "Received" and "Processed?"   **Yes** ____ **No** ____

Observations:
☐ NGS Clerk did not receive updated Partial Credit Report or NGS Course History from counselor or strategist.
☐ Partial Credit Report was not requested and printed in December
☐ Partial Credit Report or NGS Course History is lacking signature of district designee (i.e., counselor, strategist, etc.)
☐ Data source was not stamped received.   ☐ Data source was not stamped processed

Recommendations: _____

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12. Secondary Credit
Fall Semester Grades

- Are the fall grades submitted within 5 working days after end of fall semester?   **Yes** ____ **No** ____
  End of Semester Date_____   Date data received_____

- Did you process fall grades by the last working day in February?   **Yes** ____ **No** ____

- Are the fall semester grades date stamped and marked "Received" and "Processed?" **Yes** ____ **No** ____

Spring Semester Grades
Are the spring grades submitted within 5 working days after the <u>end of the spring semester</u>? **Yes** ____ **No** ____

    End of Year Date_____   Date data received_____

- Are these processed within 10 working days after receipt? **Yes** ____ **No** ____

- Are the spring semester grades date stamped and marked "Received" and "Processed?" **Yes** ____ **No** ____

- Do you know how to delete and update grades information? **Yes** ___ **No** ____

Observations:
☐ Transcripts were not requested.   ☐ Transcripts were not received
☐ Transcript was not stamped received.   ☐ Transcript was not stamped processed.
☐ Need to request comprehensive secondary credit report students without credits. ☐ Unique Count not requested by SSID.

Recommendations: _____
_____

13. Facility Updates (if applicable, submit to ESC1)
- Does each facility/SSID have the correct information?   **Yes** ____ **No** ____
  (e.g., address, county/district number, etc.)

- Did you update all facilities with enrollments within 5 working days after receipt? **Yes** ____ **No** ____

- Is data date stamped and marked "Received" and "Processed?" **Yes** ____ **No** ____

Observations:
☐ Facility Data Report was not requested.   ☐ Facility Data was not submitted to Region One for updating.
☐ Facility Data source does not have signature and date of district designee.
☐ NGS Clerk did not request Facility Data Report after Region One made updates.

Recommendations: _____

14. Contact Information
- Does each facility (SSID) have **Migrant** and **Summer Migrant** contact information? **Yes** ____ **No** ____
- Have you checked all Contact IDs to be sure that the information is correct? **Yes** ____ **No** ____
  (e.g., contact name, phone number, etc.)
- Is data date stamped and marked "Received" and "Processed?" **Yes** ____ **No** ____

Observations:
☐ Contact data source does not have signature and date of district designee.
☐ Contact Report "ALL TYPES" was not requested   ☐ NGS Clerk did not request Contact Report after updates were made.
☐ Contact Data was not updated on NGS.   ☐ NGS Clerk updated contacts without a data source.
☐ NGS Clerk did not request Unassigned Contacts reports.   ☐ Facility List is not evident.
☐ Data source was not stamped received.   ☐ Data source was not stamped processed.

Recommendations: _____

15a. Medical Alert Data

Date Medical Alert Data received_____

- Is data submitted by March 1?
  Yes ____ No ____

- Is data processed by April 15?
  Yes ____ No ____

- Is data received regarding any medications?
  Yes ____ No ____

- Do you know how to enter and view medications?
  Yes ____ No ____

- Do you know how to delete and update medical alerts and medications?
  Yes ____ No ____

- Is data date stamped and marked "Received" and "Processed?"
  Yes ____ No ____

Observations:
□ Medical Alert Data was not requested.   □ Medical Alert Data was not received.
□ Medical Alerts Reports need to be requested separately (Condition, Related Condition, Allergy)
□ Data source was not stamped received.   □ Data source was not stamped processed.

Recommendations: _____

15b. Immunization Data

Date Immunization Data received_____

- Is data submitted by March 1?
  Yes ____ No ____

- Is data processed by April 15?
  Yes ____ No ____

- Do you know how to delete and update immunizations?
  Yes ____ No ____

- Is data date stamped and marked "Received" and "Processed?"
  Yes ____ No ____

Observations:
□ Immunization Data was not requested.   □ Immunization Data was not received
□ Data source was not stamped received.   □ Data source was not stamped processed.

