Form Status:

SAS#: XXXXXXXX

<Selection\_Process>

**Organization:** 

Campus/Site:

Vendor ID:

County District: ESC Region: School Year:

Perkins V: Strengthening Career & Technical Education for the 21 <sup>st</sup> Century Act			
<program description=""></program>	Help		
SC7777 – Comprehensive Local Needs Assessment			

#### Purpose

One of the most significant changes introduced in the Strengthening Career and Technical Education for the 21st Century Act (Perkins V) is the new comprehensive local needs assessment (CLNA).

The law states, "To be eligible to receive financial assistance under this part, an eligible recipient shall— (A) conduct a comprehensive local needs assessment related to career and technical education and include the results of the needs assessment in the local application submitted under subsection (a); and (B) not less than once every 2 years, update such comprehensive local needs assessment."

#### Part 1: Student Performance

In this section, LEAs must evaluate their learners' performance on federal accountability measures in the aggregate and disaggregated by race, gender, migrant status, and special population groups.

1.1. Which Perkins performance accountability indicator targets are you meeting and not meeting at the LEA, Career Cluster and/or program of study levels?

1.2. How are learners in you CTE programs performing on accountability indicators in comparison to non-CTE learners? What are potential explanations for these differences?

1.3. How are learners from each special population performing in your CTE programs in comparison to students without identified special needs at LEA, Career Cluster, and program of study levels?

1.4. How are learners from different genders, races and ethnicities performing in your CTE programs at the LEA, Career Cluster and program of study levels?

Back

**Printable Version** 

Form Status:	<selection_< th=""><th>Process&gt;</th><th colspan="3">Form ID: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX</th></selection_<>	Process>	Form ID: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX		
EXAS EDUCATION AGENCY SAS#: XXXXXXXX	Organization: Campus/Site: Vendor ID:	County Dist ESC Region: School Year:	rict:		
Perkins V: Streng	gthening Career & Technical E	ducation for the 21 <sup>st</sup> Centu	ry Act Instructions		
	_	n Description> ive Local Needs Assessment	Help		
Part 2: Labor Market	Alignment				
n this section, the law requires LEAs nd in the future.	to evaluate the alignment between programs	offered and the labor market needs of the l	ocal area, state and/or region—now		
2.1. What industries are projected to state-determined definition of "In-de	grow the most in your state, region or local an emand" and "high-wage"?	rea in the short, medium and long term? W	hich of these occupations meet a		
2.2. How do your CTE program enrol obs and in-demand occupations?	Iments match projected job openings in the st	ate, region or local area? Where are the big	ggest gaps, particularly in high-wage		
2.3. To what degree do your CTE pro region? Where are there gaps?	grams of study offerings expose learners to al	l the high-skill, high-wage and in-demand i	ndustry sectors or occupations in you		

### Part 3: Programs of Study/Size, Scope, and Quality

In this section, the law requires LEAs to evaluate whether their programs meet the core elements required for a state-approved program of study as well as meet the state's definition of size, scope and quality.

3.1. To what degree do your CTE programs have intentional course sequences that begin with introductory content and progress to more occupationally specific content?

3.2. What is the involvement of secondary partners, postsecondary partners and employer/industry partners in the development, implementation and phasing out/closure of CTE programs of study?

3.3. How many TEA approved statewide or regional programs of study are currently offered to students in your district?

3.4. How do the number of programs of study offered compare to number of students who could potentially be served, and to labor market needs?

Form Status:	<selection_proc< th=""><th>cess&gt; Form</th><th colspan="2">Form ID: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX</th></selection_proc<>	cess> Form	Form ID: XXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXXX	
EXAS EDUCATION AGENCY SAS#: XXXXXXXX	Organization: Campus/Site: Vendor ID:	County District: ESC Region: School Year:		
Perkins V: Strer	ngthening Career & Technical Edu	ication for the 21 <sup>st</sup> Century Act	Instructions	
	-	Description> e Local Needs Assessment	Help	
Part 4: Recruitment,	, Retention, and Training of C	TE Educators		
In this section, the law requires LEA development, with particular	s to assess and develop plans to improve the quality	y of their faculty and staff through recruitment,	retention and professional	
4.1. To what degree do you offer re experiences at improving student of experiences at improving st	egular, substantive professional development oppor outcomes?	tunities for faculty, staff and administrators? Ho	ow effective are these	
4.2. What processes are in place to	induct and retain faculty and staff? Are these proce	sses efficient and effective, especially for individ	uals coming from industry?	
4.3. To what degree are faculty tea	ching your programs adequately credentialed and h	ave adequate workplace experience in the prog	ram area?	

## Part 5: Improving Equity and Access

In this section, the law requires LEAs to evaluate their progress in providing equal access to CTE programs, particularly CTE programs that lead to strong positive outcomes for learners, and in providing CTE in ways that maximize success for special populations, especially in programs leading to high-skill, high-wage or indemand industry sectors or occupations.

5.1. How and when do you recruit students into your programs? Are you reaching all students, including students from groups identified as special populations? Consider how and when you should conduct outreach.

5.2. What barriers exist that prevent certain populations of learners from accessing your programs (such as prerequisites/admission requirements, transportation, and scheduling)? Which student groups are most affected by these barriers?

5.3. To what degree are student groups taking part in CTE at disproportionate levels, in comparison to the overall student population, Career Cluster and program levels? Which groups are over and underrepresented?

### Part 6: Summary

To conclude the CLNA process, LEAs will merge the analyses outlined above into one set of findings, and engage stakeholders in setting an action plan for addressing these needs, including deciding which programs and activities to prioritize for funding in their Perkins V local application. 6.1. What is your overall mission and vision for CTE programming?

Form Status:	m Status: <selection_process> Fo</selection_process>			
EXAS EDUCATION AGENCY SAS#: XXXXXXXX	Organization: Campus/Site: Vendor ID:	ES	unty District: C Region: hool Year:	
Perkins V: Streng	thening Career & Technic	al Education for the 21 <sup>st</sup>	Century Act	Instructions
	-	ram Description> ensive Local Needs Asse	essment	Help
6.2. What are your top (three-five) p	riorities over the next four-years?			
6.3. Which of your CTE programs are transforming or retiring the less suc	e the strongest? The weakest? What is y cessful?	our plan for continuing to support o	or expanding the stronger p	rograms and
6.4. Which performance indicators a	re you struggling with the most? What s	strategies do you plan to employ to	address those needs?	

# Part 7: Certification and Incorporation

Only the legally responsible party may submit this report.

#### Certification and Incorporation Statement

has authorized r applicable Feder submitted. It is u	ne as its representative al and State laws and	e to submit this data regulations; applica licant that this appl	a. I further tion guide	certify that elines and in	any ensuing pro structions; provi	ogram and ac sions, assurar	dge, correct and that the organization named above ctivity will be conducted in accordance with all nces, and certification requirements; and the schedu Texas Education Agency or renegotiated to	
Authorized Of	ficial							
First Name:		Initial:	Last Na	ame:		Title:		
Telephone:		Ext:	Fax:					
E-Mail:					Conf	irm E-Mail:		
Submitter Info	ormation							
First Name:					Last Name:			
Approval ID:					Submit Date	and Time:		

TEA Use Only			
Status			

Certify and Submit