



OFFICE OF SCHOOL INNOVATION
 School Turnaround Office
 Room 481 EBA
 Telephone: (518)473-8852
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Date

Superintendent
 Office
 District
 Address
 City, State, Zip

**Re: School Innovation Fund (SIF) Grant - Round 2
 Preparation Period OR Implementation Period Site Visit - *Insert School Name***

The New York State Education Department (NYSED) School Turnaround Office (STO) completed its check-in visit to [*Insert School Name*] on [*Date*]. The purpose of this visit was to gauge grantee readiness for project implementation; and to provide grantee support and assistance in preparation (*Preparation Period*) **OR** to provide grantee support and assistance during implementation; and to determine the current level of project implementation as well as gauge its effectiveness (*Implementation Period*).

School and district staff are to be commended for being well-prepared, collaborative and candid with their remarks. The following represents a summary of the site visit.

Local Education Agency/School	School/District/Lead Partner (s)
<i>Name of School District:</i> <i>Name of School:</i>	<i>Name, Title, Affiliation</i>
School and District Capacity for Project Implementation	NYSED STO Site Visit Team Feedback
<i>Summary of Evidence</i>	<u>Strengths and Successes</u> <ul style="list-style-type: none"> •
	<u>Areas of Further Development, and Challenges/Barriers to Implementation</u> <ul style="list-style-type: none"> •

	<p><u>Potential Areas of Technical Assistance and/or Support</u></p> <ul style="list-style-type: none"> •
<p><i>Further Actions and Next Steps</i></p>	<ul style="list-style-type: none"> •

Should you have any questions, or need additional information or technical assistance, please contact your STO district liaison: *[Insert NYSED STO district liaison name, email address, (518) 473-8852]*.

Sincerely,

[Insert E-signature]
 NYSED STO District Liaison

cc: Sally Bachofer
 Sandra Herndon
 Owen Donovan
[Insert names of other SED staff participating in site visit.]