Recommendations: _____

15c. Health Data (Optional)

Date Health Data received_____

- Is data submitted by March 1?
  Yes ____ No ____

- Is data processed by April 15?
  Yes ____ No ____

- Do you know how to delete and update health?
  Yes ____ No ____

- Is data date stamped and marked "Received" and "Processed?"
  Yes ____ No ____

Observations:
□ Health Data was not requested.   □Health Data was not received.
□ Health Data reports were not requested separately. (Vision, Scoliosis, Hearing)
□ Data source was not stamped received.   □ Data source was not stamped processed.

Recommendations: _____

16. Special Needs (HSE, Gifted and Talented, HEP or Special Education)
- Do you know how to add, update or delete a special need to a child's record? Yes ____ No ____
- Do you know about the **IEP On File** checkbox and who will provide this data? Yes ____ No ____
- Is data date stamped and marked "Received" and "Processed?" Yes ____ No ____

Observations:
☐ Special Needs Reports need to be requested individually and not together (HSE only, GT only, etc.) from NGS.
☐ District does not have documentation of IEP on file. ☐ IEP documentation does not have designee signature and date.
☐ Data (HSE/GT/HEP/SPED) was not requested. ☐ Data (HSE/GT/HEP/SPED) was not received.
☐ Data source was not stamped received. ☐ Data source was not stamped processed.

Recommendations: _____
_____

17a. End of Year Withdrawals

- Did you receive end of year withdrawal data within 5 working days after end of school year?
  End of Year Date_____ Date Data received_____ **Yes ____ No ____**

- Was data processed within 5 working days after receipt? **Yes ____ No ____**

- Are you using the Multiple Withdrawal process? **Yes ____ No ____**

- Is the end of year withdrawal data date stamped and marked "Received" and "Processed?"
  Yes ____ No ____

Observations:
☐ No copy of data source (school record of attendance) for last day of school. ☐ No copy of district calendar available.
☐ Data source was not stamped received. ☐ Data source was not stamped processed.
☐ Multiple WD Worksheet was not requested and printed after withdrawals were conducted.

Recommendations: _____
_____

17b. At Risk of Non-Promotion Indicator
- Did you receive the At Risk of Non-Promotion data within 5 working days after end of school year?
  End of Year Date_____ Date Data received_____ **Yes ____ No ____**

- Is the At Risk of Non-Promotion data date stamped and marked "Received" and "Processed?"
  Yes ____ No ____

Observations:
☐ At Risk of Non-Promotion List was not requested. ☐ At Risk of Non-Promotion List not received.
☐ At Risk of Non-Promotion List lacks signature and date of district designee (i.e., counselor, strategist, etc.)
☐ At Risk of Non-Promotion List was not stamped received. ☐ At Risk of Non-Promotion List was not stamped processed.
☐ At Risk of Non-Promotion Report was not requested and printed after data entry was conducted

Recommendations: _____
_____

18. Not On-Time for Graduation Indicator

- Did you receive data within 5 working days after end of school year? **Yes ____ No ____**
  End of Year Date_____ Date Data received_____

- Is data processed within 10 working days after receipt? **Yes** ___ **No** ___

- Is data date stamped and marked "Received" and "Processed?" **Yes** ___ **No** ___

- Was the On Time for Graduation Report requested and delivered at the end of the school year?
  Yes ___ **No** ___

Observations:
☐ Not On-Time for Graduation List not received.
☐ Not On-Time for Graduation List was not requested from district for data entry.
☐ Not On-Time for Graduation List lacks signature and date of district designee (i.e., counselor, strategist, etc.)
☐ Once data entered on NGS, NGS Clerk did not request and print Not On-Time for Graduation Report from NGS.
☐ Not On-Time for Graduation List was not stamped received.
☐ Not On-Time for Graduation List was not stamped processed.
☐ Distribution Log is not in place.　　　　　　　　　☐ Distribution Log lacks signature.

Recommendations: _____

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19. Termination Reasons (Deceased, Graduate, HSE, Parent Request) A withdrawal is not a termination code.

- Are the termination codes submitted within 10 working days after notification? **Yes** ___ **No** ___
- Are the codes processed within 5 working days after receipt? **Yes** ___ **No** ___
- Do you know how to use the "Multiple Termination" process? **Yes** ___ **No** ___
- If necessary, do you know how to delete a termination code? **Yes** ___ **No** ___
- Is data date stamped and marked "Received" and "Processed?" **Yes** ___ **No** ___

Observations:
☐ Termination Reports need to be requested individually and not together (Graduated, HSE, Deceased).
☐ Data (Graduated, HSE, Deceased) was not requested.　　　☐ Data (Graduated, HSE, Deceased) was not received.
☐ Data source lacking signature and date of district designee.
☐ Data source was not stamped received.　　　　　　　☐ Data source was not stamped processed.

