

Annual Update Crosswalk

Original GOAL from prior year LCAP: Section 2, Column 2	Related State and/or Local Priorities: 1 ___ 2 ___ 3 ___ 4 ___ 5 ___ 6 ___ 7 ___ 8 ___ Local Section 2, Column 9
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Goal Applies to: Schools: Section 2, Column 4	Applicable Pupil Subgroups: Section 2, Column 3
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Expected Annual Measurable Outcomes: Section 2, Column 6 Also includes metrics	Actual Annual Measurable Outcomes:
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Planned Actions/Services

Budgeted Expenditures

Actual Actions/Services

Estimated Actual Annual Expenditures

Section 3A and 3B, Column 3	Section 3A and 3B, Column 6
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Scope of service: Section 3A and 3B, Column 4 Specify school sites, grade spans, schoolwide or districtwide services	Scope of service: Section 3B, Column 6
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OR: <input type="checkbox"/> ALL <input type="checkbox"/> Low Income pupils Section 3B, Column 3 <input type="checkbox"/> Foster Youth <input type="checkbox"/> R _____ <input type="checkbox"/> Other Subgroups: (Specify) _____	OR: <input type="checkbox"/> ALL <input type="checkbox"/> Low Income pupils _____ <input type="checkbox"/> Foster Youth _____ <input type="checkbox"/> Other Subgroups: (Specify) _____
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Scope of service: Section 3A and 3B, Column 4	Scope of service: Section 3B, Column 6
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OR: <input type="checkbox"/> ALL <input type="checkbox"/> Low Income pupils _____ <input type="checkbox"/> Foster Youth <input type="checkbox"/> R Section 3B, Column 3 <input type="checkbox"/> English Learners <input type="checkbox"/> Other Subgroups: (Specify) _____	OR: <input type="checkbox"/> ALL <input type="checkbox"/> Low Income pupils _____ <input type="checkbox"/> Foster Youth _____ <input type="checkbox"/> Other Subgroups: (Specify) _____
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What changes in actions, services, and expenditures will be made as a result of reviewing past progress and/or changes to goals?

Section 2 Crosswalk

GOAL: Section 2, Column 2		Related State and/or Local Priorities: 1 ___ 2 ___ 3 ___ 4 ___ 5 ___ 6 ___ 7 ___ 8 ___ COE only: 9 ___ 10 ___ Local : Specify _____	
Identified Need : Section 2, Column 1	Section 2, Column 4	Section 2, Column 9	
Goal Applies to: Schools: _____ Applicable Pupil Subgroups: _____	Section 2, Column 3		
LCAP Year 1: 2015-16			
Expected Annual Measurable Outcomes: Section 2, Column 6 for LCAP Year 2 Also includes metrics	Pupils to be served within identified scope of service		
Actions/Services Section 3A and 3B, Column 3	Scope of Service Section 3A, Column 4 Specify school sites, grade spans, schoolwide or districtwide	Section 2, 3A and 3B, Columns 3	Section 3A and 3B, Column 6
	ALL OR: Low Income pupils ___ English Learners Foster Youth ___ Redesignated fluent English proficient Other Subgroups: (Specify) _____	ALL OR: Low Income pupils ___ English Learners Foster Youth ___ Redesignated fluent English proficient Other Subgroups: (Specify) _____	
	ALL OR: Low Income pupils ___ English Learners Foster Youth ___ Redesignated fluent English proficient Other Subgroups: (Specify) _____		
			Budgeted Expenditures