

**THE NORTH CAROLINA CHARTER SCHOOLS SELF-STUDY**

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| I. School Information |
| School Name: |   |
| Mailing Address: |   |
| Primary Contact Person: |   |
| Primary Contact Title: |   |
| Phone: |   |
| Fax: |   |
| Email: |   |

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| II. Board Information |
| Contact Name: |   |
| Term of Office: |   |
| Mailing Address: |   |
| Phone: |   |
| Fax: |   |
| Email: |   |

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| III. Executive Summary |
| 1. Mission and Vision

*Include the mission and vision as stated in the initial charter application or a revised mission statement that has been formally approved by the State Board of Education.* |
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| Mission: |   |
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| Vision: |   |
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| 1. Summary

*Provide a narrative summary that is specific and succinct in describing how the school is successfully fulfilling the State Board approved mission statement. (Limit 2 pages)* |
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| IV. Goals and Objectives |
| *Provide five goals your school has during the next five years. This should include at least one academic, one financial, and one operational goal. These should be written as SMART goals. If your school has a strategic plan you may attach it.* |
| **Goal 1 (Academic)** |
| Goal:  |  |
| ***Improvement Strategies*** |
| Strategy 1: |  |
| Action Steps: |  |
| Strategy 2: |  |
| Action Steps: |  |
| Progress Indicators: |  |
| Milestone Dates: |  |
| Professional Development: |  |
| Assigned Implementation Team: |  |

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| **Goal 2 (Financial):** |
| Goal: |  |
| ***Improvement Strategies*** |
| Strategy 1: |  |
| Action Steps: |  |
| Strategy 2: |  |
| Action Steps: |  |
| Progress Indicators: |  |
| Milestone Dates: |  |
| Professional Development: |  |
| Assigned Implementation Team: |  |

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| **Goal 3 (Operational)** |
| Goal: |  |
| ***Improvement Strategies*** |
| Strategy 1: |  |
| Action Steps: |  |
| Strategy 2: |  |
| Action Steps: |  |
| Progress Indicators: |  |
| Milestone Dates: |  |
| Professional Development: |  |
| Assigned Implementation Team: |  |

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| **Goal 4** |
| Goal |  |
| ***Improvement Strategies*** |
| Strategy 1: |  |
| Action Steps: |  |
| Strategy 2: |  |
| Action Steps: |  |
| Progress Indicators: |  |
| Milestone Dates: |  |
| Professional Development: |  |
| Assigned Implementation Team: |  |

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| **Goal 5** |
| Goal:  |  |
| ***Improvement Strategies*** |
| Strategy 1: |  |
| Action Steps: |  |
| Strategy 2: |  |
| Action Steps: |  |
| Progress Indicators: |  |
| Milestone Dates: |  |
| Professional Development: |  |
| Assigned Implementation Team: |  |

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| V. Education Program |
| 1. Curriculum
 | 1. Name or describe the curriculum design your school presently uses.
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| 1. Is this the design submitted in the original charter application?
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| 1. If “No”, please provide a brief explanation below.
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| 1. Instructional Methodology and Techniques
 | 1. Summarize the instructional methodology or techniques used by your school *(i.e. direct instruction, hands on, experiential, expeditionary learning, etc.)*
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| 1. Is this the design submitted in the original charter application?
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| 1. If “No”, please provide a brief explanation below.
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| 1. Accountability
 | 1. Please provide the names of evaluation instruments, other than State Tests, used to assess student performance. (i.e. the Iowa tests, NWEA, MAP, MAT, etc.) along with a description of those assessments.
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| 1. How does the school use student data to improve student learning and to raise the academic performance of all students?
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| VI. Additional Information |
| Comments: |  |
| VII. Certify Submission |
| *Type your name below to certify all information is accurate.* |
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| Board Chair Name |  | Digital Signature |  | Date |
|  |  |  |  |  |
| School Administrator Name |  | Digital Signature |  | Date |