Recommendations: _____

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20. Recommended Courses for Fall Schedule for grades 8-11

- Are the recommended courses submitted within 5 working days after the end of the spring semester?
  End of Year Date_____ Date Data received_____ **Yes** ___ **No** ___

- Are these processed within 5 working days after receipt? **Yes** ___ **No** ___

- Do you know how to delete and update recommended courses? **Yes** ___ **No** ___

- Are the recommended courses stamped and marked "Received" and "Processed?" **Yes** ___ **No** ___

Observations:
☐ Recommended Courses (pre-registration) Information was not requested.
☐ Recommended Courses Information was not received.　　☐ Recommended Course confirmation page not printed.
☐ Data source was not stamped received.　　　　　　☐ Data source was not stamped processed.

Recommendations: _____

21.   Regular Term Coursework for Grades 6-8

- Is data received within 5 working days after <u>end of school year</u>? **Yes** ____ **No** ____
  End of Year Date_____   Date Data received_____

- Is data processed within 10 working days after receipt? **Yes** ____ **No** ____

- Is the coursework data date stamped and marked "Received" and "Processed?" **Yes** ____ **No** ____

- Do you know how to delete and update coursework? **Yes** ____ **No** ____

Observations:

☐ Report cards were not requested.

☐ Data source was not stamped received.

☐ Middle School/Jr. High Course History was not requested and printed.

☐ Report cards were not received.

☐ Data source was not stamped processed.

☐ Unique Count not requested by SSID.

Recommendations: _____

22. Priority for Service (PFS) (MEP Compliance Indicator)

- Is the Priority for Service Report being requested and printed on a monthly basis (including the summer months)? **Yes**____ **No**____
- Is it being delivered to the MEP Coordinator or designee on a monthly basis? **Yes** ____ **No** ____
- Are you familiar with the PFS Tracking Report? **Yes** ____ **No** ____

Observations:

☐ Copies of monthly PFS Reports are not on file.

☐ Distribution Log lacks monthly signatures.

☐ PFS Tracking Report using "ALL TYPES" was not requested and printed.

☐ Monthly Distribution Log is not in place.

Recommendations: _____

23. Continuation of Services

- Is the Continuation of Services report being printed before end of school year? **Yes** ____ **No** ____

- Is it being delivered to the MEP Coordinator? **Yes** ____ **No** ____

Observations:

☐ Continuation of Services Report was not requested and printed.

☐ Distribution Log is not in place

☐ Copy of Continuation of Services is not on file.

☐ Distribution Log lacks signature.

Recommendations: _____

24 a.   Supplemental Program Data (Encode on NGS **only** MEP-funded services for all migrant children identified.)

- Are you using the supplemental worksheet? **N/A** ____ **Yes** ____ **No** ____
  ☐ LEA uses district made forms to document each supplemental service.

- Is the supplemental data submitted by June 30 for regular and year-round terms? **Yes** ____ **No** ____

- Is the supplemental data processed by July 25 for regular and year-round terms?   **Yes** ____ **No** ____

- Do you know how to add a supplemental program to a student's record?   **Yes** ____ **No** ____

- When a supplemental program is added, do you know where to view it and if necessary, how to delete it?
  Yes ____ **No** ____

- Is data date stamped and marked "Received" and "Processed?"   **Yes** ____ **No** ____

Observations:
☐ Supplemental Data was not requested.   ☐ Supplemental Data was not received.
☐ Data source was not stamped received.   ☐ Data source was not stamped processed.
☐ Supplemental Program Count report or Individual Supplemental Report with names was not requested and printed after services have been entered
☐ Migrant Supervisor did not provide NGS Clerk with a district-wide list of all Supplemental Services for the regular school year term.

Recommendations: _____

24b. Supplemental Program Data for Out of School Youth - Drop Out Recovery
(Encode on NGS **only** MEP-funded services for all migrant children identified.)

