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**MSA REPRESENTATIVE VISITOR STANDARDS REPORT**

**NAME OF SCHOOL:**

**COOPERATING ACCREDITATION AGENCY:**

**VISIT DATES:**

**MSA REPRESENTATIVE:**

**Please complete the report indicating your assessment of the school’s adherence to each of the 5 MSA Standards. In order for our Staff, Advisory Committee, and Commissions to make a valid assessment, we ask you to make comments for each Standard and include positive feedback as well as recommendations.**

**Please reference your training materials for full definitions, but below are definitions for any corrective actions the visiting team/Cooperative Agency may be asking the school to complete:**

**Recommendation – Any area in which the visiting team has made suggestions for improving an area in the school or its operations**

**Monitoring Issue – Any corrective action that is required but the school has already began or has included in the Continuous School Improvement Plan.**

**Stipulation – Any corrective action that is a glaring omission in the school’s operations or in the meeting of the Standard/Indicators and is NOT found in the Continuous School Improvement Plan.**

**Should you feel that the school does not meet a Standard, please provide a reason and reference the Standard Indicator(s).**

**If you should have any questions or concerns, please reach out to the Cooperative Agency Liaison – Daniel Rufo at drufo@msa-cess.org**

**Once you have completed the report please submit it to** **reports@msa-cess.org**

**FOUNDATIONS STANDARD FOR ACCREDITATION**

**Observations, Comments, Recommendations, Monitoring Issues, OR Stipulations:**

|  |  |
| --- | --- |
|  | The MSA Representative’s assessment is that the school meets the Standard |

|  |  |
| --- | --- |
|  | The MSA Representative’s assessment is that the school **does not meet** the Standard for the reason(s) stated below.  |
|  | **REASON:** |

**GOVERNANCE AND ORGANIZATION STANDARD FOR ACCREDITATION**

**Observations, Comments, Recommendations, Monitoring Issues, OR Stipulations:**

|  |  |
| --- | --- |
|  | The MSA Representative’s assessment is that the school meets the Standard |

|  |  |
| --- | --- |
|  | The MSA Representative’s assessment is that the school **does not meet** the Standard for the reason(s) stated below.  |
|  | **REASON:** |

**STUDENT WELL-BEING STANDARD FOR ACCREDITATION**

**Observations, Comments, Recommendations, Monitoring Issues, OR Stipulations:**

|  |  |
| --- | --- |
|  | The MSA Representative’s assessment is that the school meets the Standard |

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| --- | --- |
|  | The MSA Representative’s assessment is that the school **does not meet** the Standard for the reason(s) stated below.  |
|  | **REASON:** |

**RESOURCES STANDARD FOR ACCREDITATION**

**Observations, Comments, Recommendations, Monitoring Issues, OR Stipulations:**

|  |  |
| --- | --- |
|  | The MSA Representative’s assessment is that the school meets the Standard |

|  |  |
| --- | --- |
|  | The MSA Representative’s assessment is that the school **does not meet** the Standard for the reason(s) stated below.  |
|  | **REASON:** |

**TEACHING AND LEARNING STANDARD FOR ACCREDITATION**

**Observations, Comments, Recommendations, Monitoring Issues, OR Stipulations:**

|  |  |
| --- | --- |
|  | The MSA Representative’s assessment is that the school meets the Standard |

|  |  |
| --- | --- |
|  | The MSA Representative’s assessment is that the school **does not meet** the Standard for the reason(s) stated below.  |
|  | **REASON:** |

**Do you feel the school's compliance with the requirements of the cooperative's protocol serve as an equivalency for MSA requirements for accreditation?**

**If not what additional information should the school be required to submit?**

**Overall Comments:**

**SIGNATURE OF MSA REPRESENTATIVE DATE**

***Thank you for your service to Middle States Association Commissions on Elementary and Secondary Schools and their partner associations.***