





TOP-2



Turnaround Option Plan – Step 2(TOP-2) Charter (CH)

[District] [School Name]

Due: October 1 for Cycle 1 or January 31 for Cycle 2-4

Form Number TOP-2, CH, incorporated in Rule 6A-1.099811, F.A.C., effective August 2023

Turnaround Option Plan – Step 2 (TOP-2) Charter

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The purpose of this document is to guide districts	to develop a plan for implementa	ation of the turnaround option
Charter (CH).		

Directions

Districts shall complete this Step 2 form for each school for which the district is selecting CH. This plan must be submitted by the district to the Regional Executive Director (RED) for review and feedback before submitting it to BSI. The plan must be approved by the local school board. This completed form must be signed by the superintendent or authorized representative and emailed to BSI@fldoe.org no later than October 1 if this is Cycle 1 or January 31 if this is Cycle 2-4. The subject line of the email must include district name, school name and TOP-2(CH).

•	TOP-2(CH).
School	
In the box	s below, identify the name and MSID number of the school that will be supported through CH.
	School Name/ MSID Number
CH Assu	rances
The d	istrict must agree to ALL of the following assurances by checking the boxes below.
A	Assurance 1: Close and Reopen School
	The district shall close the school and reopen it as a charter or multiple charters.
Descr	ription of how the district will address Assurance 1: Close and Reopen School



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Assurance 2: Contracting with Charter Organization

☐ The district shall enter into a contract with the charter organization following established district policies and procedures for contracting with external providers.
Description of how the district will address Assurance 2: Contracting with Charter Organization
Assurance 3: Selecting a Successful Organization
☐ The district shall select a charter organization that has a record of school improvement in turning
around schools that are low-performing with students of similar demographics or a charter school with
record of high performance.
Description of how the district will address Assurance 3: Selecting a Successful Organization
Assurance 4: Selecting Leadership
☐ The district shall ensure the principal or school leader has a successful record and the qualifications to support the student population being served.
Description of how the district will address Assurance 4: Leadership
Assurance 5: Selecting Instructional Staff
☐ The district shall ensure that instructional personnel with VAM ratings or district evaluations that are
below effective pursuant to section 1012.34. F.S., shall not be staffed at the school.



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Description of how the district will address Assurance 5: Instructional Staff	
Acknowledgement	
Check the box that applies to the district selection of CH.	
☐ For Cycle 1, the district acknowledges that the plan and the district school board approved CH coro the Department by October 1.	tract is due
☐ For Cycle 2-4, the district acknowledges that the plan and proposed CH contract are due to the Department by January 31 and the district school board approved CH contract is due to the Department by May 1 mplementation of the plan.	
Name and title of person responsible for completing and submission of the TOP-2	
Contact information: email, phone number	
Date submitted to the Bureau of School Improvement	
Superintendent Signature (or authorized representative)	
Local School Board Chair Signature (or authorized representative)	
Date local school board approved	

