

# Willamina School District 30J

Code: **IGBHA-AR(2)**  
Adopted: 4/09/18

## Evaluation of Alternative Education Programs - District Summary (for district use only)

The district's alternative education program evaluator should complete the following and file with materials submitted by the alternative education program coordinator.

Program Name \_\_\_\_\_ Date \_\_\_\_\_

Program Coordinator \_\_\_\_\_

### Staff

1.  Meets criteria  Does not meet criteria

Comments: \_\_\_\_\_  
\_\_\_\_\_

### Curriculum

1.  Meets criteria  Does not meet criteria

Comments: \_\_\_\_\_  
\_\_\_\_\_

2.  Meets criteria  Does not meet criteria

Comments: \_\_\_\_\_  
\_\_\_\_\_

### Discrimination

1.  Meets criteria  Does not meet criteria

Comments: \_\_\_\_\_  
\_\_\_\_\_

### Registration (Private alternative education programs only)

1.  Meets criteria  Does not meet criteria

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Site Evaluation**

1.  Meets criteria  Does not meet criteria

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Tuition and Fees**

1.  Meets criteria  Does not meet criteria

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Contract**

1.  Meets criteria  Does not meet criteria

Comments: \_\_\_\_\_  
\_\_\_\_\_

2.  Meets criteria  Does not meet criteria

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Expenditures**

1.  Meets criteria  Does not meet criteria

Comments: \_\_\_\_\_  
\_\_\_\_\_

**Advertising**

1.  Meets criteria  Does not meet criteria

Comments: \_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
District Evaluator's Signature                      Date