Please email your completed building plan to <u>Susan McCoard</u> by **September 2**

Elementary Grades 3-5 Building Plan

WABS After School STEM Academy Building Plan

| School Name: | |
|--|--|
| Administrator who will oversee ASSA at your school: | |
| Additional staff to receive communications about ASSA: | |

WABS ASSA Calendar

Indicate, using the calendar below, the dates of your 4 planned ASSA sessions. Each session is 90 minutes long and should be held on 4 different weeks. Your sessions should be at the same time of day, and on the same day of the week, i.e. Wednesdays at 4:15pm. The fall window is **October 24 - December 9.**

| | Mon | Tue | Wed | Thu | Fri |
|----------|-----|-----|------------------------------------|------------------------------------|------------------------------------|
| October | 24 | 25 | 26 | 27 | 28 |
| 0 | 31 | | | | |
| | | 1 | 2 | 3 | 4 |
| er | 7 | 8 | 9 | 10 | 11 Veteran's Day No School |
| November | 14 | 15 | 16 | 17 | 18 |
| ž | 21 | 22 | 23 Thanksgiving Break | 24 Thanksgiving Break | 25 Thanksgiving Break |
| | 28 | 29 | 30 | | |
| December | | | | 1 | 2 |
| Dece | 5 | 6 | 7 | 8 | Half day Early Release |

| Action Item | Responsibility | | |
|--|---|--|--|
| Each school participating in ASSA must designate one school | Indicate who your WABS ASSA Coordinator will be: | | |
| staff member to coordinate with WABS and supervise over | | | |
| the students and volunteer. The Volunteer from WABS will | Email address: | | |
| be teaching, providing the curriculum and materials. | | | |
| The coordinator will: Register your school with WABS here: https://www.wabsalliance.org/?ff_landing=25 Attend a 1-hour training provided by WABS (1 clock hour) Recruit, and host planning meetings regarding ASSA at your school There is a 24 student maximum per school Arrange / reserve a classroom at the school Support volunteer with building access | Is your coordinator an: Administrator Teacher ParaEducator | | |
| Verify volunteer has the supply kit (in October) | | | |
| Supporting the volunteer with activities if needed | | | |
| Ensure your volunteer has obtained your necessary | | | |
| supplies (provided by WABS) by October 24. | | | |
| Help address behavior or technical issues as needed | | | |
| Compile your list of students registered prior to start | | | |
| date and send to mailto:SMcCoard@everettsd.org | | | |
| Indicate which grade levels you will be including in your ASSA sessions at your school. | ☐ Grade 3 ☐ Grade 4 ☐ Grade 5 | | |

If you have specific questions about the After School STEM Academy, please email Kyleigh Sapp directly, at kyleigh@wabsalliance.org.

If you have any questions about the building plan, please contact Susan McCoard at x5280 or email SMcCoard@everettsd.org.