|  |  |
| --- | --- |
| Private School Name: | Private School Principal: |
| Private School Address: | Private School Telephone: |
| Sacramento City Unified School District, Private School Title I Program Director:    Kelley Odipo  State and Federal Programs  5735 47th Avenue  Sacramento, CA 95824  Phone: 916-643-9051/ Fax: 916-399-2063 | |

**Instructional Plan for Eligible Students**

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| ***Please describe the instructional program including instructional objectives, scheduling information below. Include grade level(s), instructional delivery (small group, one-on-one, etc.) and other pertinent information.*** |
|  |

**Resources and Materials for**

**Plan Implementation**

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| ***Please list the Instructional resources used for the program.*** |
| **Reading Materials:** |
| **Math Materials:** |
| **Technology:** |
| **Other Resources (if applicable):** |

**Eligibility and Assessment**

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| **Multiple Assessment Measures to Identify Students for Services:** |
| **Assessment Measures to Monitor Student Progress:** |
| **Communication of Progress:** |

**Other Strategies (if applicable)**

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| --- |
| ***Please list other strategies intended to strengthen the academic program and improve school conditions for student learning.*** |
|  |

**Parent and Family Engagement**

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| --- |
| ***Please identify Parent Engagement focus areas, goals and activities below:*** |
| |  |  | | --- | --- | | **Parent Engagement Needs:** | **Parent Engagement Goals:** | |  |  | | **Parent Engagement Activities:** | | |  | | |

**Professional Development (if applicable)**

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| --- |
| ***Please identify Professional Development focus areas, goals and activities if Title I Funds are spent for professional learning.*** |
| |  |  | | --- | --- | | **Professional Development Needs:** | **Professional Development Goals:** | |  |  | | **Professional Development Activities:** | | |  | | |