**Autism Model Program Site Application**

**Purpose:** To leverage existing infrastructure and resources, including the Autism Support Team (AST), to increase capacity in the implementation of an effective autism program to improve outcomes for students with Autism Spectrum Disorder (ASD).

**Directions:**

* Complete the questions below and submit to [asdteam@dpi.nc.gov](mailto:asdteam@dpi.nc.gov) by **September 22, 2023**.
* To support completion of this application, you will utilize this [survey](https://docs.google.com/forms/d/1FG8UYdSLjGxgre3-9wizJPUmcWsjQ4WcsujvKL8fchM/copy) to collect responses from those who oversee and support implementation of evidence-based programming for students with ASD. It is important to gather this information from a representative sampling including but not limited to the members of your Autism Support Team and your EC Leadership Team.

Directions for downloading and distributing the survey:

* + You must be in a Google account to complete the following steps:
    - Click the [survey](https://docs.google.com/forms/d/1FG8UYdSLjGxgre3-9wizJPUmcWsjQ4WcsujvKL8fchM/copy) to make a copy. \*Note: This copy is editable in order for you to create an associated spreadsheet to collect your results.
    - Open your copy of the survey and click on the purple “Send” button to retrieve a link to send to your team.
    - To make a spreadsheet, open your copy, click on “Responses” at the top of the banner, click on the green icon on the upper right and select “Create a new Spreadsheet”. This sheet will be created in your Google Drive.
    - \*Note: You may receive the message “Request edit access”. If so, click to request. We will monitor and grant access as the requests come through.
  + If your PSU does not utilize Google, you can access the survey questions [here](https://drive.google.com/file/d/1ZY9_Q-bcmImDSFam384Y4prENqwNWq1n/view?usp=drive_link) to distribute and collect the responses in a manner that is most efficient for your team (i.e.: SurveyMonkey, Word document, Excel document).
  + **Survey results are required to be submitted with your application.**

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1. Describe the resources currently used and potentially available to support your district’s autism program.
2. Which personnel/ professional roles are represented on your AST?
3. In addition to your AST members, what other personnel/ professional roles within your PSU would you identify for team commitment to this initiative?
4. Does your PSU Exceptional Children Leadership Team have representation from the AST? If so, please describe.
5. List any other NCDPI initiatives in which your PSU is involved (NCSIP, MTSS, the ARISE project, Project AWARE, etc).
6. Discuss how the AMPS initiative will align with other PSU goals and initiatives.
7. What data does your team routinely analyze to inform your Autism Program?
8. Based on the PSU’s survey responses collected, what are the strengths of the PSU regarding effective implementation efforts of programming for students with ASD?
9. Based on the PSU’s survey responses collected, what are the needs of the PSU regarding effective implementation efforts of programming for students with ASD?
10. What are the challenges/barriers to addressing the needs you identified in the previous question?
11. What is your compelling why for adopting this work in your PSU?

1. Is there any additional information that the selection team should consider when reviewing your PSU’s application?

**Please have individuals who participated in completing the application sign below and indicate their role. The signatures of the Superintendent and EC Director are required for submission.**

| **Signature** | **Role** |
| --- | --- |
|  | **Superintendent** |
|  | **EC Director** |
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