



NEW YORK STATE EDUCATION DEPARTMENT PHASE-OUT / PHASE-IN / CLOSURE PLAN FORM D

Note: The district must complete this form for *each* school closing, phasing-out, and/or phasing-in.

SCHOOL AND DISTRICT CONTACT INFORMATION

School District: _____

Address of District Office: _____

District Contact Person: _____

E-Mail Address: _____

Title: _____

Phone Number: _____

Fax Number: _____

() ____ - ____

() ____ - ____

Closure/Phase-Out School: _____

Phase-In School: _____

(or complete below)

School Address: _____

Building/Facility Code: _____
*Found on the Certificate of
Occupancy*

School Telephone: _____

() ____ - ____

School Fax: _____

() ____ - ____

School Contact Person: _____

Title: _____

School(s) Receiving Students	BEDS Code(s)	Facility Code(s)

Superintendent's Name: _____ Date: _____

Superintendent's Signature: _____

Principal of Phase-Out School's Name: _____ Date: _____

Principal of Phase-Out School's Signature: _____

Principal of Phase-In School's Name: _____ Date: _____

Principal of Phase-In School's Signature: _____

For each area below, if there is insufficient space to provide the response, please attach a separate sheet with the response. Also, indicate in the space provided "See attached sheet." The attachment should include the question(s) that are outlined.

SECTION I. CLOSURE/PHASE-OUT OF EXISTING SCHOOL

I.1 Previous Enrollment

Provide a rank order list of the schools in which students were previously enrolled prior to entering the closing school.

I.2 a Closure Plan

Provide a brief description of the plan for the closure of the existing school including information on why the district has chosen to close the school.

I.2 b Phase-Out Plan

Provide a brief description of the plan for the phase-out of the existing school including information on why the district has chosen to phase-out the school.

I.3 Closure/Phase-Out Timeline

Provide an overall timeline for the Closure/Phase-Out of the existing school in the table below. Include timelines for activities such as, but not limited to consultation with stakeholders; notification of staff, parents and community; enrollment/transfer processes; staffing re-assignments and district support for the school during the Closure/Phase-Out period. Include the office and title of the person responsible for the activity listed.

Activity	Timeline (Month/Year) for When this Activity Will Occur	Person(s) Responsible – Office/Title
Consultation with Stakeholders		
Notification of Staff, Parents, and Community		
Enrollment/Transfer Processes		
Staffing Reassignments		
District Support		
Other:		

I.4 Community and District Involvement

Describe the roles of community stakeholders, the district office and the board of education in the formal process of phasing-out the school.

I.5 Parental Involvement

Describe the roles of parents in the formal process of phasing-out the school. For instance, describe how parents will be informed of the Closure/Phase-Out plan and options for student transfers.

I.6 Student Transfer Plan

Describe the process the district will follow to place students from the Closure/Phase-Out school into other schools. Identify zoning or admissions policy changes, as required. Describe the impact that the Closure/Phase-Out will have on those schools that will enroll students who would otherwise be attending the Closure/Phase-Out school.

Specifically, the district must identify those schools that they expect will be most impacted and provide estimates on how this will change the schools in terms of:

- *class sizes;*
- *building utilization; and*
- *the percentage of students enrolled in the Closure/Phase-Out school who are students with disabilities (SWDs), English language learners (ELLs), or in need of Academic Intervention Services (AIS) and the percentages of SWDs, ELLs, or AIS at the schools that will be most impacted by the Closure/Phase-Out.*

NOTE: *No new admissions to the phasing-out school are permitted.*

I.7 Educational Program in Closure/Phase-Out School

Describe the process the district will follow to improve the educational program of the school being phased-out. Provide a description of how the district will implement/continue the following activities until the school has completed the Closure/Phase-Out process:

- *Job-embedded professional development for staff;*
- *Extended learning time for students; and*
- *Professional development and activities related to the use of data to guide instructional decisions at the school and classroom levels.*

I.8 Leadership and Staff

Describe the process the district will follow to downsize the existing leadership and staff.

I.9 Community Support

Describe how the district will provide support for the schools receiving additional students as a result of the school's Closure/Phase-Out.

SECTION 2. PHASE-IN OF THE "NEW" SCHOOL

Note: Schools with SED approved School Improvement Grant (SIG) Model Implementation Plans do not have to complete SECTION 2. Please proceed to SECTION 3 and SECTION 4 of this form. Instead, submit a copy of the approved SIG Model Implementation Plan. * If the district has submitted a SIG Plan, but it is under review, please note this in the beginning of the narrative below.

