

## ADULT-SIS SELF-AUDIT PROCEDURES

All adult schools and centers are now using the Adult SIS as the sole means for collecting attendance. Each school is required to develop, implement, and document a self-audit plan. Your audit plan will be checked by the Internal Audit Branch when your school/center is audited. Auditing consists largely of checking source documents against the computer reports produced from those sources. Please keep in mind that you **must** have a registration form for every student who has attendance.

Each of the audit items listed below **must** be performed at the prescribed intervals. The results of each self-audited item should be recorded as indicated on the **"Monthly Self-Audit Test Record"**. If any item shows that major corrective action is required, the check should be repeated after corrective action has been taken the following month. **All self-audit documentation must be kept on file for three calendar years.**

**ITEM 1: MONTHLY ATTENDANCE / MARK  
PROCEDURE CHECK SHEET**

Verify that the *Attendance/Mark Procedure Check Sheet* has been completed, indicating the date on which each item was completed, initialed by the person who completed the task. File the *Attendance/Mark Procedure Check Sheet* in your *Attendance Notebook* under the proper school month.

**ITEM 2: WEEKLY ATTENDANCE FORM  
CHECK**

Each week, check ALL *Weekly Attendance Forms* and verify that ALL rosters have been signed and dated by the teacher. Check to make sure bubbled hours do not exceed the number of hours the class meets. File *Weekly Attendance Forms* in page order by week.

**ITEM 3: REGISTRATION FORM / STUDENT  
ATTENDANCE LIST MATCH**

Print a *Student Attendance List* for a random sample of at least 5% of your total number of sections. Verify that you have a *Registration Form* on file for each student on the list. This check should be performed twice each term.

**ITEM 4: ADD-ON NAMES SUPPORTED BY  
REGISTRATION FORMS**

Check that you have a *Registration Form* for each student name that has been manually added to the *Weekly Attendance Form* after the roster was printed. This check should be performed every other school month with a random sample of at least 10% of the total number of sections.

**ITEM 5: WEEKLY ATTENDANCE FORMS /  
ATTENDANCE RECORD REPORT  
MATCH**

At the end of every week, check the bubbled attendance on the *Weekly Attendance Form* against the hours on the computer generated *Attendance Record* report. This check should be performed every school month with a minimum of 10% of your total sections for each week.

**ITEM 6: UNSCANNED ROSTER REPORT  
VERIFICATION**

At the end of each school month, verify that ALL *Weekly Attendance Forms* have been accounted for. Every built *Weekly Attendance Form* must either be scanned at the end of the week for which it was built or printed or submitted as an unscanned sheet with a notation why it was not collected and scanned.

**ITEM 7: COMPUTER OPERATOR BACKUP**

Document that at least two persons at the school are trained to perform every Adult-SIS computer operation. Show that a plan for backup personnel and for training new staff is in place.

**ITEM 8: MANUAL ATTENDANCE  
ACCOUNTING PROCEDURE**

Document that an adequate backup procedure for manual student attendance accounting exists. This procedure is to be used in the event of an emergency or disaster, and should ensure that basic student attendance accounting can be carried out and reports can be generated.

## ADULT - SIS MONTHLY ATTENDANCE / MARK PROCEDURE CHECK SHEET

SCHOOL MONTH \_\_\_\_\_

Attendance Period: Start Date \_\_\_\_\_ End Date \_\_\_\_\_

WEEKLY ATTENDANCE PROCEDURE	WEEK 1 Date _____	WEEK 2 Date _____	WEEK 3 Date _____	WEEK 4 Date _____
Build and print <i>Weekly Attendance Forms</i>				
Distribute <i>Weekly Attendance Forms</i>				
Collect <i>Weekly Attendance Forms</i>				
Correct <i>Weekly Attendance Forms</i>				
Scan and load <i>Weekly Attendance Forms</i>				
Print <i>Scan Errors</i>				
Correct <i>Scan Errors</i>				
Print <i>List of Unscanned Attendance Rosters</i>				
Locate and scan missing <i>Weekly Attendance Forms</i>				

ADDITIONAL eATTENDANCE DOCUMENTATION				
<i>Signature Sheets</i>				
Record of <i>Transferred Walk-Ins</i>				
Record of <i>Sections with Low Attendance</i> (as needed)				
Record of <i>eAttendance Close-Out</i>				