- Was OSY Report requested and printed?   **Yes** ____ **No** ____

- Was the student designation worksheet requested and printed?   **Yes** ____ **No** ____

- Is the drop out recovery data submitted by June 30 for regular and year-round terms? **Yes** ____ **No** ____

- Is the drop out recovery data processed by July 25 for regular and year-round terms? **Yes** ____ **No** ____

- Do you know how to add the drop out recovery to a student's record?   **Yes** ____ **No** ____

- When a drop out recovery is added, do you know where to view it   **Yes** ____ **No** ____

  and if necessary, how to delete it?

- Is data date stamped and marked "Received" and "Processed?"   **Yes** ____ **No** ____

Observations:
☐ Drop Out Recovery data (HS/HSE programs) was not requested. ☐ Drop Out Recovery data was not received
☐ OSY Profile (data source) was not stamped received.   ☐ OSY Profile (data source) was not stamped processed.
☐ Individual Supplemental Report, "all supplementals," with names was not requested and printed.
☐ Migrant Supervisor did not provide NGS Clerk with a district-wide list of all Supplemental Services for Out of School youth for the regular school year term.

Recommendations: _____

25. State Assessment Data (migrant students enrolled in grades 3-12)
Review the state assessment data and timelines (section R).

- Was the assessment data available to the NGS data specialist by July 15?   **Yes** ____ **No** ____

- If yes to question above, was the assessment data entered within 10 working days after receipt?

  Yes _____ **No** _____

Observations:

☐ Unique Count was not requested.   ☐ District specific testing calendar is not evident.
☐ State Assessment Data was not requested.   ☐ State Assessment Data was not received.
☐ State Assessment Data was not stamped received.   ☐ State Assessment Data was not stamped processed.
☐ State Assessment Data was not entered on NGS.
☐ NGS Clerk did not request the NGS Formal Assessment Report –no assessments.
☐ NGS Clerk did not request the Missing State Assessment Data from Download Report.

Recommendations: _____

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Summer/Intersession Program Data – Project SMART

Must submit data (according to timelines) for every migrant child participating in a MEP-funded summer/intersession program. The summer enrollment date must be after the end of the regular school year and before the next school year begins. In order to receive funding, each summer/intersession enrollment line must have "summer" or "intersession" as the enrollment type. Review the Summer/Intersession Program Data and timelines (sections U, V, W, X, Y). NOTE: Remember to report any grades given, immunization updates and supplemental programs provided.

26a. Summer Enrollments New COEs – (Residency Only not in Project SMART) (MEP Compliance Indicator)

- Are these received within 5 and/or 7 working days of parent signature date?   **Yes** _____ **No** _____

- Are the COEs complete?   **Yes** _____ **No** _____
  ☐ Boxes not checked   ☐ RV incomplete   ☐ Not using most updated copy of COE/SDF

- Do you know how to use the "Multiple Enrollment" process?   **Yes** _____ **No** _____
  (This process must only be used when there is no new QAD.)
  ☐ District does not use.

- Are the new COEs being processed within 7 working days after receipt from the reviewer? **Yes**___**No**___

- Are the COEs date stamped and marked "Received" and "Processed?"   **Yes** _____ **No** _____

Observations:

☐ Stamping must not cover any COE information.   ☐ No local district information on COE (i.e., local IDs, "new", etc.)
☐ Additional technical assistance or training needed on how to conduct enrollments.
☐ NGS clerk did not return COE to reviewer/recruiter when incomplete.
☐ NGS Clerk did not request and print summer Unique Count after completing summer enrollments.

Recommendations: _____

26b. Summer Enrollments – Continued Residency (Project SMART) (MEP Compliance Indicator)

- Did you receive Project Smart Rosters within 2 working days after initial summer enrollment?

  Yes _____ **No** _____

- Are Project Smart Rosters stamped "Received" and "Processed?"   **Yes** _____ **No** _____

Observations:

☐ NGS clerk does not have evidence of start and end dates for Project Smart.

☐ Project Smart attendance roster not stamped received.   ☐ Project Smart attendance roster not stamped processed.
☐ NGS Clerk did not request Project Smart attendance roster.   ☐ NGS Clerk did not receive Project Smart attendance roster.
☐ NGS Clerk did not request and print summer Unique Count after completing summer enrollments.

