

**FMC Community Empowerment (Early Childhood Iowa Area)
Annual Report 2010 Preschool Survey**

Preschool _____

Check if your program meets the following standards:

- NAEYC Accreditation
- NAFCC Accreditation
- Head Start Preschool Program Standards
- QPPS Verification Process
- Indicate the levels of QPPS

Indicate which of the following programs evidence quality through: (check if applicable)

- ECERS average score of 5 (with no subscale score under 2)
- FCCRS average score of 5 (with no subscale score under 2)
- QRS rating: 3, 4, or 5 (circle which if applicable)

Is your program: (check one)

- School district operated program
- Private, for-profit program
- Not-for-profit program
- Shared Vision program:
- Faith-based program

Does your program receive funding from the Statewide Voluntary Preschool Program for 4 year olds? Have you applied for FY 2011 grant funding?

Yes No Yes No

Does your program expend Empowerment funds on transportation?

Yes, \$ _____ No

Highest Educational level of the lead teacher(s) and number(s) of each:

- GED _____
- High School Diploma _____
- CDA: _____
- AA Degree in EC or child development _____
- AA Degree in related field _____
- BA/BS in related field: _____
- BA/BS in related field: _____
- Post Graduate Degree: _____

Total number of lead teacher(s) who hold a valid practioner’s license issued by the Board of Educational Examiners and hold an endorsement that includes preschool or kindergarten: _____

What curriculum do you use? _____

Total number of children receiving Empowerment scholarships: _____

Total number of Head Start children served with Empowerment Preschool Funds: _____

Number of:

3 year olds: _____

4 year olds: _____

5 year olds: _____

Number of children by Race/Ethnicity:

Native American or Alaskan Native: _____

African American: _____

Hispanic or Latino: _____

White: _____

Native Hawaiian/Pacific Islander: _____

Multi-racial: _____

Asian: _____

Other: _____

Number of children who received Empowerment funded transportation: _____

To answer the question: “How Well Did We Do It? (quality/efficiency measures)

Number and Percent of Children whose families are at or below 200% poverty level: _____ (number) out of (total) _____, Percent: _____

Number and Percent of children referred to AEA for possible special education determination: _____ (number) out of (total) _____, Percent: _____

To answer the question: “What was the change in conditions for those we served? (outcome measures)

Number and percent of children demonstrating age appropriate skills: _____ (number) out of (total) _____, Percent: _____

What assessment tool was used to determine the children’s development?

- Creative Curriculum Developmental List
- Brigance
- IGDI
- Continuum Developmental Checklist
- DECA
- Get Ready to Read
- Early Learning Standards
- Other: (name) _____

Community Involvement/Supporting Funding:

What other funding helps support your preschool program?

List the amount: _____
(This shows community collaboration)

Preschool Information:

Completed by: _____ Position: _____

Preschool Address: _____ City: _____

Zip: _____ Phone: _____ Email: _____

This survey must be completed and returned to FMC Community Empowerment before the final May preschool payment will be released. Return to:

FMC Community Empowerment
P.O. Box 3
Nashua, IA 50658
Or email to:
fmc@reconnect.com

**Funding for April and May claims is contingent upon FMC Empowerment’s receipt of the final state 2010 quarterly payment*