



**Vetting Committee for Out of School Time Programs**

**Rubric**

**Spring 2016 vetting cycle for Summer 2016 and SY 2016-2017 fall programming**

**Description of process:** *The Vetting Committee for Out of School Time service providers is divided into small groups to review applications and give recommendations to the applicants. The groups are composed of DC Public School staff with multi-disciplinary backgrounds in order to ensure that each application is reviewed thoroughly. Committee members should consider the number of children served, the population that the provider intends to serve and the needs of that particular population. Committee members should use this rubric as a way to evaluate the application as a whole.*

**Provider's Name:** \_\_\_\_\_

**Overall Professionalism of Vetting Application**

	Infrequently	Sometimes	Always
1. Correct spelling is used throughout the application			
2. Correct grammar is used throughout the application			
3. Writing quality demonstrates a level of professionalism appropriate for an organization working with DC Public School students			

**Ratings by Program Area**

**A. Program Development Information**

	No Evidence	Some Evidence	Substantial Evidence
1. Outlines clear and concise goals			
2. Implementation model reflects the			

	No Evidence	Some Evidence	Substantial Evidence
stated goals			
3. Components appeal to target population and encourage long-term participation			
4. Responds to and reflects student/parent needs			
5. Program design complements school day without replication			

**Strengths:**

**Areas of Improvement:**

### Vetting Committee for Out of School Time

#### B. Data and Accountability

	No Evidence	Some Evidence	Substantial Evidence
1. Collects data for program evaluation			
2. Uses data for program improvement			
3. Fiscal capacity exists to implement program successfully			

**Strengths:**

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**Areas of Improvement:**

**C. Administrative**

	No Evidence	Some Evidence	Substantial Evidence
1. Provides for safety of students			
2. Adequately insured for the duration of the relationship with DCPS			
3. Staffing practices and job descriptions are aligned with job expectations			
4. Provides adequate scheduling			

**Strengths:**

**Areas of Improvement:**

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**Applicants Status**

**Approved:** \_\_\_\_\_ **Conditionally Approved:** \_\_\_\_\_ **Not Approved:** \_\_\_\_\_

**The conditions under which this application should be approved are as follows:**

**Final Recommendation**

*In this space please provide a summary statement of your team’s findings, the application’s strengths and weaknesses, and any necessary clarifications.*

Group Members 1. \_\_\_\_\_ 2. \_\_\_\_\_  
3. \_\_\_\_\_ 4. \_\_\_\_\_  
5. \_\_\_\_\_