2.1 Phase-In Plan

Provide a narrative description of the plan for the phase-in of the new school.

2.2 Phase-In Timeline

Provide an overall timeline for the phase-in of the new school.

2.3 New School Leader

Describe the process the district will pursue to ensure the employment of a successful education leader for the new school.

2.4 New School Staff

Describe the process the district will pursue to ensure that the new school is composed almost entirely of new staff selected for qualifications, ability, and commitment to implement the new school plan.

2.5 Student Enrollment

Describe the process the district will pursue to ensure that, at the conclusion of the Closure/Phase-Out/phase-in timeline, the new school will primarily be comprised of different students.

2.6 Parental Involvement

Describe the roles of parents in the formal process of phasing-in the school. For instance, describe how parents will stay informed of the phase-in plan through orientation sessions and opportunities for input.

2.7 Reorganization Plan

Describe the process the district will pursue to ensure that the new school is organized distinctively, with a different instructional design and/or grade configuration than the Closure/Phase-Out school.

2.8 Educational Program in Phase-In School

Describe the instructional program the new school will implement. Describe how it was developed and why the district expects the program to produce acceptable student results.

SECTION 3. APPLICABLE CHARTS

Note: This section must be completed for all Closure/Phase-Out and phase-in schools, including those with SED approved SIG Model Implementation Plans.

3.1 Student Enrollment for the Closure/Phase-Out School

Provide student enrollment information for the Closure/Phase-Out school in the table below. Indicate the current student enrollment, as well as tentative student enrollment for the three (3) upcoming school years.

GRADE	CURRENT ENROLLMENT	TENTATIVE ENROLLMENT School Year 1	TENTATIVE ENROLLMENT School Year 2	TENTATIVE ENROLLMENT School Year 3
Pre-K				
K				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
SWD				
ELL				
TOTALS				

3.2 Projected Student Enrollment for the Phase-In School

Provide student enrollment information for the new school in the table below. Indicate the projected student enrollment for the four (4) upcoming school years.

GRADE	PROJECTED ENROLLMENT School Year 1	PROJECTED ENROLLMENT School Year 2	PROJECTED ENROLLMENT School Year 3	PROJECTED ENROLLMENT School Year 4
Pre-K				
K				
1				
2				
3				
4				
5				
6				
7				
8				
9				
10				
11				
12				
SWD				
ELL				
TOTALS				

3.3 Parent/Guardian Transfer Choice

Indicate the number of students whose parents/guardians have been informed of the transfer requirement, as well as the number of responses the school has received. Please identify the number who has requested to remain in the Closure/Phase-Out school, the number who has requested to be reassigned to a different school and the number who did not indicate a preference.

STATUS	NUMBER
Number of students for whom transfer choice letters have been sent	
Number of students requesting to remain in the Closure/Phase-Out school	
Number of students requesting to be reassigned to a different school	
Number of students indicating no preference	
Number of students – no response	
TOTAL	

3.4 Closure/Phase-Out School Staffing

Indicate the current status of the Closure/Phase-Out school's staff. Specify how many are currently employed at the Closure/Phase-Out school, and how many will be assigned to the Closure/Phase-Out school, new school, and other schools.

POSITION	CURRENT NUMBER	RE- ASSIGNED TO CLOSURE/ PHASE-OUT SCHOOL	RE- ASSIGNED TO THE NEW SCHOOL	RE- ASSIGNED TO ANOTHER SCHOOL(S)	OTHER
Principal					
Assistant Principal(s)					
Supervisor of Special Ed.					
Classroom Teachers					
Other Pedagogical Personnel					
Non-Pedagogical Personnel					

3.5 Phase-In School Teacher Certification Chart

To be submitted no later than October 1st.

Please indicate the number of teachers the new school will employ, by subject. Also indicate whether the teachers have attained permanent certification or initial certification. Also indicate if the teachers are participating in the Teach for America program. If they are not certified, indicate their alternate credentials.

AREA OF CERTIFICATION	PERMANENT	INITIAL	TEACH FOR AMERICA	NOT CERTIFIED (MTL, LIMITED CERT., ETC.)
Common Branches				
English				
Mathematics				
Social Studies				
Science				
Foreign Language				
Bilingual Education				
ESL				
Special Education				
Other				
TOTAL				

SECTION 4. DOCUMENTATION

Note: These documents must be submitted for every Closure/Phase-Out/Phase-in school, including those with SED approved SIG Model Implementation Plans.

- **4.1 Copy of Public Meeting Notice**
- **4.2 Sample Parent Transfer Option Letter**
- **4.3 New Zoning Plan, if applicable**