

Annual Alternative Education Survey

As Required by T.C.A. §49-6-3404



Alternative Education as defined by the Advisory Council for Alternative Education:
 “A nontraditional academic program designed to meet the student’s educational, behavioral and social needs.”

T.C.A. § 49-6-3402 mandates “at least one (1) alternative school shall be established and available for students in grades seven through twelve (7-12) who have been suspended or expelled.” T.C.A. § 49-6-3404 also requires that the Department of Education submit a report annually on the status of alternative education in Tennessee. In order to gain a better perspective, the following survey was developed. The information provided to the department will be reported to the Governor, both education committees of the General Assembly, and the State Board of Education. Please complete the following survey and return it to the address listed below.

School System:	Date:
District Alternative Education Coordinator:	Email Address:
Phone Number:	Fax:
Address:	City and Zip Code:
Person Completing Report (if different from above):	Phone Number:

ALTERNATIVE SCHOOL(S) OR PROGRAM(S) THAT OPERATED DURING THE SCHOOL YEAR 2014-2015:

(For each alternative school/ program, please identify the principal or program coordinator and provide an email address and phone number for each. Please do not include ISS.)

Alternative School/Program Name	Principal/ Program Coordinator	Email Address of Principal/ Program Coordinator	Phone Number for School/ Program

PARTICIPATION (TOTAL FOR ALL SCHOOL(S)/PROGRAM(S) IN YOUR DISTRICT):

Number of alternative school(s)* :	
Number of alternative education program(s)** :	
Total number of classroom(s) serving alternative education students:	
Total number of students served during the 2014-2015 school year:	
District’s total capacity (seats):	
Average length of placement (stay) in an alternative setting (number in days):	
Number of certificated staff working in an alternative school/program:	
Number of non-certificated staff assigned to an alternative education setting:	
Has an alternative education advisory committee been established at the district level?	YES <input type="checkbox"/> NO <input type="checkbox"/>

* **A facility dedicated solely to alternative education**

** **An alternative education program within a school**

PRIMARY REASON FOR STUDENT ASSIGNMENT (RANK 1, 2, 3, AND 4):

Zero tolerance offense	
Disruptive behavior	
Need for alternative education strategy	
Other (please describe in space given)	

SCHOOL/ PROGRAM ELEMENTS PRESENT IN YOUR DISTRICT (CHECK ALL THAT APPLY):

Afterschool or other extended day programming	
Individual behavior plans	
Character education	
Credit recovery	
Distance learning	
Dropout prevention strategies	
Individual and/or family counseling	
Individual learner plans	
Juvenile court partnership	
Life skills	
Mental health partnership	
Screening committee (for alternative education placements)	
Service learning	
Student drug testing	
Technology-based instruction	
Transition services (a formal plan)*	
Use of level system or similar behavior support mechanism that encourages appropriate behavior	
Other (please describe in space given)	

***Mandated requirement under Tenn. Code Ann. §49-6-3402**

SPECIAL GROUPS SERVING THE ALTERNATIVE SCHOOL/PROGRAM (CHECK ALL THAT APPLY)

ELL Teachers	
School Counselors	
Special Education Teachers	
Social Workers	
School Resource Officers	
Teaching Assistants	
Other (please describe in space given)	

1. What models or curriculum are you currently implementing in your alternative education classroom(s)?
2. What technical assistance opportunities would help you as an alternative educator?
3. What is the greatest challenge facing your alternative education school(s)/programs(s)?
4. Additional comments/feedback that would be appropriate for the alternative education report to the General Assembly?

Please return all forms no later than **June 30** to:
Artina.Fossett@tn.gov or 615-741-3248