

**Oklahoma State Department of Education
Districtwide Alternative Education Implementation Plan Report
2026-2027**

62 I019 ADA

Superintendent's Name	Pat Liticker
Superintendent's Email Address	pat.liticker@adapss.com
Superintendent's Phone	(580) 310-7200
Superintendent's Certified Date	9/1/2026 12:04:06 PM

Do you participate in an Alternative Education Cooperative or Interlocal Cooperative for Alternative Education?	No
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Is your district the Local Education Agency (LEA) for the Alternative Education Program?	No
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LEA of Alternative Education
Cooperative or Interlocal Cooperative

Allocation Amount	81029.51
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COOPERATIVE INFORMATION

If you participate in an Alternative Education Cooperative, your member districts will be listed below:

County	District	District Name	Allocation
62	I019	ADA	81029.51
			81029.51

LEA PROGRAM INFORMATION

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1. Program Name	Ada Alternative Academy		
2. Physical Address (Not a PO Box)	1400 Stadium Drive Ada, OK 74820		
3. Director/Lead Teacher Name	Terry Don Teel		
4. Contact Title	Alternative Education Director		
5. Contact Telephone	5803107280		
6. Director/Lead Teacher Email	teelt@adapss.com		
7. Program Principal Name	Kolby Howry		
8. Program Principal Email Address	howryko@adapss.com		
9. Length of Program			
Program runs 4 hours 12 minutes 5 days a week		☒	
756 hours in your school calendar		☐	
Deregulation turned into Accreditation office date of submission		☐	
10. Days Operating	M-F		
11. Time Program Begins	07:45 AM		
12. Time Program Ends	02:00 PM		
13. Grade Levels Served			
Grade 7	☒	Grade 8	☒
Grade 9	☒	Grade 10	☒
Grade 11	☒	Grade 12	☒
14. How many students are being served each day?	48		
14 A. If serving less than 10 students and not cooping have you completed a Statutory Waiver/Deregulation Application for Alternative Education? (Due Oct 1)	N/A		
15. Of the above number, how many students attend a Career Technology Center?	5		
16. How many Alternative Education students take classes at the traditional school in addition to their classes in the Alternative Education Academy Program?	1		
17. How many Alternative Education students are concurrently enrolled in college or university courses?	0		

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TEACHER INFORMATION

20. Teacher Name	Robert Powell
21. Email Address	powellr@adapss.com
22. Years of experience	20
23. Degree Held	MS
24. Number of hours per week served in the Alternative Education Academy Program.	30
25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program)	True
26. Has a criminal record search been conducted on this teacher?	Yes
27. Teacher Certification Number	215866
28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2	Yes

20. Teacher Name	Michelle Shannon
21. Email Address	shannonm@adapss.com
22. Years of experience	>25
23. Degree Held	MS
24. Number of hours per week served in the Alternative Education Academy Program.	30
25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program)	True
26. Has a criminal record search been conducted on this teacher?	Yes
27. Teacher Certification Number	183935
28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2	Yes

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20. Teacher Name	Seth Adams
21. Email Address	adamss@adapss.com
22. Years of experience	4
23. Degree Held	BA
24. Number of hours per week served in the Alternative Education Academy Program.	30
25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program)	True
26. Has a criminal record search been conducted on this teacher?	Yes
27. Teacher Certification Number	449955
28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2	Yes

20. Teacher Name	Trent Briggs
21. Email Address	briggst@adapss.com
22. Years of experience	Retired
23. Degree Held	MS
24. Number of hours per week served in the Alternative Education Academy Program.	9
25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program)	True
26. Has a criminal record search been conducted on this teacher?	Yes
27. Teacher Certification Number	68461
28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2	Yes

20. Teacher Name	George Leubscher
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21. Email Address	leubscherg@adapss.com
22. Years of experience	10
23. Degree Held	BS
24. Number of hours per week served in the Alternative Education Academy Program.	30
25. Indicate the salary and benefits on the designated step within the District's Salary Schedule including the five percent (5%) increment. (Only for the time actually served in the Alternative Education Academy Program)	True
26. Has a criminal record search been conducted on this teacher?	Yes
27. Teacher Certification Number	445990
28. Has a 'Teaching Out of Certification Exemption' form been filed with the Alternative Education office for this teacher (if applicable)? Due by Oct 2	Yes

