Your SEL team will need to consider several factors prior to the adoption of an evidence-based program for SEL. The program you select should be aligned to the needs of your youth and their families, meet the needs of your staff (both educators and OST providers) who will be using the program, and align with community (district, school, and OST) priorities. As a team, discuss the following questions to clarify these needs and priorities.

1. **What would a SEL program need to include so that it is able to meet the needs of your youth population and their families?** (consider cultural relevance and responsiveness, language needs, etc.)
2. **What kind of SEL program makes sense based on the needs of our educators and OST providers?** (consider the time needed to prepare for and teach the program, type of materials needed, time needed for training, etc.)
3. **What district, school, and OST goals should we keep in mind while selecting an SEL program?** (Does the district have specific goals around increasing academic performance? Decreasing challenging behavior? Increasing positive social behavior? Other relevant goals?)
4. **With what school and OST priorities will our evidence-based program for SEL need to align?** (PBIS? State SEL Standards? Other programs and initiatives?)
5. **Where and when will this SEL program be used during the school day and OST programming? Have we considered how this will align with existing schedules?**
6. **Most evidence-based SEL programs are designed to be implemented by dedicated facilitators who have received formal training. Have we had appropriate and productive discussions about necessary funding for the cost of our selected SEL program, cost of training, and cost of adding personnel workload?**

**Keeping in mind your answers to the questions above, use the** [**CASEL Program Guides**](https://casel.org/guide/) **to identify two to four evidence-based programs that you are interested in learning more about.**

**As a team:** After reviewing the CASEL Program Guide, place the names of the evidence-based programs you selected in the first row of the table below. Then, choose a rating for each program based on the questions in column one.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
|  | **[Name of EBP]** | **[Name of EBP]** | **[Name of EBP]** | **[Name of EBP]** |
| The SEL program meets the needs of our youth population and their families.  | 1 2 3 4  | 1 2 3 4  | 1 2 3 4  | 1 2 3 4  |
| Notes: | Notes: | Notes: | Notes: |
| The SEL program meets the needs of our educators & OST providers (it can feasibly be accomplished during the school day or an OST session, is in a format that staff will find useful, training is feasible, etc.) | 1 2 3 4  | 1 2 3 4  | 1 2 3 4  | 1 2 3 4  |
| Notes: | Notes: | Notes: | Notes: |
| The SEL program’s outcomes align with our community’s goals, inclusive of district and OST program priorities.  | 1 2 3 4  | 1 2 3 4  | 1 2 3 4  | 1 2 3 4  |
| Notes: | Notes: | Notes: | Notes: |
| This SEL program will integrate well with things we are already prioritizing at the school or OST program level (PBIS, State SEL Standards, etc.) | 1 2 3 4  | 1 2 3 4  | 1 2 3 4  | 1 2 3 4  |
| Notes: | Notes: | Notes: | Notes: |
| **TOTAL POINTS** |  |  |  |  |