



**STUDENT ASSESSMENTS  
AND ASSOCIATED GROWTH MODELS FOR  
TEACHER AND PRINCIPAL EVALUATION**

**FORM C**

**PUBLICLY AVAILABLE SERVICES SUMMARY**

This form will be posted on the New York State Education Department's Web site and distributed through other means for all applications that are approved in conjunction with this RFQ to allow districts and BOCES to understand proposed offerings in advance of directly contacting Assessment Providers regarding potential further procurements.

Assessment Provider Information	
Name of Assessment Provider:	Hannibal Central Schools
Assessment Provider Contact Information:	Tammy Farrell tfarrell@hannibalcsd.org
Name of Assessment:	7 <sup>th</sup> Grade Physical Science
Nature of Assessment:	<input checked="" type="checkbox"/> ASSESSMENT FOR USE WITH STUDENT LEARNING OBJECTIVES WITH A TARGET SETTING MODEL; OR  <input type="checkbox"/> SUPPLEMENTAL ASSESSMENT WITH AN ASSOCIATED GROWTH MODEL: <input type="checkbox"/> GAIN SCORE MODEL <input type="checkbox"/> GROWTH-TO-PROFICIENCY MODEL <input type="checkbox"/> STUDENT GROWTH PERCENTILES <input type="checkbox"/> PROJECTION MODELS <input type="checkbox"/> VALUE-ADDED MODELS <input type="checkbox"/> OTHER:
What are the grade(s) for which the assessment can be used to generate a 0-20 APPR score?	It depends on the configuration of the 5-8 science course. Can be used for any course teaching physical science middle level
What are the subject area(s) for which the assessment can be used to generate a 0-20 APPR score?	Intermediate Science
What are the technology requirements associated with the assessment?	None
Is the assessment available, either for free or through purchase, to other districts or BOCES in New York State?	<input checked="" type="checkbox"/> YES  <input type="checkbox"/> No

Please provide an overview of the assessment for districts and BOCES. Please include:

- A description of the assessment;
- A description of how the assessment is administered;
- A description of how scores are reported (include links to sample reports as appropriate);
- A description of how the Assessment Provider supports implementation of the assessment, including any technical assistance. (3 pages max)

The 7<sup>th</sup> grade Physical Science Assessment is a two part culmination of the year's content and literacy standards. Part I consists of 25 multiple choice questions chosen from a variety of past NYS assessment samples measuring both content knowledge and skill in reading, interpreting and synthesizing information on charts and graphs. Requiring students to utilize both knowledge and reasoning. The assessment map is as follows: 4 questions tagged to NYS Science Standards 4 indicator 1.1 CCLS RST 7.4

- 4 questions tagged to NYS Science Standards 4 indicator 2.1 CCLS RST 7.4
- 2 questions tagged to NYS Science Standards 4 indicator 3.1 CCLS RST 7.4
- 2 questions ..... 4.....3.2 ..... RST 7.4
- 3..... 4.....3.3 ....."
- 4..... 4.....4.1..... "
- 2..... 4.....4.2..... "
- 1..... 4.....4.2..... "
- 2..... 4.....5.1....."
- 1 ..... 4.....5.2..... "

Part II of the assessment is composed of 10 written responses in which students read a case study of a scientific experiment, answer text dependent questions and draw conclusions based on the information from the text. Questions 1-10 of part two are tagged to NYS 5-8 Science Standard I Inquiry and design and CCLS RST 7.1 7.2 and 7.7

**Please provide an overview of the student-level growth model or target setting model for SLOs for districts and BOCES, along with how student-level growth scores are aggregated to the create teacher-level scores, and how those teacher-level scores are converted to New York State's 0-20 metric.**

The 7<sup>th</sup> grade teacher administrates a pre-assessment aligned with the same content and literacy skills. The teacher and administrator works together to analyze pre-assessment data and NYS ELA Assessment data as well as considering factors such as special education and past performance, to set targets for each student. Once the assessment is administered and scored by someone other than the teacher being evaluated, the data is analyzed for the percentage of students who met their target, and the percentage is then placed in the NYS 3012-d SLO scale to be converted to 0-20 then to HEDI.

<b>New York State Next Generation Assessment Priorities</b>	
Please provide detail on how the proposed supplemental assessment I or assessment to be used with SLOs addresses each of the Next Generation Assessment Priorities below.	
<b>Characteristics of Good ELA and Math Assessments (only applicable to ELA and math assessments):</b>	
<b>Assessments Woven Tightly Into the Curriculum:</b>	As the assessment map above indicates, all items are directly aligned with standards and our curriculum is directly aligned with standards. Other formative assessments through-out the year are aligned to scaffold student success on the final assessment.
<b>Performance Assessment:</b>	Part II the experiment analysis is a performance based assessment.
<b>Efficient Time-Saving Assessments:</b>	The assessment is administered as the final exam within the final exam schedule developed by the school.
<b>Technology:</b>	The district is in the process of building and infrastructure that will accommodate technology based assessments. Once that has occurred, this assessment will evolve to

	incorporate technology.
<b>Degree to which the growth model must differentiate across New York State's four levels of teacher effectiveness (only applicable to supplemental assessments):</b>	N/A



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**APPLICANT CERTIFICATION FORM –ASSESSMENTS FOR USE WITH STUDENT  
LEARNING OBJECTIVES**

Please read each of the items below and check the corresponding box to ensure the fulfillment of the technical criteria.

PLEASE SUBMIT ONE "FORM H" FOR EACH APPLICANT. CO-APPLICANTS SHOULD SUBMIT SEPARATE FORMS.

The Applicant makes the following assurances:

Assurance	Check each box:
The assessment is rigorous, meaning that it is aligned to the New York State learning standards or, in instances where there are no such learning standards that apply to a subject/grade level, alignment to research-based learning standards.	<input checked="" type="checkbox"/>
To the extent practicable, the assessment must be valid and reliable as defined by the Standards of Educational and Psychological Testing.	<input checked="" type="checkbox"/>
The assessment can be used to measure one year's expected growth for individual students.	<input checked="" type="checkbox"/>
For K-2 assessments, the assessment is not a "Traditional Standardized Assessment" as defined in Section 1.3 of this RFQ.	<input type="checkbox"/>
For assessments previously used under Education Law §3012-c, the assessment results in differentiated student-level performance. If the assessment has not produced differentiated results in prior school years, the applicant assures that the lack of differentiation is justified by equivalently consistent student results based on other measures of student achievement.	<input checked="" type="checkbox"/>
For assessments not previously used in teacher/principal evaluation, the applicant has a plan for collecting evidence of differentiated student results such that the evidence will be available by the end of each school year.	<input type="checkbox"/>
At the end of each school year, the applicant will collect evidence demonstrating that the assessment has produced differentiated student-level results and will provide such evidence to the Department upon request. <sup>4</sup>	<input checked="" type="checkbox"/>

<sup>4</sup> Please note, pursuant to Section 2.3 of this RFQ, an assessment may be removed from the approved list if such assessment does not comply with one or more of the criteria for approval set forth in this RFQ

**To be completed by the Copyright Owner/Assessment Representative of the assessment being proposed and, where necessary, the co-applicant LEA:**

<p>1. Name of Organization (PLEASE PRINT/TYPE)</p>	<p>4. Signature of Authorized Representative (PLEASE USE BLUE INK)</p>
<p>2. Name of Authorized Representative (PLEASE PRINT/TYPE)</p>	<p>5. Date Signed</p>
<p>3. Title of Authorized Representative (PLEASE PRINT/TYPE)</p>	

<p>Hannibal CSD 1. Name of LEA (PLEASE PRINT/TYPE)</p>	<p>Tammy Farrell 4. Signature of School Representative (PLEASE USE BLUE INK)</p>
<p>Tammy Farrell 2. School Representative's Name (PLEASE PRINT/TYPE)</p>	<p>10/2/15 5. Date Signed</p>
<p>Director of C+I 3. Title of School Representative (PLEASE PRINT/TYPE)</p>	