ADMINISTRATOR/COUNSELOR INFORMATION

	Counselor Type
29. Administrator or Counselor Name	Terry Don Teel
30. Email address	teelt@adapss.com
31. Documented duties performed in the Alternative Education Program	All administrative duties including documentation, student referrals, monitoring attendance, and managing all program related requirements.
32. Number of hours per week served in the Alternative Education Program.	30
33. Is this counselor a certified school guidance counselor?	--
34. Salary and benefits	78807.52
35. In what capacity does this individual serve?	Administrator

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29. Administrator or Counselor Name	Robert Gray
30. Email address	grayr@adapss.com
31. Documented duties performed in the Alternative Education Program	Assistant Alt Ed Director Providing mentorship and support to program implementation.
32. Number of hours per week served in the Alternative Education Program.	5
33. Is this counselor a certified school guidance counselor?	--
34. Salary and benefits	3140.81
35. In what capacity does this individual serve?	Administrator
29. Administrator or Counselor Name	Trent Briggs
30. Email address	briggst@adapss.com
31. Documented duties performed in the Alternative Education Program	As Counselor, Mr. Briggs consults on student referrals, monitors student attendance, collaborates with Alt Ed Director and instructors regarding student progress, and provides counseling and tutoring.
32. Number of hours per week served in the Alternative Education Program.	5
33. Is this counselor a certified school guidance counselor?	School Guidance Counselor
34. Salary and benefits	13066.51
35. In what capacity does this individual serve?	Counselor

COLLABORATIVE AGENCY INFORMATION

36. Agency Name	The Chickasaw Nation
37. Contact Name	Ken Gandy
38. Phone	5804211222
39. Email Address	
40. Services Provided	Educational and Counseling Services for Native Americans.

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41. When are the services provided? as needed

36. Agency Name Pontotoc County Specialty Courts
37. Contact Name Terra McCullar
38. Phone 5803329587
39. Email Address
40. Services Provided Drug Awareness Education, training, and referrals

41. When are the services provided? Annually/as needed

36. Agency Name Oklahoma Juvenile Services
37. Contact Name Paula Hodges
38. Phone 5804364102
39. Email Address
40. Services Provided Consultant for JSU when students experience legal issues.

41. When are the services provided? as needed

36. Agency Name Unity Point Counseling
37. Contact Name Sunshine Fox
38. Phone 9187210037
39. Email Address
40. Services Provided Counseling Services

41. When are the services provided? as needed

36. Agency Name Oklahoma Highway Patrol
37. Contact Name
38. Phone 5803104965
39. Email Address
40. Services Provided Awareness programs, consultation

41. When are the services provided? as needed

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36. Agency Name	Ada Police Department
37. Contact Name	Richard Hubble
38. Phone	5803104246
39. Email Address	
40. Services Provided	Awareness programs/consultation
41. When are the services provided?	as needed

42. Check all that apply to the district's intake and screening process.

Approved intake form	☒
At Risk Indicator	☒
Parent/guardian present	☒
Teacher from the traditional school	☒
Administrator from the traditional school	☒
Teacher/Director from the alternative program	☒
Individualized Education Plan (IEP) Change of Placement	☒
Counselor present	☒
Cumulative folder	☒
Student present	☒
Student transcript	☒
Written graduation plan for each student	☒
Official referral	☒

43. How often are students allowed to enroll in the Alternative Education Program? Check all that apply.

Daily	☒
Once each week	☐
Monthly only	☐
Quarterly only	☐
Semester only	☐
Other interval. Please describe:	☐

44. Do you ensure that no indication will appear on the Alternative Education student's transcript that will eliminate the opportunity for high school credit to be accepted at institutions of higher education, career technology centers, and/or the United States Military?

Yes	☒
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45. Are students permitted to enroll in traditional courses offered in the traditional school building if those courses are not available through the alternative education program?

Yes ☒ [X]
No ☐ []

46. Check all instructional strategies and activities that apply to your program. (Documented evidence required)

Lesson plans from teacher(s) at the traditional school ☒ [X]
Hands on art instruction ☒ [X]
Cooperative learning ☒ [X]
Online Curriculum. Please list computer software programs used in your Alternative Education Academy program. ☒ [X] Edgenuity
Teacher-developed curriculum and learning activities ☒ [X]
Service-learning ☒ [X]
Packaged curricula ☒ [X]
Self-paced ☒ [X]
Project-based learning ☒ [X]
Tutoring ☒ [X]
Individualized instruction ☒ [X]
Life skills instruction for all students ☒ [X]

47. How many hours per month is counseling provided exclusively to Alternative Education students? (Documented evidence required)

4-6

48. Check the days counseling is provided exclusively to Alternative Education students.

Monday ☒ [X]
Tuesday ☒ [X]
Wednesday ☒ [X]
Thursday ☒ [X]
Friday ☒ [X]

49. Who provides counseling services?

Yolanda Cumings, Fee Rocha, Sunshine Fox,
Robert Gray, & Trent Briggs

50. Indicate the provider's credentials. (Counselor must be certified by SDE or a mental health provider with appropriate licensure.)

Licensed mental health provider:(LPC,
LADC.LCSW, LMFT)

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51. Check all types of counseling strategies used in the Alternative Education Program. (Documented evidence required)

Individual	☒
Family	☒
Academic	☒
Conflict resolution	☒
Group	☒
Teen parenting	☒
Career	☒
Drug/alcohol/substance abuse	☒

52. Which disciplines of art are taught to Alternative Education students? (Documented evidence required)

Vocal music	☐
Instrumental music	☐
Integrated approach (hands-on)	☒
Performing arts (dance, drama, etc.)	☐
Visual art (drawing, oil, photography, etc.)	☒

53. Do students receive credit for the arts?

Yes	☒
No	☐

54. The district will support the Alternative Education personnel's attendance at professional development workshops, regional meetings, and seminars provided by the State Department of Education. (Documented evidence required)

No	☐
Yes	☒

55. Students in the Alternative Education Program, who otherwise meet all participation requirements, are allowed to participate in vocational programs and extracurricular activities, including but not limited to athletics, band, and clubs.

Yes	☒
No	☐

56. How many Alternative Education senior students participated in the regular commencement exercises last school year?

11-20

57. How many Alternative Education students were reported on your district's annual Student Dropout Report for the 2024-2025 school year?

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58. Will the Alternative Education Program be operational and ready to serve students on the 1st of September?

Yes ☒

59. Are materials and equipment purchased with revenue received for the Alternative Education Program made available exclusively to the Alternative Education students during the hours that the Alternative Education Program is operating?

Yes ☒

60. Is the Alternative Education Program site readily ADA Compliant?

Yes ☒

No ☐

61. Does the Alternative Education Program regularly provide transportation to students or transportation accessible if needed?

Yes ☒

No ☐

62. Does the Alternative Education Program offer food service to students?

Yes ☒

No ☐

63. I understand in order to receive funding the evidence criteria review must be completed and students must be coded correctly in your district's student information system.

Yes ☒

No ☐

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ESTIMATED BUDGET PROGRAM REPORT

FY 2027 ESTIMATED BUDGET - STATEWIDE ALTERNATIVE EDUCATION

District Name: ADA

County Name: PONTOTOC

Please select the choice below that reflects your program structure:

FY 2027 Allocation (Project 388): 81029.51

☒ Single-District Program ☐ Cooperative Program ☐ Interlocal Cooperative (LLC) Program

(Single-District and ILC Programs should reflect all expenditures in Fund 11. Cooperative Programs should reflect all expenditures in Fund 12.)

PLEASE NOTE: Alternative Education Academy Program expenditures should be coded to Program Code 430, Project Code 388, and the Local District's Assigned Project Code for Alternative Education expenses that exceed the Allocation Amount.

Please list your Local District's Alternative Education Project Code: 388

FUNCTION CODES												
OBJECT CODES	Instruction 1000	Testing/Guidance 2120	Curriculum Training 2210	Secretary 2300	Special Area Administ. 2330	Operation of Maint. 2620	Equipment/ Maint. 2640	Security 2660	Transp. 2720	Special Area Adm. Train. 2573	Other	TOTAL OF ALL DISTRICT EXPENSES FOR ALTERNATIVE EDUCATION
100 Salaries	281,748.25	11,987.10	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	293,735.35
200 Benefits	68,970.13	1,079.41	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	70,049.54
300 Contract Prof.Serv	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
400 Property Services	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
500 Travel	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
560-Transp. Student Tuition	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
600-Supp. & Mater. < \$2,500	0.00	0.00	0.00	0.00	0.00	5,000.00	200.00	0.00	0.00	0.00	0.00	5,200.00
650 Furniture	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
700 Property > \$2,500	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
800 Other/ Registration	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00	0.00
TOTAL	350,718.38	13,066.51	0.00	0.00	0.00	5,000.00	200.00	0.00	0.00	0.00	0.00	368,984.89