Child and Program Characteristics of the
North Carolina More at Four Pre-kindergarten Program: Year 1 (January - June 2002)

June, 2003

Ellen S. Peisner-Feinberg, Ph.D.
and the More at Four Evaluation Team

FPG Child Development Institute
The University of North Carolina at Chapel Hill

Suggested citation: Peisner-Feinberg, E. S. (2003). Child and Program Characteristics of the *North Carolina More at Four Pre-kindergarten Program*: Year 1 (January - June, 2002). Chapel Hill, NC: FPG Child Development Institute.

For more information about the Evaluation of the North Carolina More at Four Pre-kindergarten Program, visit the web site at **www.fpg.unc.edu/~mafeval**, or email **mafeval@unc.edu**.

500 copies of this document were printed at a cost of $1277.00, or $2.55 each.

Overview of the More at Four Program

The *North Carolina More at Four Pre-kindergarten Program* is a state-funded initiative for at-risk 4-year-olds, designed to help them be more successful when they enter elementary school. *More at Four* is based on the premise that all children can learn if given the opportunity, but at-risk children have not been given the same level of opportunity. The focus of this program is on children who have never been served in a pre-kindergarten program and/or children who have been "underserved" (those who are eligible for, but not receiving financial assistance or who are in below-standard care). It is estimated that there are approximately 40,000 at-risk 4-year-olds in NC, with about 10,000 of these children being unserved and even more underserved.

The *North Carolina More at Four Pre-kindergarten Program* was initiated in late 2001, and sites began serving children as early as January 2002. More at Four provides classroom-based educational programs at a variety of sites designated by the local administration within each county or region. Children are selected for participation in *More at Four* based on risk status. The programs are administered at the county or region level, and must include collaboration among the local school system(s), the local Smart Start partnership, and other interested members of the early childhood community (e.g., Head Start, child care providers, resource and referral agencies). *More at Four* classrooms operate in a variety of settings, including public schools, Head Start, and community child care centers (both for-profit and nonprofit). The programs operate on a school calendar basis for 6 to 6-1/2 hours/day and 180 days/year. The programs are intended to provide a high quality, comprehensive educational program for children, and must meet a variety of program guidelines and standards around curriculum, training and education levels for teachers and directors, class size and ratios, NC star-license ratings of 4 or 5, and other program services provided. Children may be enrolled in classrooms serving *More at Four* children exclusively or in classrooms blended with other programs.

In the first year, applications were submitted by individual counties or regions (groups of counties) for state *More at Four* funds. Applications could be submitted on two different tracks. The Fast Track applications were due in December for funding/program services starting in January, while Standard Track applications were due in January for funding/program services starting in March. The applications were reviewed by the state *More at Four* Office and 28 were approved for funding (12 Fast Track and 16 Standard Track). Of the 28 grantees approved, 26 served children in the first year.

Overview of the Statewide Evaluation of the More at Four Program

The FPG Child Development Institute is conducting the statewide evaluation of the *More at Four* program. The evaluation is designed to provide information that can be used for determining program effectiveness for children (accountability), program improvement (strengths/weaknesses, suggested areas for technical assistance), and decision-making for future activities and funding. The overall evaluation will address questions about who is being served by the *More at Four* program, the characteristics and quality of the services provided, the satisfaction of families with the program, the outcomes of children attending these programs, the factors that are associated with better outcomes for children, and the factors that have enhanced or impeded the implementation of *More at Four*.

The current report provides information about the characteristics of the programs providing services and the children served during the first year of operation (Spring 2002), based on data gathered from each program in operation.

Child- and Program-Specific Reporting Form

The evaluation team designed report forms for gathering information from each grantee in May, 2002, to report on their program services for the first year (See Appendices A and B for report forms and instructions). In addition to serving a monitoring purpose for the Governor's *More at Four* Office, the information reported was analyzed to provide evaluation information about the characteristics of the overall *More at Four Program* and the extent to which it was meeting the program guidelines and serving its intended purpose. The forms were created as PDF files, and could be completed either on the computer or by hand. Information for the first year was gathered in one report, with some information reported monthly as appropriate (e.g., children enrolled, attendance). Grantees provided information only for the months they were in operation during Year 1. Information was gathered at four levels:

◆ **Contract** (agency information, allocated slots)

◆ **Site** (site information, director/principal name, education, and certifications/credentials, service dates, operation days, teacher workdays, slots allocated)

◆ **Classroom** (classroom information, service dates, hours of operation, class size, slots allocated, lead and assistant teacher education, certifications/credentials, and entry/exit dates)

◆ **Child** (individual child information, date of birth, demographic characteristics, level of *More at Four* risk criteria, *More at Four* service priority status, previous child care service, household composition, entry/exit dates, monthly attendance, and information on disabilities)

Procedure

The evaluation team sent report forms and accompanying instructions to all contract administrators or designated program contacts for the 26 programs operating in the first year (Spring 2002). While the contract administrator was responsible for submitting the forms, they could enlist the assistance of site directors and/or teachers as needed to provide the necessary information and/or to assist with the completion of the forms. Each grantee utilized the procedures that worked best for them for completing the report forms.

The evaluation team received information back from all 26 programs. The team provided technical assistance to help grantees understand the form content, as requested. In addition, the evaluation team followed up on missing or inconsistent information to the extent possible by contacting the contract administrator or program contact responsible for submitting the forms.

Key Findings

Some key research questions and findings regarding program services and child characteristics are highlighted below. Overall, these findings suggest that the *More at Four* programs operating in Year 1 served a diverse group of children in a wide array of settings. In general, the individual sites were meeting many of the program guidelines, although there was some variation across sites. It is important to note that this initial year of operation was characterized by a rapid start-up and short program year, beginning in the middle of the typical school year, which may have affected the number of children able to be served as well as the extent of services.

How many children were served in the More at Four Program?

■ Overall, more slots were allocated for the *More at Four Program* than were filled. This was true for most individual counties/regions, as well as for the state overall. The total number of children served in the first year was 1244, representing 1234 slots that were filled (due to some turnover on the part of children). The number of slots allocated each month was greater than the number of children served that month. The total slots allocated ranged from 803 to 1479 per month, while the total number of children served ranged from 318 to 1181 per month. The discrepancies between allocated and filled slots lessened over time, from about 40% of the slots filled in January to about 87% filled in May.

Were the children served by the More at Four Program meeting the program guidelines in terms of risk factor status and service priority status?

■ In general, programs were serving the intended population based on certain risk factors. In particular, the majority of children were designated at risk (scores of level 1 or 2) on the factors of family income and parental employment, and substantial proportions of children were designated at risk on the factors of parent education, family composition, housing stability, and minority status. Fewer children were at risk in terms of health status, special needs, and English proficiency, although children typically had multiple risk factors.

■ Programs were also serving the intended population based on service priority status. Three-quarters of the children had not been previously served, which was the primary targeted group. In addition, another 12% were eligible for financial assistance but not receiving it, and another 5% were being served in below-standard settings.

What were the characteristics of the children served in the More at Four Program?

■ The *More at Four Program* served a diverse group of children based on characteristics such as gender, ethnicity, types of risk factors, and family composition. Of all children participating in the program during the first year, about half were boys and half girls; 40% were African-American, 35% White, 15% Latino, and 10% from other ethnic/racial groups or combinations of groups. There was a great deal of variety in the types and combinations of risk factors children exhibited, with 10% to 90% of the children designated at risk on the individual risk factors, and an average total risk factor score of 5.6 (with a range from 0-15). Children lived in households with an average of 1.8 adults, suggesting than many children were not living in 2-parent families, although the number of adults ranged from 1-6.

■ The *More at Four Program* served a significant proportion of children with disabilities, 13%, which is higher than the estimated US population average of 6% (US Census Bureau, 1995). Five percent of all children attending *More at Four* were referred for a disability evaluation during their tenure in *More at Four*, and almost 80% of the children with identified disabilities had an active IEP and were receiving special services.

Were the individual sites meeting the program guidelines for operation?

■ For the most part, the various sites were meeting program guidelines for operation. The average number of hours of operation was 6.8, or about the length of a school day, and the average class size was 14.4 (well below the maximum of 18). They were also meeting the guidelines in terms of staff qualifications: 81% of the lead teachers had bachelor's degrees or above, although only 29% had a B-K or preschool add-on licensure; 43% of assistant teachers had an associate's degree or above and 43% held a CDA credential or above; and 89% of the principals/site directors had bachelor's degrees or above and 77% had a Child Care Level III certification or a Principal's Certification.

■ Because of the timing of the availability of funds for the *More at Four Program*, there was a short program year for the first year, with a start-up in the middle of the school year. Individual grantees started serving children between January and April, 2002. Children attended the program for an average of 48 days (about 2 full months of services).

What were the characteristics of the programs that served More at Four children?

■ The settings for service delivery varied on a number of characteristics. Children were served in a variety of setting types, including public schools, for-profit and nonprofit private child care, Head Start, and various other combinations, with about two-thirds (65%) in public school sites. *More at Four* children tended to be served in blended classrooms, including children funded through other programs. The average number of *More at Four* children per classroom was 10, representing 62% of the class.

■ There was a great deal of variation among grantees on a number of program characteristics, including program size, length of operation, children's risk factor status, and types of settings. The *More at Four* programs conducted by individual grantees ranged in size from 7 to 118 children and ranged in length of operation from 26 to 90 days, with start-up dates from January to April. The average child risk factor score ranged from 3.8 to 6.8 across grantees, and there may have been variations in the modifications, if any, that grantees made to the specific definitions of risk. Individual grantees also varied in the types of sites in which they served children; for example, the percentage of children served in public school sites and private child care sites varied from 0-100%, while the percentage served in Head Start sites varied from 0-52%.

Results

I. Slots Allocated and Filled

	Total Number of Slots Allocated by Month	Total Number of Slots Filled (Children Served) by Month	Percent of Allocated Slots that were Filled by Month
January	803	318	39.6%
February	857	568	66.3%
March	1312	923	70.4%
April	1479	1176	79.5%
May	1351	1181	87.4%
June		1146	
Total		1234	

II. Service Priority Status

	Total Number of Children Served Who Have Not Been Previously Served Based on Service Priority Status by Month	Total Number of Children Served Who Have Not Been Previously Served in a Licensed or Regulated Child Care Setting by Month
January	235	242
February	449	460
March	718	726
April	877	892
May	882	897
June	853	868
Total	919	935

III. Child Attendance, Enrollment, and Withdrawal

Total Child Attendance by Month*

	Number of Children	Number of Days Attended	Mean Days per Child	SD Days per Child
January	294	1925	6.5	6.1
February	542	7754	14.3	6.0
March	908	12,041	13.3	6.1
April	1157	17,976	15.5	4.0
May	1167	19,501	16.7	4.4
Total	1233	59,197	48.0	21.9

*Note: Attendance data were not reported for 11 children.

Frequency of Child Enrollments* and Withdrawals by Month

	Enrollments		Withdrawals	
	Percent	Number	Percent	Number
January	24.8	305	---	---
February	20.3	250	9.4	10
March	29.7	365	17.8	19
April	22.1	272	31.8	34
May	3.2	39	32.7	35
June	---	---	8.4	9

*Note: Enrollment data were not reported for 13 children.

IV. Operation Days and Hours

Average Operation Days by Month (for sites in operation that month)

	Service Days for Children				Teacher Workdays		
	Number of Sites	Mean	SD	Range	Mean	SD	Range
January	51	13.6	7.4	2-22	0.8	2.2	0-15
February	62	18.1	3.4	3-25	0.5	0.7	0-2
March	85	16.1	5.2	2-21	1.3	2.5	0-19
April	100	17.6	2.9	7-22	0.8	1.9	0-10
May	100	19.9	2.9	10-24	1.5	2.3	0-9
June	38	11.5	7.2	2-20	1.3	1.7	0-7
Total (Jan-June)	101	73.0	28.2	23-127	5.2	5.6	0-28

Note: The start date for *More at Four* services ranged from 1/7/03 to 4/22/03, and the end date ranged from 5/14/03 to 8/8/03.

Average Hours per Day of Operation for *More at Four* Services

Mean	SD	Range
6.8	1.2	5-11

V. Class Size Characteristics

Average Class Size

Mean	SD	Range
14.0	3.7	2-20

Average Number of More at Four Children per Class

Mean	SD	Range
8.7	6.7	1-18

Average Proportion of More at Four Children per Class

Mean	SD	Range
0.62	0.40	0.06-1.00

VI. Staff Characteristics

Total Number of Teachers by Month

	Lead Teachers	Assistant Teachers	Long-term Substitutes
January	67	68	7
February	85	96	8
March	122	133	7
April	134	151	9
May	136	151	7
June	53	61	1
Total	140	155	13

*Note: Data were included for 4 teachers with no category indicated.

Distribution of Highest Teacher Education Level*

	Lead Teachers n=133		Assistant Teachers n=148	
Highest Education Level	Percent	Number	Percent	Number
High School Diploma	0.8	1	28.4	42
Working toward AA/AAS	6.8	9	28.4	42
AA/AAS Degree	6.0	8	16.9	25
Working toward BA/BS	5.3	7	8.8	13
BA/BS Degree	63.2	84	15.5	23
Working toward MA/MS	3.8	5	1.4	2
MA/MS Degree or higher	14.3	19	0.7	1

*Note: Data were not reported for 7 lead teachers and 7 assistant teachers. In addition, data are not included for 4 teachers with no category indicated and for 13 teachers categorized as substitutes.

Distribution of Highest Teacher Credential/Certification Levels*

	Lead Teachers n=112		Assistant Teachers n=89	
Highest Certification Level	Percent	Number	Percent	Number
B-K or Preschool Add-on License	28.6	32	2.3	2
NC Teacher's License	38.4	43	2.3	2
Other State Teacher's License	2.7	3	0	0
Working toward B-K or Preschool Add-on	19.6	22	9.0	8
Working toward Teacher's License	0.9	1	6.7	6
CDA (Child Development Associate) Credential	0.9	1	22.5	20
Working toward CDA Credential	1.8	2	10.1	9
NC Early Childhood Credential	2.7	3	29.2	26
Working toward NC Early Childhood Credential	1.8	2	11.2	10
Other	2.7	3	6.7	6

*Note: No data were reported for 28 lead teachers and 66 assistant teachers.

Data are not included for 4 teachers with no category indicated and for 13 teachers categorized as substitutes.

Distribution of Lead Teacher Highest Credentials by Highest Education Level (n=108)

Highest Certification Level	Highest Education Level						
	MA/MS or higher	Working toward MA/MS	BA/BS Degree	Working toward BA/BS	AA/AAS Degree	Working toward AA/AAS	High School Diploma
B-K or Preschool Add-on License	2.8% (3)	1.9% (2)	23.2% (25)	0	0	0	0
NC Teacher's License	9.3% (10)	1.9% (2)	26.9% (29)	0	0	0	0
Other State Teacher's License	0.9% (1)	0	0.9% (1)	0	0	0	0.9% (1)
Working on B-K or Preschool Add-on	2.8% (3)	0	10.2% (11)	4.6% (5)	2.8% (3)	0	0
Working on Teacher's License	0	0	0.9% (1)	0	0	0	0
CDA Credential	0	0	0	0	0	0.9% (1)	0
Working on CDA Credential	0	0	0	0	0	1.9% (2)	0
NC Early Childhood Credential	0	0	0	0	0.9% (1)	1.9% (2)	0
Working on NCECC	0	0	0	0	0.9% (1)	0.9% (1)	0
Other	0.9% (1)	0	1.9% (2)	0	0	0	0

*Note: Data were not reported for 32 lead teachers.

Distribution of Assistant Teacher Highest Credentials by Highest Education Level (n=83)

Highest Certification Level	Highest Education Level						
	MA/MS or higher	Working toward MA/MS	BA/BS Degree	Working toward BA/BS	AA/AAS Degree	Working toward AA/AAS	High School Diploma
B-K or Preschool Add-on License	0	0	1.2% (1)	0	0	0	0
NC Teacher's License	1.2% (1)	0	1.2% (1)	0	0	0	0
Other State Teacher's License	0	0	0	0	0	0	0
Working on B-K or Preschool Add-on	0	2.4% (2)	3.6% (3)	3.6% (3)	0	0	0
Working on Teacher's License	0	0	1.2% (1)	6.0% (5)	0	0	0
CDA Credential	0	0	2.4% (2)	0	6.0% (5)	8.4% (7)	4.8% (4)
Working on CDA Credential	0	0	0	0	1.2% (1)	3.6% (3)	3.6% (3)
NC Early Childhood Credential	0	0	0	1.2% (1)	4.8% (4)	10.8% (9)	13.3% (11)
Working on NCECC	0	0	1.2% (1)	0	1.2% (1)	3.6% (3)	6.0% (5)
Other	0	0	4.8% (4)	0	0	0	2.4% (2)

*Note: Data were not reported for 72 assistant teachers.

Total Number of Directors/Principals by Month*

January	40
February	54
March	83
April	100
May	100
June	40
Total	101

*Note: This information was not reported for one site.

Distribution of Director/Principal Education* (n=100)

Highest Education Level	Percent	Number
High School Diploma	1.0	1
Working toward AA/AAS	2.0	2
AA/AAS Degree	3.0	3
Working toward BA/BS	5.0	5
BA/BS Degree	16.0	16
Working toward MA/MS	3.0	3
MA/MS Degree	57.0	57
Working toward Ph.D./Ed.D.	4.0	4
Ph.D./Ed.D.	9.0	9

*Note: This information was not reported for two sites.

Distribution of Director/Principal Credentials* (n=97)

Certification	Percent	Number
Principal's Certification	50.5	49
Working toward Principal's Certification	0	0
Child Care Administrator Level III	16.5	16
Working toward Child Care Administrator Level III	10.3	10
Child Care Administrator Level II	7.2	7
Working toward Child Care Administrator Level II	1.0	1
Child Care Administrator Level I	5.2	5
Working toward Child Care Administrator Level I	1.0	1
Other	8.3	8

*Note: This information was not reported for five sites.

VII. Setting Characteristics

Distribution of Types of *More at Four* Sites (n=102)

Site Type	Percent	Number
Public School District	55.9	57
Private Nonprofit Child Care Center	17.6	18
Private For-profit Child Care Center	7.8	8
Public School, Head Start, and Private Nonprofit	6.9	7
Head Start	4.9	5
Public School and Head Start	2.0	2
Public Charter School	1.0	1
Other	1.0	1
Private For-profit and Nonprofit	1.0	1
Public School and Private Nonprofit	1.0	1
Private Nonprofit and Other	1.0	1

Distribution of Children by Type of *More at Four* Site (n=1244)

Site Type	Percent	Number
Public School District	65.0	808
Private For-profit Child Care Center	10.1	126
Private Nonprofit Child Care Center	8.8	110
Head Start	7.0	87
Public School and Head Start	2.3	29
Public School and Private Nonprofit	1.7	21
Public School, Head Start, and Private Nonprofit	1.6	20
Private For-profit and Nonprofit	1.4	18
Public Charter School	0.9	11
Private Nonprofit and Other	0.8	10
Other	0.3	4

Distribution of Types of *More at Four* Classrooms (n=139)

Classroom Type	Percent	Number
Public Preschool	54.0	75
Private Child Care Center	21.6	30
Head Start	11.5	16
Head Start, Public Preschool, and Private	7.2	10
Public Preschool and Other	2.9	4
Other	2.2	3
Private Center and Other	0.7	1

Distribution of Children by Type of *More at Four* Classroom* (n=1243)

Classroom Type	Percent of Children	Number of Children
Public Preschool	62.0	771
Private Child Care Center	20.7	257
Head Start	11.5	143
Other	2.0	25
Private Center and Other	1.7	21
Head Start, Public Preschool, and Private	1.6	20
Public Preschool and Other	0.5	6

*Note: This information was not reported for one child.

VIII. Child Characteristics

Child Age (at end of school year in June)

Mean	SD	Range	N
5.0	0.40	3.2 - 6.3	1234

Child Gender

Female	Male	N
49.0% (610)	51.0% (634)	1244

Child Ethnicity/Race (n=1239)

Ethnicity/Race	Percent	Frequency
Black/African American	40.1	499
White/European American	34.5	429
Hispanic/Latino	15.0	186
Native American/Alaskan Native	4.8	60
Asian	2.6	32
White/European American and Black/African American	1.1	14
White/European American and Hispanic/Latino	0.6	8
Native Hawaiian/Pacific Islander	0.2	2
Black/African American and Hispanic/Latino	0.2	2
White/European American and Asian	0.2	2
White/European American and Native American/Alaskan Native	0.2	3
Native Hawaiian/Pacific Islander and Hispanic/Latino	0.1	1
White/European American and Black/African American and Native Hawaiian/Pacific Islander and Hispanic/Latino	0.1	1

Note: These data were not reported for 5 children.

Overall Level of Child Risk Factors (n=1224-1242)

Risk Factor	Level 0		Level 1		Level 2	
	Percent	Number	Percent	Number	Percent	Number
Family Income	9.5	118	12.2	151	78.3	973
Health Status	85.4	1060	10.5	130	4.1	51
Special Needs	91.1	1128	1.3	16	7.6	94
Parent Education	62.5	775	10.5	130	27.0	335
Parent Employment	39.1	483	17.3	214	43.5	537
Family Composition	53.7	667	39.1	485	7.3	90
Housing Stability	69.1	855	29.2	361	1.8	22
English Proficiency	82.3	1018	8.7	108	9.0	111
Minority Status	51.2	625*	25.8	315	23.0	280

*Note: This number includes 389 children scored n/a and 236 children scored level 0.

Average Total Risk Factor Score

Mean	SD	Range	Possible Range	N
5.6	3.0	0-15	0-18	1242

Overall Distribution of Children's Service Priority Status at Enrollment* (n=1240)

Status	Percent	Number
Never been served	74.7	926
Eligible for financial assistance, but not receiving	11.9	147
Currently served in setting below MAF standards	4.7	58
Other	8.8	109

Note: These data were not reported for 4 children.

Has child ever been served in a licensed or regulated child care setting?

Status	Percent	Number
Never been served	76.1	943
Have been served	23.9	296

Note: These data were not reported for 5 children.

Family Composition of *More at Four* Children

Household Composition	Mean	SD	Range	N
Number of adults	1.8	0.7	1-6	1238
Number of children	2.4	1.2	1-10	1226
Total number of people	4.3	1.5	2-14	1225

IX. Information on Children's Disability Status

Frequency of Children Receiving Referrals for Disability Evaluation*

Referrals for Disability Evaluation	Percent	Number
Never referred	87.0%	1080
Referred prior to MAF	8.2%	102
Referred during MAF	4.8%	59

*Note: These data were not reported for 3 children.

Frequency of Types of Disability Evaluation Decisions (for children who are referred)

Evaluation Decision	Percent	Number
No disability identified	7.1%	11
Decision in progress	21.8%	34
One or more disabilities identified	71.2%	111

*Note: These data were not reported for 8 children.

Frequency of Categories of Identified Disabilities* (n=113)

Disability	Percent	Number
Autistic	8.0	9
Deaf-Blind	0	0
Behaviorally/Emotionally Disabled	9.7	11
Educable Mentally Disabled	0	0
Hearing Impaired	0.9	1
Specific Learning Disabled	0.9	1
Multi-handicapped	0	0
Other Health Impaired	5.3	6
Orthopedically Impaired	2.7	3
Speech/Language Impaired	78.8	89
Severe/Profound Mentally Disabled	0	0
Trainable Mentally Disabled	0	0
Visually Impaired	4.4	5
Traumatic Brain Injured	0.9	1
Preschool Developmentally Delayed	23.9	27

*Note: More than one category was indicated for 27 children.

Of the children with identified disabilities, how many:

	Percent	Number
Have an active IEP[1]	7.1%	11
Have been referred for services[2]	21.8%	34
One or more disabilities identified[3]	71.2%	111

[1] Note: This information was not reported for 1 child.

[2] Note: This information was not reported for 15 children.

[3] Note: This information was not reported for 13 children.

X. Grantee-Level Information

Grantee*	Number of Sites	Number of Classrooms	Slots Allocated	Number of Children	Average Risk Total	Number of Children Never Served based on Service Priority Status	Number of Children Not Previously Served in Licensed/Regulated Care	Average Days of Operation per site Jan-June	Average Days of Attendance per Child Jan-May	Month Began Serving Children
Alamance	3	4	24	18	8.4	17	17	---	12.9	Apr
Ashe	1	1	15	15	6.2	15	15	78.0	47.5	Jan
Beaufort	3	4	72	77	5.6	45	46	79.7	60.0	Jan
Buncombe	3	10	24	20	5.9	13	12	90.0	56.6	Jan
Carteret	4	5	61	51	4.5	37	37	45.3	39.8	Mar
Catawba	3	3	54	56	6.0	49	49	74.3	58.9	Jan
Craven	2	2	28	24	5.5	22	20	31.5	25.5	Mar
Cumberland	7	7	112	98	6.8	90	90	68.4	47.4	Feb
Davidson	5	6	96	89	5.1	51	51	46.2	36.1	Mar
Forsyth	6	6	91	66	6.1	41	39	37.2	31.6	Apr
Gaston	2	2	36	23	4.3	13	14	37.0	32.0	Mar
Granville	1	1	16	17	6.2	15	15	41.0	38.6	Mar
Guilford	6	7	118	118	3.8	73	72	88.8	75.2	Jan
Hertford	2	2	15	21	6.8	17	21	43.5	35.4	Apr
Hoke	6	7	90	93	5.2	80	87	73.0	59.1	Jan
Mecklenburg	2	3	54	54	6.3	51	51	78.5	59.3	Jan
New Hanover	2	10	36	37	6.8	27	29	---	33.1	Mar
Northampton	3	2	54	7	4.3	4	5	30.5	30.3	Apr
Orange	11	14	75	73	6.9	25	27	75.7	44.6	Jan
Pamlico	1	1	15	15	5.7	13	14	41.0	29.9	Mar
Region A	18	23	106	64	4.2	64	64	112.2	56.0	Jan
Robeson	3	9	58	63	6.6	47	53	68.3	42.5	Feb
Scotland	1	2	36	24	5.5	21	22	48.0	37.7	Mar
Vance	1	1	18	14	3.8	14	14	26.0	25.1	Apr
Wake	3	4	90	56	5.9	33	33	55.0	33.0	Mar
Wayne	3	3	54	51	4.2	49	46	67.0	50.8	Feb

*Note: Two additional grantees, Anson and Brunswick counties, were approved but did not serve children.

Number of Children by Type of Site

Grantee	Public School	Private For-profit Center	Private Nonprofit Center	Head Start	Public School/ Head Start	Public School/ Private Nonprofit	Public School/ Head Start/ Private Nonprofit	Private For-Profit and Nonprofit	Public Charter School	Private Nonprofit and Other	Other
Alamance	18 (100%)	0	0	0	0	0	0	0	0	0	0
Ashe	15 (100%)	0	0	0	0	0	0	0	0	0	0
Beaufort	56 (72.7%)	0	0	0	0	21 (27.2%)	0	0	0	0	0
Buncombe	6 (30.0%)	0	0	0	10 (50.0%)	0	0	0	0	0	4 (20.0%)
Carteret	38 (74.5%)	13 (25.5%)	0	0	0	0	0	0	0	0	0
Catawba	56 (100%)	0	0	0	0	0	0	0	0	0	0
Craven	24 (100%)	0	0	0	0	0	0	0	0	0	0
Cumberland	63 (64.3%)	13 (13.3%)	12 (12.2%)	0	0	0	0	0	0	10 (10.2%)	0
Davidson	74 (83.1%)	0	15 (16.9%)	0	0	0	0	0	0	0	0
Forsyth	34 (51.5%)	21 (31.8%)	0	0	0	0	0	0	11 (16.7%)	0	0
Gaston	9 (39.1%)	14 (60.9%)	0	0	0	0	0	0	0	0	0
Granville	17 (100%)	0	0	0	0	0	0	0	0	0	0
Guilford	54 (45.8%)	0	27 (22.9%)	37 (31.4%)	0	0	0	0	0	0	0

Number of Children by Type of Site, *continued*

Grantee	Public School	Private For-profit Center	Private Nonprofit Center	Head Start	Public School/ Head Start	Public School/ Private Nonprofit	Public School/ Head Start/ Private Nonprofit	Private For-Profit and Nonprofit	Public Charter School	Private Nonprofit and Other	Other
Hertford	10 (47.6%)	0	0	11 (52.4%)	0	0	0	0	0	0	0
Hoke	74 (79.6%)	0	0	0	19 (20.4%)	0	0	0	0	0	0
Mecklenburg	36 (66.7%)	18 (33.3%)	0	0	0	0	0	0	0	0	0
New Hanover	18 (48.6%)	0	0	19 (51.4%)	0	0	0	0	0	0	0
Northampton	7 (100%)	0	0	0	0	0	0	0	0	0	0
Orange	46 (63.0%)	0	7 (9.6%)	0	0	0	20 (27.4%)	0	0	0	0
Pamlico	15 (100%)	0	0	0	0	0	0	0	0	0	0
Region A	41 (64.1%)	0	20 (31.3%)	3 (4.7%)	0	0	0	0	0	0	0
Robeson	43 (68.3%)	20 (31.7%)	0	0	0	0	0	0	0	0	0
Scotland	24 (100%)	0	0	0	0	0	0	0	0	0	0
Vance	14 (100%)	0	0	0	0	0	0	0	0	0	0
Wake	0	27 (48.2%)	29 (51.8%)	0	0	0	0	0	0	0	0
Wayne	16 (31.4%)	0	0	17 (33.3%)	0	0	0	18 (35.3%)	0	0	0

*Note: Two additional grantees, Anson and Brunswick counties, were approved but did not serve children.

Appendix A

Child- and Program-Specific Reporting Forms for Spring 2002

(For office use only) _ _ _ / **2001-2002**
Cnty   Year

Contract Administrator Form

6 items

Refer to Contract Administrator Form Instructions

1. Reporting date   *(mm-dd-yyyy)*

2. More at Four county or region

3. Administrative agency for More at Four contract

4. More at Four program contact name   *(person completing this form)*

5. More at Four program contact phone number   *(Include area code)*

6. Number of More at Four slots allocated for this grant by month   *(Enter a number for each month)*

January	February	March	April	May

End of Contract Administrator Form

Checklist:
- ✓ Make sure that everything is spelled correctly
- ✓ Make sure that all fields are filled out

- ✓ Print out the form for sending to FPG
- ✓ Print (or photocopy) a copy for your records
- ✓ Bundle forms together as explained in Instructions

Contract Administrator Form • Page 1   **More at Four Report**

Site Form

(For office use only) _ _ / _ _ _ _ / **2001-2002**
Cnty / Site / Year

Complete one for *each* Site

11 items

1. Reporting date *(mm-dd-yyyy)*   Refer to Site Form Instructions

2. County where More at Four Site is located

3. More at Four Site name

4. Type of agency this Site is part of:
   - Public school district: ....
   - Public charter school: ....

   (check all that apply and indicate name of agency)
   - Head Start: ....
   - Private for-profit child care center: ....
   - Private non-profit child care center: ....
   - Other: ....

5. More at Four Site Director/Principal name

6. Director/Principal phone number   *(include area code)*

7. Director/Principal information   *(Check all that apply)*

   Education
   - Ph.D. or Ed.D., *specify major*
   - Working toward Ph.D. or Ed.D.
   - MA/MS or higher degree, *specify major*
   - Working toward MA/MS or higher degree
   - BA/BS degree, *specify major*
   - Working toward BA/BS degree
   - AA or AAS degree, *specify major*
   - Working toward AA or AAS degree
   - High School diploma or GED
   - Less than or working toward High School or GED

   Certifications/Credentials
   - Principal's Certification
   - Working toward Principal's Certification
   - Child Care Administrator Certification (CCAC) Level III
   - Working toward CCAC Level III
   - Child Care Administrator Certification Level II
   - Working toward CCAC Level II
   - Child Care Administrator Certification Level I
   - Working toward CCAC Level I
   - Other *(specify below)*

8. Number of **operation days** for this site each month
   (Check the box next to each day that the site was in operation and serving children. Do not check a box for a teacher workday)

January 2002

Sun	Mon	Tue	Wed	Thur	Fri	Sat
		1	2	3	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	31		

February 2002

Sun	Mon	Tue	Wed	Thur	Fri	Sat
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28		

continued on next page

(For office use only) _ _ / _ _ _ _ / **2001-2002**
Cnty / Site / Year

March 2002

Sun	Mon	Tue	Wed	Thur	Fri	Sat
					1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

April 2002

Sun	Mon	Tue	Wed	Thur	Fri	Sat
	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30				

May 2002

Sun	Mon	Tue	Wed	Thur	Fri	Sat
			1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	

June 2002

Sun	Mon	Tue	Wed	Thur	Fri	Sat
						1
2	3	4	5	6	7	8
9	10	11	12	13	14	15
16	17	18	19	20	21	22
23	24	25	26	27	28	29
30						

9. Dates of teacher workdays at this site by month
   (Enter date or dates of teacher workdays for each month, formatted as mm/dd/yyyy)

January	February	March	April	May	June

10. End date of More at Four services
    (Enter date as mm/dd/yyyy or check NA)

11. Number of More at Four **slots allocated** for this site each month

January	February	March	April	May

End of Site Form

Checklist:
✓ Make sure that everything is spelled correctly
✓ Make sure that all fields are filled out
✓ Print out the form for sending to FPG
✓ Print (or photocopy) a copy for your records
✓ Bundle forms together as explained in instructions

Site Name:

Classroom Form

(For office use only) _ _ / _ _ _ _ / _ _ _ _ / **2001-2002**
Cnty   Site   Classroom   Year

Complete one for *each* classroom

Refer to Classroom Form Instructions

11 items

1. Reporting date   *(mm-dd-yyyy)*

2. County where Classroom is located   *(as on Site Form)*

3. Site where Classroom is located   *(as on Site Form)*

4. Type of classroom serving More at Four children:
(*Check all that apply. Specify if Other*)
- ☐ Head Start classroom
- ☐ Public pre-K classroom
- ☐ Private child care center classroom
- ☐ Other type of classroom, *specify below*

5. Classroom code   *(see Classroom Form Instructions)*

6. Date that first More at Four Child enrolled

7. More at Four classroom start time   *(hh:mm, am/pm)*

8. More at Four classroom end time   *(hh:mm, am/pm)*

9. Class size (*slots filled*) by month, including More at Four **and** non-More at Four children

January	February	March	April	May

10. Number of More at Four slots *allocated* for this **classroom** each month

January	February	March	April	May

continued on next page

Lead Teacher First
and Last Name:

Classroom Form • Page 1 of 3

More at Four Report

(For office use only) _ _ / _ _ _ _ / _ _ _ _ / **2001-2002**
Cnty   Site   Classroom   Year

11. More at Four Teachers
(Provide information on any Lead, Assistant, or Long-Term Substitute Teacher that was in the More at Four classroom. Enter information about the current Lead Teacher first.)

11a.

	First name	Last name	Entry date	Exit date
☐ Lead			☐ NA	☐ NA

Education *(Check all that apply)*
- ☐ MA/MS or higher degree, *specify major*
- ☐ Working toward MA/MS or higher degree
- ☐ BA/BS degree, *specify major*
- ☐ Working toward BA/BS degree
- ☐ AA/AAS degree, *specify major*
- ☐ Working toward AA/AAS degree
- ☐ High School diploma/GED
- ☐ Less than or working toward High School/GED

Certifications/Credentials *(Check all that apply)*
- ☐ NC teacher's license, *specify area*
- ☐ Another state's teacher's license, *specify area*
- ☐ Working toward teacher's license
- ☐ B-K or preschool add-on licensure
- ☐ Working toward B-K or preschool add-on licensure
- ☐ CDA (Child Development Associate) credential
- ☐ Working toward CDA credential
- ☐ NC early childhood credential
- ☐ Working toward NC early childhood credential
- ☐ Other, *specify*

11b.

	First name	Last name	Entry date	Exit date
☐ Lead ☐ Assistant ☐ Long-Term Substitute			☐ NA	☐ NA

Education *(Check all that apply)*
- ☐ MA/MS or higher degree, *specify major*
- ☐ Working toward MA/MS or higher degree
- ☐ BA/BS degree, *specify major*
- ☐ Working toward BA/BS degree
- ☐ AA/AAS degree, *specify major*
- ☐ Working toward AA/AAS degree
- ☐ High School diploma/GED
- ☐ Less than or working toward High School/GED

Certifications/Credentials *(Check all that apply)*
- ☐ NC teacher's license, *specify area*
- ☐ Another state's teacher's license, *specify area*
- ☐ Working toward teacher's license
- ☐ B-K or preschool add-on licensure
- ☐ Working toward B-K or preschool add-on licensure
- ☐ CDA (Child Development Associate) credential
- ☐ Working toward CDA credential
- ☐ NC early childhood credential
- ☐ Working toward NC early childhood credential
- ☐ Other, *specify*

11c.

	First name	Last name	Entry date	Exit date
☐ Lead ☐ Assistant ☐ Long-Term Substitute			☐ NA	☐ NA

Education *(Check all that apply)*
- ☐ MA/MS or higher degree, *specify major*
- ☐ Working toward MA/MS or higher degree
- ☐ BA/BS degree, *specify major*
- ☐ Working toward BA/BS degree
- ☐ AA/AAS degree, *specify major*
- ☐ Working toward AA/AAS degree
- ☐ High School diploma/GED
- ☐ Less than or working toward High School/GED

Certifications/Credentials *(Check all that apply)*
- ☐ NC teacher's license, *specify area*
- ☐ Another state's teacher's license, *specify area*
- ☐ Working toward teacher's license
- ☐ B-K or preschool add-on licensure
- ☐ Working toward B-K or preschool add-on licensure
- ☐ CDA (Child Development Associate) credential
- ☐ Working toward CDA credential
- ☐ NC early childhood credential
- ☐ Working toward NC early childhood credential
- ☐ Other, *specify*

continued on next page

Lead Teacher First
and Last Name:

Classroom Form • Page 2 of 3

More at Four Report

11d.

☐ Lead	First name	Last name
☐ Assistant		
☐ Long-Term		
☐ Substitute		

Entry date ☐ NA   Exit date ☐ NA

Education *(Check all that apply)*
☐ MA/MS or higher degree, *specify major*
☐ Working toward MA/MS or higher degree
☐ BA/BS degree, *specify major*
☐ Working toward BA/BS degree
☐ AA/AAS degree, *specify major*
☐ Working toward AA/AAS degree
☐ High School diploma/GED
☐ Less than or working toward High School/GED

Certifications/Credentials *(Check all that apply)*
☐ NC teacher's license, *specify area*
☐ Another state's teacher's license, *specify area*
☐ Working toward teacher's license
☐ B-K or preschool add-on licensure
☐ Working toward B-K or preschool add-on licensure
☐ CDA (Child Development Associate) credential
☐ Working toward CDA credential
☐ NC early childhood credential
☐ Working toward NC early childhood credential
☐ Other, *specify*

11e.

☐ Lead	First name	Last name
☐ Assistant		
☐ Long-Term		
☐ Substitute		

Entry date ☐ NA   Exit date ☐ NA

Education *(Check all that apply)*
☐ MA/MS or higher degree, *specify major*
☐ Working toward MA/MS or higher degree
☐ BA/BS degree, *specify major*
☐ Working toward BA/BS degree
☐ AA/AAS degree, *specify major*
☐ Working toward AA/AAS degree
☐ High School diploma/GED
☐ Less than or working toward High School/GED

Certifications/Credentials *(Check all that apply)*
☐ NC teacher's license, *specify area*
☐ Another state's teacher's license, *specify area*
☐ Working toward teacher's license
☐ B-K or preschool add-on licensure
☐ Working toward B-K or preschool add-on licensure
☐ CDA (Child Development Associate) credential
☐ Working toward CDA credential
☐ NC early childhood credential
☐ Working toward NC early childhood credential
☐ Other, *specify*

11f.

☐ Lead	First name	Last name
☐ Assistant		
☐ Long-Term		
☐ Substitute		

Entry date ☐ NA   Exit date ☐ NA

Education *(Check all that apply)*
☐ MA/MS or higher degree, *specify major*
☐ Working toward MA/MS or higher degree
☐ BA/BS degree, *specify major*
☐ Working toward BA/BS degree
☐ AA/AAS degree, *specify major*
☐ Working toward AA/AAS degree
☐ High School diploma/GED
☐ Less than or working toward High School/GED

Certifications/Credentials *(Check all that apply)*
☐ NC teacher's license, *specify area*
☐ Another state's teacher's license, *specify area*
☐ Working toward teacher's license
☐ B-K or preschool add-on licensure
☐ Working toward B-K or preschool add-on licensure
☐ CDA (Child Development Associate) credential
☐ Working toward CDA credential
☐ NC early childhood credential
☐ Working toward NC early childhood credential
☐ Other, *specify*

End of Classroom Form

Checklist:
✓ Make sure that everything is spelled correctly
✓ Make sure that all fields are filled out

✓ Print out the form for sending to FPG
✓ Print (or photocopy) a copy for your records
✓ Bundle forms together as explained in Instructions

Lead Teacher First
and Last Name:

Child Form — Page 1 of 4

(For office use only) _ _ / _ _ _ _ / _ _ _ _ _ / _ _ _ _ / **2001-2002**
Cnty / Site / Classroom / Child / Year

Child Form

Complete one for *each* More at Four child

22 items
Refer to Child Form Instructions

1. Reporting date *(mm/dd/yyyy)*

2. County where Child attends *(As on Classroom Form)*

3. Site name *(As on Classroom Form)*

4. Classroom code *(As on Classroom Form)*

5. Lead Teacher name

6. Child's first name

7. Child's middle initial

8. Child's last name

9. Child's date of birth *(mm/dd/yyyy)*

10. Child's identification numbers
(Check all boxes that apply and fill in all identification numbers available for Child.)
- ☐ Social Security number ....
- ☐ DHHS identification number ....
- ☐ SIMS identification number ....
- ☐ Other identification number ....

Specify type of ID number if Other.
Specify type of Other ID number

11. Child's gender *(Check one)*
- ☐ Female
- ☐ Male

12. Child's race *(Check all that apply)*
- ☐ White or European American
- ☐ Black or African American
- ☐ American Indian or Alaska Native
- ☐ Asian
- ☐ Native Hawaiian or Other Pacific Islander
- ☐ Spanish / Hispanic / Latino

continued on next page

Child's First and Last Name:

Child Form • Page 1 of 4

More at Four Report

Child Form — Page 2 of 4

(For office use only) _ _ / _ _ _ _ / _ _ _ _ _ / _ _ _ _ / **2001-2002**
Cnty / Site / Classroom / Child / Year

13. Child's More at Four risk criteria at time of enrollment
(For each factor, check one level. