

2016 Wisconsin Post School Outcomes Survey - Assurances and Stipend Schedule

1. ASSURANCES

Interviewing Preparation

- Prior to first Interview

The district will complete and return the following documents (page 2 of this document) to Jenny Jacobs.

- **Assurance Form** – Annually signed by Director of Special Education/Pupil Services and each district interviewer.
- **W-9** (Request for Taxpayer Identification Number and Certification) prior to beginning interviews, completed by each interviewer once, and returned prior to the first interview. The W-9 only needs to be submitted the first year of interviewing.

- May – June 2016

Participate in scheduled interviewer training the first year of interviewing, thoroughly prepare before beginning the interviews. Participate in a refresher course if desired.

Interviewing

- June 1 to Sept 15, 2016

Conduct interviews during survey window of time.
Make a minimum of 5 contacts per former student.

Document responses to interview attempts (date, time, contact type, notes, action taken).

After Interviews have been Completed

- June 30 to Sept 15, 2016 As a district, report to Jenny Jacobs when all interviews/attempts have been completed.

Confidentiality

- Only trained interviewers may conduct the interviews, and individual information obtained from the interviewee will not be shared with anyone else.
- Usernames and Passwords are non-transferrable and may only be used by the person to whom the password has been assigned.

2. METHOD AND DATES OF INTERVIEWER TRAINING and REFRESHER OPPORTUNITIES

- a. **Required for new interviewers only.** The interviewer training takes approximately 90 minutes and must be completed prior to beginning the interviews the first time. **Interviewers must select one of the following options and register on www.witig.org by May 20 to participate in one** of the group trainings via a **ZOOM** conference call:

- | | |
|---|---|
| <input type="checkbox"/> Tuesday May 17, 2016 3:30 – 5:00 p.m. | <input type="checkbox"/> Monday, June 6, 2016 9:00 – 10:30 a.m. |
| <input type="checkbox"/> Tuesday May 24, 2016 3:30 – 5:00 p.m. | <input type="checkbox"/> Wednesday June 8, 2016 8:30 – 10:30 a.m. |
| <input type="checkbox"/> Thursday May 26, 2016 3:00 – 4:30 p.m. | <input type="checkbox"/> Thursday June 16, 2016 1:00 -2:30 p.m. |
| <input type="checkbox"/> Tuesday May 31, 2016 3:00 – 4:30 p.m. | <input type="checkbox"/> Monday, June 20, 2016 10:00 – 11:30 a.m. |

- b. **Elective for previously trained interviewers.** Two **refresher ZOOM conference calls** will be offered. The course is unpaid and only for those who participated in interviewer training during the past few years. It will cover any changes to the survey and provide an opportunity to ask questions.

- May 25th from 3:30 pm - 4:00 pm
- June 2nd from 2:30 - 3:00 pm

3. PAYMENT SCHEDULE

- a. Interviewers are paid directly from CESA 11 and are paid as follows in one or two payments:

- **Interviewer Training and Interviews completed by June 30, 2016 - paid in July**
 - One (1) Interviewer training @ \$75.00 – ONLY paid for the first year's training, though you may join any of the scheduled training sessions or refresher sessions
 - ___ Number of successfully completed interviews @ \$20.00 (no payment for unsuccessful surveys)
- **Interviews July 1 - September 12, 2016 - paid in October**
 - ___ Number of successfully completed interviews @ \$20.00 (no payment for unsuccessful surveys)

Assurances: The District DSE/PS must sign the top part of this form, and each interviewer must sign the bottom of the form. Interviewer signatures may all be on one page or individual pages and can be scanned and sent as an attachment to Jenny Jacobs at jennyj@witig.org. **W-9: Interviewers only need to submit a W-9 once. If one is on file, a second one does not need to be completed.** The W-9 needs to be returned via U.S. Mail to Jenny Jacobs via U.S. Mail @ CESA 7, 595 Baeten Rd., Green Bay, WI 54304.

District: _____ **Date Received** (completed by Jenny Jacobs upon receipt): _____

Director of Special Education(DSE)/Pupil Services(PS) - one signature per district:	
<input type="checkbox"/> I have read the above assurances. <input type="checkbox"/> I understand that the district has agreed to complete the 2016 Indicator 14 Post School Outcomes interviews on behalf of the district. <input type="checkbox"/> I will promptly contact Jenny Jacobs, PSO Coordinator, if the district is unable to conduct interviews as anticipated.	
Name/Title _____	Date _____

Each Interviewer - one signature per interviewer; add additional names/pages as needed:

- I have read the above assurances.
- I understand that I have agreed to complete the 2016 Indicator 14 Post School Outcomes interviews on behalf of the district.
- I will promptly contact the district Director of Special Education/Pupil Services if I am unable to conduct interviews as anticipated.
- I will contact Jenny Jacobs, PSO Coordinator, with any questions I have about the interviews or interviewing process.

Name/Title	Signature	Check if Interviewer training needed	Date
Name/Title	Signature	Check if Interviewer training needed	Date
Name/Title	Signature	Check if Interviewer training needed	Date
Name/Title	Signature	Check if Interviewer training needed	Date
Name/Title	Signature	Check if Interviewer training needed	Date

Please contact Mary Kampa or Jenny Jacobs if you have any questions.

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