# DPI logoEVALUATING YOUR ACP PROGRAM

January 2019

Question Bank for Building-Leader Data Collection

*Produced in partnership with the Wisconsin Evaluation Collaborative at the University of Wisconsin–Madison.*

The following Question Bank includes items that can be used in surveys or focus groups with building leaders to gain more information about your district’s ACP program. Please see the Guidance Document for more information about using these questions effectively.

The questions are divided into different topic areas. Question formats are indicated as follows:

**(S) items** are appropriate for use in surveys and can be answered by indicating yes/no, a scale response, or selecting from a list of answers.

**(OE) items** are open-ended survey items and require a text response, and consequently take more time to answer and to analyze.

**(FG) items** are more appropriate for a focus group.

Many survey (S) items can also be used as “starter” questions in focus groups followed by the relevant (OE/FG) questions which can be used to probe more deeply for additional information.

## General Note

Depending on how far along your ACP program is, you may want to start with a high level survey to gauge areas of need using questions 1-11. If you have asked these questions already or want more in-depth information, you may want to ask some of the subsequent questions. Keep in mind that open-ended questions will take longer for respondents to complete and for surveyors to analyze. Some questions may seem repetitive - there may be a slight difference in the intention of the question, so select the item that best meets your needs.

## Topic area: Implementation and Awareness

1. How aware are you of your district’s vision for a Career & College Ready / ACP culture?
   1. Very aware
   2. Somewhat aware
   3. Not very aware
   4. Not at all aware
2. In general, engagement with families around ACP in my school is… (S)
   1. Very strong
   2. Somewhat strong
   3. Somewhat weak
   4. Very weak
3. Collaboration with local postsecondary institutions near my school is... (S)
   1. Very strong
   2. Somewhat strong
   3. Somewhat weak
   4. Very weak
4. Collaboration with local businesses near my school is… (S)
   1. Very strong
   2. Somewhat strong
   3. Somewhat weak
   4. Very weak
5. Collaboration with local community organizations near my school is… (S)
   1. Very strong
   2. Somewhat strong
   3. Somewhat weak
   4. Very weak
6. Parental knowledge of my school’s ACP implementations is… (S)
   1. Very strong
   2. Somewhat strong
   3. Somewhat weak
   4. Very weak
7. School staff engagement around ACP is... (S)
   1. Very strong
   2. Somewhat strong
   3. Somewhat weak
   4. Very weak
8. The local business community’s knowledge of my school’s ACP implementation is… (S)
   1. Very strong
   2. Somewhat strong
   3. Somewhat weak
   4. Very weak
9. Who provides the leadership “in charge” of ACP in your school? (check all that apply) (S)
   1. Principal and/or AP
   2. ACP coordinator
   3. ACP team
   4. School counselor(s)
   5. CTE teacher(s)
   6. There is no one “in charge” of ACP in my school
10. What is the regular role of the ACP coordinator?
    1. Full-time ACP coordinator
    2. School counselor
    3. Principal
    4. CTE Coordinator or teacher
    5. Teacher other than CTE
    6. Other building admin
    7. Other (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
11. What are the regular roles of the ACP team members? Check all that apply. (S)
    1. Principal and/or AP
    2. School counselor(s)
    3. CTE Teacher(s)
    4. Teacher(s) other than CTE
    5. Parent(s)
    6. Community member(s)
    7. Other (please specify) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
12. How are you delivering PD around ACP? What PD? When? To Whom? Who’s delivering it? (OE or FG)
13. How do you inform families of your ACP program? (S) *select all that apply*
    1. Newsletter
    2. Social Media
    3. Email
    4. School Website
    5. District Website
    6. Other (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
14. Describe your collaboration with local businesses / employers. (OE or FG)
15. Describe your collaboration with local community organizations around ACP. (OE or FG)
16. What are your strategies for building and maintaining more lasting connections with community partners? (OE or FG)
17. Do you have any sort of evaluation process or continuous improvement process for your school’s ACP plan? In other words, how do you know whether your ACP is “working”? Y/N (S)
    1. If yes, please describe (OE or FG)

## Topic area: Equity

1. Do you feel that the ACP program is supporting the needs of students in your building? Y/N (S)
   1. If not, are there particular areas in which you feel students’ needs are not being supported? (awareness, involvement, communication, academic supports, family/social supports, etc.) (OE or FG)
2. Do you think ACP is being delivered equitably to all students? Y/N (S)
   1. If not, please explain (OE or FG)
3. In what ways is ACP NOT being delivered fairly/equitably to students? (OE or FG) (*This question is phrased in a way that may help identify gaps and/or create an opportunity to gather unanticipated information*).
4. What specific actions can be taken to address any inequities? (check all that apply) (S)
   1. Help with transportation to work-based learning or other opportunities.
   2. Additional opportunities for one-on-one counseling, advising, mentoring
   3. More support and information around college access, financial aid, etc.
   4. Increased communication about ACP-related opportunities and events
   5. Tutoring
   6. Other (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
5. Is there reliable access to up-to-date technology (Wifi, Internet connections, online access to college and career websites and tools, desktops, laptops, tablets, etc.) to support ACP activities? Y/N (S)
6. Are there sufficient opportunities for activities like work-based learning? Y/N (S)

## Topic area: Success and challenges

1. What would you consider your biggest success(es)? Challenge(s)? (OE or FG)
2. What barriers have you overcome (and how) to be able to implement ACP? (OE or FG)
3. What else would you like to tell us about your ACP program? (OE or FG)
4. Do you feel that the ACP program is supporting the needs of your students? Y/N (S)
   1. If not, are there particular areas in which you don’t feel your students’ needs are supported? (awareness, involvement, communication, etc.) (OE or FG)
5. Do you think ACP is being delivered equitably to all students? Y/N (S)
   1. If not, please explain. (OE or FG)
6. In what ways is ACP NOT being delivered fairly/equitably to students? (OE or FG)
7. What specific actions would most effectively address any inequities? (S) (check all that apply)
   1. Help with transportation to work-based learning or other opportunities.
   2. Additional opportunities for one-on-one counseling, advising, mentoring
   3. More support and information around college access, financial aid, etc.
   4. Increased communication about ACP-related opportunities and events
   5. Other (please specify)\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_
8. Please indicate the availability of the following elements related to work-based learning activities for students: (S)
   1. Sufficient number of available business placements? (y/n)
   2. Student awareness of work-based learning opportunities (y/n)
   3. Promotion of work-based learning opportunities (y/n)
   4. Restrictions on participating in work-based learning (y/n)



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Academic and Career Planning

https://dpi.wi.gov/acp

January 2019

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