Recommendations: _____

26c. Summer Enrollments – Continued Residency (A Bright Beginning {ABB}) (MEP Compliance Indicator)

- Did you receive ABB Roster within 2 working days after initial summer enrollment?   **Yes** ___ **No** ___

- Is ABB Roster stamped "Received" and "Processed?"   **Yes** ___ **No** ___

Observations:
☐ NGS clerk does not have evidence of start and end dates for ABB.
☐ NGS Clerk did not request and print summer Unique Count after completing summer enrollments.
☐ NGS Clerk did not request A Bright Beginning (ABB) attendance roster.
☐ NGS Clerk did not receive A Bright Beginning (ABB) attendance roster.
☐ ABB attendance roster not stamped received.   ☐ ABB attendance roster not stamped processed.

Recommendations: _____

27a. Supplemental Program Data – Instructional (Project SMART and/or ABB)

- Is the supplemental data submitted within 5 working days after end of summer/ intersession services?
  Yes ___ **No** ___
- Is the supplemental data processed within 2 days after end of summer/intersession services?
  Yes ___ **No** ___
- Is data date stamped and marked "Received" and "Processed?"   **Yes** ___ **No** ___

Observations:
☐ NGS clerk does not have evidence of start and end dates for summer programs.
☐ ABB attendance roster not stamped received.   ☐ ABB attendance roster not stamped processed.
☐ NGS Clerk did not request Project Smart attendance roster.   ☐ NGS Clerk did not receive Project Smart attendance roster.
☐ Project Smart attendance roster not stamped received.   ☐ Project Smart attendance roster not stamped processed.
☐ NGS Clerk did not request A Bright Beginning (ABB) attendance roster.
☐ NGS Clerk did not receive A Bright Beginning (ABB) attendance roster.
☐ Migrant Supervisor did not provide NGS Clerk with a district-wide list of all Supplemental Services for the summer term.
☐ NGS Clerk did not request and print Supplemental Count or Individual Supplemental Report with names after completing data entry.

Recommendations: _____

27b. Supplemental Program Data – Support (school supplies, clothing, etc.)

- Is the supplemental data submitted within 5 working days after end of summer/ intersession services?
  Yes ___ **No** ___
- Is the supplemental data processed within 2 days after end of summer/intersession services?
  Yes ___ **No** ___
- Is data date stamped and marked "Received" and "Processed?"   **Yes** ___ **No** ___

☐ NGS Clerk did not request lists of support services.   ☐ NGS Clerk did not receive lists of support services.
☐ Data source was not stamped received.   ☐ Data source was not stamped processed.
☐ NGS clerk does not have evidence of start and end dates for summer programs.
☐ Migrant Supervisor did not provide NGS Clerk with a district-wide list of all Supplemental Services for the summer term.
☐ NGS Clerk did not request and print Supplemental Count or Individual Supplemental Report with names after completing data entry.

Recommendations: _____

_____

28. Early Withdrawals

- Is the early withdrawal data submitted within 2 working days after early withdrawal?   **Yes** ____ **No** ____

- Is the early withdrawal data processed within 1 day after receipt?   **Yes** ____ **No** ____

- Is all required data being encoded on NGS? (e.g., Project Smart Assessments and supplemental services)?   **Yes** ____ **No** ____

- Is data date stamped and marked "Received" and "Processed?"   **Yes** ____ **No** ____

Observations:
☐ District does not have Project Smart attendance roster.   ☐ District does not have ABB attendance roster.
☐ District does not have supplemental services data.
☐ District does not have Project Smart Assessment Data (Pre-Test, Post-Test).

Recommendations: _____

_____

29. End of Summer Withdrawals

- Is the end of summer withdrawal submitted within 5 working days after end of Project Smart and ABB?   **Yes** ____ **No** ____

- Is the end of summer withdrawal data processed within 5 days after receipt?   **Yes** ____ **No** ____

- Is data date stamped and marked "Received" and "Processed?"   **Yes** ____ **No** ____

Observations:
☐ NGS Clerk did not request final Project Smart attendance roster.   ☐ Data source was not stamped received.
☐ NGS Clerk did not receive final Project Smart attendance roster.   ☐ Data source was not stamped processed.
☐ NGS Clerk did not receive final ABB attendance roster.   ☐ NGS Clerk did not receive final ABB attendance roster.
☐ NGS clerk did not request Multiple Withdrawal Worksheet.
☐ NGS clerk does not have evidence of start and end dates for Project SMART and ABB.

Recommendations: _____

_____

30. Project Smart Assessments (Pre-Test, Post-Test)

- Is assessment data submitted within 5 working days after end of summer/intersession services?