ATTENDANCE REPORTING AND DOCUMENTATION (Week 4 Only)	Date	Initials
Monthly <i>eStatistical, Exception, Audit, Unscanned/Rejected Roster Reports</i>		
<i>Class Hours List by Program</i> (run this report each time you run your <i>eStatistical Report</i> )		
<b>Reconcile <i>eStatistical</i> with <i>Class Hours List by Program</i> (hours MUST balance)</b>		
<i>Adults with Disabilities – Detail Report</i>		
<i>Adults with Disabilities – Summary Report</i>		
<i>Attendance Record for Audit Sections</i> (as needed)		
<i>Potential Small Class Report</i> (print and forward to School Administrative Assistant)		
<i>Student Teacher Ratio Report</i> (print and forward to School Administrative Assistant)		
<i>Self-Audit Test Record</i> (MUST be completed the week after the <i>Statistical Report</i> due date)		

MONTHLY RECORD KEEPING	Fax and/or mail hard copy to:	File
<i>Self-Audit Verification Form, Statistical Discrepancy Report</i>	Adult SIS Office (fax only)	√
<i>Self-Audit Documentation</i>		√
<i>Class Hours List by Program</i>		√
<i>eMonthly Statistical, Exception, Audit, Unscanned/Rejected Roster Reports</i>	Adult Fiscal Services and Attendance / Enrollment Office	√
<i>Adults with Disabilities – Detail, Adults with Disabilities – Summary</i>	Adults with Disabilities Office (fax only)	√
<i>Administrative Reports (Potential Small Class, Student/Teacher Ratio)</i>		√
<i>eAttendance – Sections with required Signature Sheets</i> (should be blank)		√
<i>eAttendance – Sections with Walk-Ins not transferred</i> (should be blank)		√

At the end of each school month, file these documents **by school month** in your **20\_\_ Attendance Procedures and Reports** notebook.

<b>Adult SIS Office:</b>	phone (213) 241-6967	fax (213) 241-6939
<b>Adult Fiscal Services:</b>	phone (213) 241-3721	fax (213) 241-3303
<b>Adults with Disabilities Office:</b>	phone (818) 360-2095	fax (818) 360-7138
<b>Attendance and Enrollment Office:</b>	phone (213) 241-2198	fax (213) 241-6830

Los Angeles Unified School District  
Planning, Assessment and Research Division  
Student Information Systems Branch

**ADULT-SIS  
WEEKLY ATTENDANCE SELF-AUDIT TEST RECORD**

**DATE** \_\_\_\_\_

**SCHOOL** \_\_\_\_\_

**School Month** \_\_\_\_\_ **Attendance Period** *Start Date:* \_\_\_\_\_ *End Date:* \_\_\_\_\_

After the self-audit check for each item has been completed, enter the rating, the name and initial of the person performing the self-audit, and the self-audit date in the appropriate boxes. The following rating system should be used:

**1** = *Appears Satisfactory*      **2** = *Minor Deficiencies*      **3** = *Requires Major Corrective Action*

ITEM	DESCRIPTION	RATING	DATE TEST COMPLETED	NAME & INITIAL
1	Monthly Attendance / Mark Procedure Check Sheet (monthly)			
2	Weekly Attendance Form Check (weekly)			
3	Registration Form / Student Attendance List Match (twice per term)			
4	Add-on Names Supported by Registration Forms (weekly)			
5	Weekly Attendance Forms / Attendance Record Report Match (minimum of 10%)			
6	Unscanned Roster Report Verification (monthly)			
7	Computer Operator Backup (monthly)			
8	Manual Attendance Accounting Procedure (permanent)			

COMMENTS:

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**ADULT-SIS  
SELF-AUDIT VERIFICATION FORM**

The self-audit procedures required by District BULLETIN NO. 5, RECORDING ATTENDANCE FOR COMMUNITY ADULT SCHOOLS, REGIONAL OCCUPATIONAL/SKILLS CENTERS, AND REGIONAL OCCUPATIONAL PROGRAM, dated April 11, 1997, have been completed for:

**SCHOOL** \_\_\_\_\_

**School Month** \_\_\_\_\_ **Attendance Period** *Start Date:* \_\_\_\_\_ *End Date:* \_\_\_\_\_

All errors detected during the self-audit have been corrected and attendance documents have been adjusted accordingly.

Signed: \_\_\_\_\_, SIS Coordinator/Operator      Date: \_\_\_\_\_

Signed: \_\_\_\_\_, Principal      Date: \_\_\_\_\_

This document must be **completed and forwarded during the week following the *Statistical Report* due date.** Keep this original on file at the school for review by District auditors and fax a copy to:

Office of Data and Accountability  
Adult –SIS  
Beaudry Building, 16<sup>th</sup> Floor

Fax Number: **(213) 241-6939**