



YPS Vendor/Partner Evaluation Form

An evaluation of partnerships throughout the District

Evaluator Name: Mr. Edward DeChent, Principal Dr. Matel H. Hassan, AP Role: School Administrators

General Information			
Grant Name		Contract Amount	
Partner/Partner	Virtual Enterprise International	Date of Service(s)	2024-2025 school year
School Site(s)	Roosevelt High School Early College Studies		

1. Were there three quotes for vendor services?
- YES (if yes, please list vendors below)
 - NO (if no, please explain)
 - N/A

Explain: This is the approved vendor by Career and Technical Education Department NYS CTE, and is a sole source. Contact Information: Michael LaMastra

2. In what ways does this vendor/partnership align to our Districts mission/vision/strategic plan?
Their vision is that all young people must have an opportunity to learn and succeed regardless of zip code. VE provides a hands on industry driven curriculum.

3. What was the primary goal of the partnership? (Fill the option(s) that most closely relates to the main objective of the partnership.)

- To provide PD to a certain population of the schools.
- To provide programmatic support to the schools.
- To provide tutoring or instructional support.
- To help to assess current practices.
- To connect the schools with other resources.
- To help to develop curriculum and activities for the district, school or classroom.
- To support mental and emotional health
- Other: _____

4. Were the specified goal(s) and objectives reached?
- YES
 - NO (if no, please explain) N/A

Explain: _____

5. Did this partner deliver on the expected agreement and outcomes?

YES

NO (if no, please explain)

Explain: _____

6. Did this partner supply appropriate materials and supplies necessary to accomplish goals and outcomes?

YES

NO (if no, please explain) N/A

Explain: _____

7. Did this partner provide adequate feedback and support?

YES

NO (if no, please explain) N/A

Explain: _____

8. Please complete the Vendor/Partner Assessment Criteria scale below and rank this partner on the following areas:

Vendor/Partner Assessment Criteria					
Criterion	(1) Ineffective	(2) Somewhat Ineffective	(3) Somewhat Effective	(4) Effective	(5) Highly Effective
Preparation: <i>Provides high-quality services to meet goals</i>					X
Competency: <i>Knowledge of craft</i>					X
Flexibility: <i>Willingness to change or compromise</i>				X	
Consistency: <i>Schedule & routine</i>					X

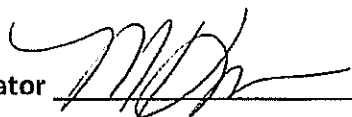
Organization: <i>Structured, orderly, & efficient use of time management</i>				X	
Professionalism: Interactions are cordial & respectful					
Overall Experience with partner					

9. Please indicate specifically how the vendor/partner impacted student achievement, leadership development or district operations. **Note: Please provide documentation and evidence of impact of vendor/partner services.**

Virtual Enterprises provides experiential learning through competitions with other high schools for business plans, video commercials, web design and product promotion and sales. Students assume leadership roles in a simulated company in the key areas of management, human resources, accounting, IT, sales and marketing.

10. Use the space below to provide any additional feedback you think would be helpful:

Virtual Enterprises allows us to partner with Sunny Farmingdale. Our students receive six credits for their work. Additionally, several components of Virtual Enterprises count towards the 54 – hour work based learning requirement.

Signature of Evaluator 
 Matel H. Hassan, EdD

Date: 11/8/2024

******* FOR PEER REVIEW ONLY *******

Vendor/Partner Peer Review Criteria					
Criterion	(1) Ineffective	(2) Somewhat Ineffective	(3) Somewhat Effective	(4) Effective	(5) Highly Effective
Impact: <i>Based on artifacts/evidence/ evaluation</i>					
Overall Experience with partner					

Peer Reviewer _____

Date: _____

Signature of Peer Reviewer _____

Date: _____