  Yes ____ **No** ____

- Is the supplemental data processed within 5 days after end of summer/intersession services?

  Yes ____ **No** ____

- Is data date stamped and marked "Received" and "Processed?"   **Yes** ____ **No** ____

Observations:
- ☐ NGS Clerk did not request Assessment Roster.
- ☐ Data source was not stamped received
- ☐ NGS clerk did not request and print Project SMART Report.

- ☐ NGS Clerk did not receive Assessment Roster.
- ☐ Data source was not stamped processed.

Recommendations: _____

_____

Overall Comments:
- ☐ Data source must match NGS report.
- ☐ Missing data

- ☐ Once data entry is conducted/updated final NGS report must be printed.

_____

_____

_____

_____

_____

ESC Reviewer: _____   Date: _____
　　　　　　　　　　(Signature)

District Personnel:

_____   _____   Date: _____
(Signature)　　　　　　　　　　(Title)

_____   _____   Date: _____
(Signature)　　　　　　　　　　(Title)

New 2018-2019
- ABB pre + post plus TBD report
- Reading pre + post plus TBD report
- Math pre + post plus TBD report

School Year:	School District:
Recruiter ID#:	Migrant Office Phone:

Texas Education Agency
Migrant Education Program
Certificate of Eligibility (COE)

COE _____ of _____

Current Female Parent/Guardian	
Last Name	First Name
Family ID#:	Homebase District:

A. FAMILY DATA

	Parent/Guardian 1			Parent/Guardian 2	
Last Name		First Name	Last Name		First Name

	Street	City	State	Zip Code	Telephone Numbers
Current Address					Home:
Mailing Address					Cell:

B. CHILD DATA

	Child- NGS No.	Last Name 1	Last Name 2	Suffix	First	Middle	Residency Date	Moved from: City/State/Country
1							/ /	
2							/ /	
3							/ /	
4							/ /	
5							/ /	

C. SCHOOL DATA

	Campus ID	Unique ID	Sex	Eth.	Race	MB	BD	Code	Enrollment Date	Grade
1							/ /		/ /	
2							/ /		/ /	
3							/ /		/ /	
4							/ /		/ /	
5							/ /		/ /	

D. QUALIFYING MOVES & WORK

(1) The child(ren) listed on this form moved due to economic necessity from a residence in ____School district____ / ____City____ / __State__ / ____Country____ to a residence in ____School district____ / ____City____ / __State__.

(2) The child(ren) moved (complete both a. and b.):
a. ☐ as the worker, OR ☐ with the worker, OR ☐ to join or precede the worker.

b. The worker, ____First Name and Last Name of Worker____, is ☐ the child or the child's ☐ parent/guardian ☐ spouse.

i. (Complete if "to join or precede" is checked in #2a.) The child(ren) moved on __MM/DD/YY__. The worker moved on ____MM/DD/YY____. (provide comment)

(3) The Qualifying Arrival Date was _____MM/DD/YY_____.

(4) The worker moved due to economic necessity on ____MM/DD/YY____, from a residence in ____School district____ / ____City____ / __State__ / ____Country____ to a residence in ____School district____ / ____City____ / __State__, and:

a. ☐ engaged in a new qualifying work soon after the move (provide comment if worker engaged more than 60 days after the move), OR

b. ☐ actively sought new qualifying work AND has a history of moves for qualifying work (provide comment)

(5) The qualifying work,* ____describe agricultural or fishing work____, was
(make a selection in both a. and b.):
a. ☐ seasonal OR ☐ temporary employment
b. ☐ agricultural OR ☐ fishing work   *If applicable, check ☐ personal subsistence (provide comment)

(6) (Complete if "temporary" is checked in #5a) The work was determined to be temporary employment based on:
a. ☐ worker's statement (provide comment), OR
b. ☐ employer's statement (provide comment), OR
c. ☐ State documentation for _____Employer_____.

E. COMMENTS
(Must include 2bi, 4a, 4b, 5, 6a and 6b of the Qualifying Moves & Work Section, if applicable)   ☐ See attached Comments

F. INTERVIEWEE SIGNATURE

I understand the purpose of this form is to help the State determine if the child(ren)/youth listed on this form is/are eligible for the Title I, Part C Migrant Education Program. To the best of my knowledge, all of the information I provided to the interviewer is true.

☐ The rules for migrant eligibility, services, student record transfer, and the Family Educational Rights and Privacy Act (FERPA) have been explained to me. I hereby authorize this school district, the Texas Education Agency, the New Generation System (NGS) and the Migrant Student Information Exchange (MSIX) to release, transfer, and/or receive my child's educational and health records, including immunization records and standardized test results, to/from other schools and educational agencies. To possibly qualify for more educational, health, or social services, I further consent that student/family information, including student/parent name, address, phone number, student date of birth, and student district/campus enrollment, otherwise confidential under the provisions of FERPA.

_____ Signature   _____ Relationship to child(ren)   _____ Date (MM/DD/YY)

Language Used to Explain the Contents of This Document: ☐ English ☐ Spanish ☐ Other (specify):

Place of Interview: ☐ Home Visit ☐ Office Visit ☐ Other (specify)

G. ELIGIBILITY DATA CERTIFICATION

I certify that based on the information provided to me, which in all relevant aspects is reflected above, I am satisfied that these children are migratory children as defined in 20 U.S.C. 6399(2) and implementing regulations, and thus eligible as such for MEP services. I hereby certify that, to the best of my knowledge, the information is true, reliable, and valid and I understand that any false statement provided herein that I have made is subject to fine or imprisonment pursuant to 18 U.S.C. 1001.

☐ I certify that I have received training in determining migrant eligibility and the types of services available to this family from the MEP and other agencies in the community.

_____ Signature of Interviewer   _____ Date (MM/DD/YY)

_____ Signature of Designated SEA Reviewer   _____ Date (MM/DD/YY)

H. CONTINUED RESIDENCY VERIFICATION (September 1- August 31)

Reporting Period	RV Date	Method Used	Person Interviewed	Signature of Person Interviewed	District / ESC Representative Signature / Date

SAMPLE FOR TRAINING PURPOSE ONLY

School Year:	School District:		Current Female Parent/Guardian	
			Last Name	First Name
Completed By:			Date:	

Texas Education Agency
Migrant Education Program
COE Supplemental Documentation Form (SDF)

Please print legibly in Blue Ink. Attach completed form to the corresponding COE.

Economic Necessity
☐ Migrant work is the family's only livelihood.   ☐ Other jobs besides migrant work support the family.

What other jobs support the whole family? List each worker and the type of work done.
(¿Qué otros trabajos ayudan a mantener a la familia? Enumere el nombre de cada trabajador y el tipo de trabajo que hizo.)

Name of worker	Relationship to child(ren)	Type of work

Birth Date Verification Code (Check when applicable)   Code 07: ☐ Interviewee provided a verbal statement for child(ren)'s birth date(s).

Code 99: ☐ Other (Specify evidence) _____

Residency Verification for P2s Turning P3 (Complete when applicable.) _____

Person Interviewed   Date   Place of Interview

Qualifying Conditions that Require Comments (Check when applicable)

☐	(2bi) "To Join" Move		☐	Early Move
☐	(4a) Engaged in a new qualifying work more than **60 days** after the move		☐	Qualifying Move to Homebase
☐	(4b) Actively sought new qualifying work **AND** has a history of moves for qualifying work		☐	Short Distance Move
☐	(6a) Temporary Employment (worker's statement)		☐	Short Duration Move (7 days or less)
☐	(6b) Temporary Employment (employer's statement)		☐	Unusual Qualifying Work

COMMENTS

_____

_____

_____

_____

☐ **Reviewed by ESC for More Than One Required Comment**   ☐ Approved   ☐ Not Approved (Provide Explanation)

Reviewed by: _____ Date: _____

	Stamp Area

☐ **Extenuating Circumstances** (Explain situation in detail):

Changes Made to an Existing COE/COE SDF
☐ Copy of COE/COE SDF given/sent to parent/guardian   Date(s): _____

OSY STUDENT PROFILE

___ OSY Declined Services (include comment)	___ Could not Locate/Contact (include comment)	___ Currently Enrolled in School (Credit Recovery)
___ Currently Enrolled in GED-NGS SPECIAL NEEDS		Date: 9/1/18 Institution: Mid Valley Academy
Date: 7/23/18 Institution: TSTC HEP		___ Currently Enrolled in School (State Assessment)
		Date: 9/1/18 Institution: Mid Valley Academy

Date:

Name:

Address:

Region:

District:

NGS#:

Gender:

DOB:

Phone:

Last grade attended:

QAD:

How long is youth planning on being in the area?   **If moving, where?**

When:

Where:

Has access to transportation:

English oral language proficiency:

Home language:

Health Needs:
- ___ Medical
- ___ Dental
- ___ Other:
- ___ Vision
- ___ Urgent

Advocacy Needs:
- ___ Legal
- ___ Translation/Interpretation
- ___ Other:
- ___ Childcare

Educational Needs:
- ___ Adult Basic Education (ABE)
- ___ CAMP
- ___ HEP
- ___ ESL
- ___ GED
- ___ Pre-GED
- ___ High School Diploma

Reason for leaving school:
- ___ Lacking credits
- ___ Missed/Failed State Assessments
- ___ Other:
- ___ Needed to work
- ___ Multiple years in same grade level

Job-Related Needs:
- ___ Career Exploration
- ___ Job Training
- ___ Life Skills

Availability:

	Su	M	T	W	Th	F	Sa
Morning							
Afternoon							
Evening							

Expressed interests in: NGS DESIGNATIONS OUT OF SCHOOL YOUTH
- ___ Learning English
- ___ GED/HSE
- ___ Returning to school
- ___ Not interested in returning to district
- ___ Not interested in returning to school
- ___ Other:
- X Job Training
- ___ Earning a diploma
- ___ Not interested in returning to charter
- ___ Not interested in returning to online

Youth is a candidate for (for office use):
- ___ HS diploma
- ___ HEP
- ___ Health education
- ___ ESL/Literacy
- ___ CAMP
- ___ Other:
- ___ Pre GED/GED
- ___ Adult Basic Education
- ___ Job training
- ___ Life skills
- ___ Distance Learning

At interview, youth received:
- ___ Educational materials
- ___ Referral(s)(lists in comments)
- ___ Other:
- ___ Support services

Comments:

Student Signature:

Provider Signature:

ENTER DATA UNDER SUPPLEMENTAL PROGRAM/DESIGNATION ON NGS

Name: Alejandra Guzman	NGS#: 12345678ABC	
Enrollments:	Date:	Location:
X **Re-Enrolled in School (Credit Recovery)** SUPPLEMENTAL TYPE: DROPOUT RECOVERY- "RECOVERY INTO HS PROGRAM"	07-25-2018	PREMIER HS
X **Re-Enrolled in School (State Assessment)** SUPPLEMENTAL TYPE: DROPOUT RECOVERY- "RECOVERY INTO HS PROGRAM"	07-25-2018	PREMIER HS
X **Enrolled in GED Program** SUPPLEMENTAL TYPE: DROPOUT RECOVERY- "RECOVERY INTO HSE PROGRAM" (**Must also be encoded under NGS Special Needs**)	07-25-2018	UTRGV HEP

INSTRUCTIONAL SERVICES

DISTRICT SERVICES	REFERRED SERVICES
X **State Assessment Remediation (Test Prep)** SUPPLEMENTAL TYPE: INSTRUCTIONAL SERVICES	High School Equivalency Program
Health Education	GED Program
Tutorial	Distance Learning
Life Skills	Workforce Solutions
District Credit Recovery —	Job/Vocational Training —
Distance Learning	ESL
Math	Adult Basic Education (ABE)
Reading	Computer Literacy
PASS	Credit Recovery
Project SMART	Pre-GED
Other	Other

SUPPORT SERVICES

DISTRICT SERVICES		REFERRED SERVICES
Clothing	MEP Funded	XTransportation: United Way SUPPLEMENTAL TYPE: SUPPORT SERVICES- REFERRED SERVICE
X **Counseling Services** SUPPLEMENTAL TYPE: SUPPORT SERVICES		WIC
Material Resources		Housing
School Supplies		Access to Social Services —
Tools Used for Academic Assistance		Dental Check-Up
Other		Vision Exam
		Hearing Screening
		Translation/Interpretation
		Nutrition
		Child Care
		Other

REMINDERS
- ONLY MIGRANT FUNDED SERVICES ARE TO BE ENTERED UNDER SUPPLEMENTAL TYPE

- ONLY HS/HSE ENROLLMENTS OBTAINED WITH THE ASSISTANCE OF MIGRANT STAFF WILL BE ENTERED UNDER SUPPLEMENTAL TYPE: DROP OUT RECOVERY