



FEDERAL PROGRAMS
MISSOURI DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
 PO BOX 480, JEFFERSON CITY, MO 65102-0480
TITLE III LEP END-OF-YEAR REPORT

DISTRICT AND PROGRAM INFORMATION

School District Name	County-District Code	Form Due Date SEPTEMBER 15, 2009
Federal Programs Coordinator	Federal Programs Coordinator Phone	

DIRECTIONS

Only LEAs that were recipients of Title III LEP funds should complete this end-of-year report which provides information about the LEA's school year 2008-2009 professional development activities that met the requirements of section 3115(c)(2). The LEA should include only those professional development activities that specifically addressed the teaching of ELL/LEP students or were related to the learning of ELL/LEP students. The number of participants should include the number of teachers, administrators, and other personnel who participated in each type of the professional development activities reported.

Mail or fax the completed form no later than September 15, 2009 to: Federal Grants and Financial Management, Missouri Department of Elementary and Secondary Education, PO Box 480, Jefferson City, MO 65102-0480 or Fax: (573) 526-6698.

Questions on completing this form, contact Discretionary Grants: Ph: (573) 526-3232; Fax: (573) 526-6698; or e-mail to: webreplyfedpro@dese.mo.gov; Visit DESE's website at: dese.mo.gov

PROFESSIONAL DEVELOPMENT ACTIVITIES

Type of Professional Development Activity	Yes/No
Instructional strategies for LEP students	<input type="checkbox"/> Yes <input type="checkbox"/> No
Understanding and implementation of assessment of LEP students	<input type="checkbox"/> Yes <input type="checkbox"/> No
Understanding and implementation of English Language Proficiency (ELP) standards and academic content standards for LEP students	<input type="checkbox"/> Yes <input type="checkbox"/> No
Alignment of the curriculum in language instruction educational programs to ELP standards	<input type="checkbox"/> Yes <input type="checkbox"/> No
Subject matter knowledge for teachers	<input type="checkbox"/> Yes <input type="checkbox"/> No
Other (explain): _____	<input type="checkbox"/> Yes <input type="checkbox"/> No

PROFESSIONAL DEVELOPMENT PARTICIPANT INFORMATION

Participant Information	Yes/No	# Participants
Professional development provided to content classroom teachers	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Professional development provided to LEP classroom teachers	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Professional development provided to principals	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Professional development provided to administrators/other than principals	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Professional development provided to other school personnel/non-administrative	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Professional development provided to community-based organization personnel	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Total		

ASSURANCES AND CERTIFICATION

The authorized representative assures the Department of Elementary and Secondary Education that the information provided is correct and accurate and documentation is on file at the district for review.

SIGNATURE OF BOARD-AUTHORIZED REPRESENTATIVE	DATE
--	------

The Department of Elementary and Secondary Education does not discriminate on the basis of race, color, national origin, sex, disability, or age in its programs and activities. Inquiries related to Department programs may be directed to the Jefferson State Office Building, Title IX Coordinator, 5th Floor, 205 Jefferson Street, Jefferson City, Missouri 65102-0480; telephone number 573-751-4212.