

**Title I Literacy
Grade K
Audit Sheet
(Teacher use ONLY)**

May Benchmark _____

To be started at beginning of school year and filled-out throughout school year.

Student's Name _____

Grade **K**

School: _____ Title I Teacher: _____

Classroom Teacher: _____ **Date of Audit:**

Date: _____

- _____ Participated in Jump Start Program / Certificate of attendance
- _____ Fall Selection Data Scores (With THIS student's Scores highlighted ONLY)
- _____ Criteria Form with Data Attached
- _____ Permission to enroll or
Continuation permission into Title I from JumpStart
- _____ Program Refusal
- _____ New Student to Sanford
(Received services in previous school district)
- _____ Monitor Parent Letter/Notification
- _____ Re-Enter Services Parent Letter / Permission
- _____ Withdrawn - Reason: _____
- _____ Summer School Parent Permission / Refusal
- _____ Certificate of Attendance for Summer School (*ONLY applicable if repeating K*)

Literacy Trimester Progress Reports (*Attach Copies of each*)

Second trimester instructional text level _____

Third trimester instructional text level _____

Attendance: _____ / _____
(# Sessions Attended / # Sessions)

Signature of Person Completing Audit

Working file

Rev.: 8/2022

IV-A-1