

**RACE TO THE TOP  
LEA FINAL SCOPE OF WORK – EXHIBIT II**

**Work Plan Table**

**Project/MOU Criterion: Improve Access to State Data – (C)(2)**

**Please indicate one LEA point of contact for this Project.**

**Name:**

**Title:**

**Phone #:**

**E-mail Address:**

**Project Goal:** LEAs will integrate with the Department to provide single sign-on access to state-level applications and data by their users. The LEA will incorporate state-level data into local instructional improvement systems to improve instruction in the classroom, operations at the school and district levels, and to support research.

**Deliverables (minimum required evidence):**

1. For teachers, principals, and other LEA staff, provide a report on the following:
  - a. Number of each type of staff in the district
  - b. Number of each type of staff accessing state resources via single sign-onBaseline report based on 2009-10 is due by December 31, 2010. Reports based on the prior two quarters completed are due by September 30 and March 31 of each year. Bi-annual reporting shall begin the first applicable period after single sign-on integration with the Department. The Department will provide a report template.
2. Single Sign-on Integration Readiness Certification. Certification forms will be provided by the Department for LEA signature.
3. Single sign-on integration with the Department.
4. For state-level data downloads, provide a report of the following:
  - a. Name of the download
  - b. Date of most recent downloadReports are due by September 30 and March 31 of each year and should be based on the prior two quarters completed. Reporting shall begin the first applicable period after receipt and incorporation of state-level data into local instructional improvement systems. The Department will provide a report template.

*Note: Additional evidence regarding the state-level data downloads is collected with Section (C)(3)(i).*

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*Note: The following is being provided as an example of the single sign-on integration piece only*

*The Key Personnel box below should include both new positions funded through RTTT and existing staff responsible for implementation of this Project. List titles in the first column and indicate each year of involvement with an X.*

<b>Key Personnel (indicate each year of involvement):</b>	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
LEA User Access Management Staff	✓	✓	✓	✓	✓	✓
LEA Network Administration Staff	✓	✓	✓	✓	✓	
LEA Server Administration Staff	✓	✓	✓	✓	✓	
LEA Chief Information Officers	✓	✓	✓	✓	✓	✓
Charter School representative	✓	✓	✓	✓	✓	✓

*The Deliverable box below should list each deliverable and its supporting activities. Indicate the year each Deliverable and Supporting Activity will be accomplished with an X. The box repeats for each additional deliverable as necessary. LEAs are encouraged to propose additional deliverables as appropriate. Deliverables and Supporting Activities should support student achievement targets in Form (A)1.*

*Note: Deliverables beyond what is required by the Department will be dependent on an LEA's current status with respect to technology and data systems. During Year 1, LEAs will provide feedback to the Department regarding status of the LEA's preparedness for single sign-on implementation and state-level data downloads. Work should be completed by Year 4.*

<b>Deliverable (required):</b> For teachers, principals, and other LEA staff, provide a report on the following: a. Number of each type of staff in the district b. Number of each type of staff accessing state resources via single sign-on	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
	X			X	X	X
<b>Supporting Activities (indicate each year activity will be conducted and include collective bargaining, if applicable):</b>	2010-11			2011/12	2012/13	2013/14
Provide reports of staff accessing state resources via single sign-on per Department report template	X			X	X	X

<b>Deliverable:</b> Gap Analysis/Needs Assessment Report for providing single sign-on	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
				X		
<b>Supporting Activities (indicate each year activity will be conducted and include collective bargaining, if applicable):</b>	2010-11			2011/12	2012/13	2013/14
Provide feedback to the Department regarding single sign-on implementation	X	X	X	X		

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Complete an evaluation of ability to provide single sign-on access to state resources				X		
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<b>Deliverable:</b> Detailed timeline and implementation plan that addresses the tasks, timing, and resources required to provide single sign-on access to state resources	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
				X		
<b>Supporting Activities (indicate each year activity will be conducted and include collective bargaining, if applicable):</b>	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
Develop a plan to implement single sign-on access to state resources by school and LEA staff				X		

<b>Deliverable:</b> Procurement documents	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
				X		
<b>Supporting Activities (indicate each year activity will be conducted and include collective bargaining, if applicable):</b>	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
Develop specifications for procurement				X		

<b>Deliverable (required):</b> Single Sign-on Integration Readiness Certification	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
				X		
<b>Supporting Activities (indicate each year activity will be conducted and include collective bargaining, if applicable):</b>	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
Prepare technical environment (details dependent upon LEA's current environment)				X		
Complete and submit Single Sign-on Integration Readiness Certification to the Department				X		

<b>Deliverable (required):</b> Single sign-on integration with the Department	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
				X		
<b>Supporting Activities (indicate each year activity will be conducted and include collective bargaining, if applicable):</b>	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
Integrate with the department to provide				X		

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single sign-on						
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<b>Deliverable (required):</b> For state-level data downloads, provide a report of the following: a. Name of the download b. Date of most recent download	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
				X	X	X
<b>Supporting Activities (indicate each year activity will be conducted and include collective bargaining, if applicable):</b>	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
				X	X	X
Obtain state-level data download when available				X	X	X
Incorporate downloaded data into local instructional improvement system				X	X	X
Provide a report of state-level data downloads incorporated into local instructional improvement systems				X	X	X

<b>Project Budget Summary:</b>	2010-11			2011/12	2012/13	2013/14
	2 <sup>nd</sup> Quarter	3 <sup>rd</sup> Quarter	4 <sup>th</sup> Quarter			
	\$	\$	\$	\$	\$	\$

**Sustainability Factors:** *(short description or list of factors that will contribute to the sustainability of the results of the Project after Race to the Top funding ends)*

1. The district will permanently allocate a staff member to manage role-based access to single sign-on.
2. The district will annually survey school staff on the effectiveness of receiving data from each state-level data download and will report its findings to the School Board.

**Supporting Narrative (optional):**

**Title and Page Number of Appendices for this Project (if applicable):**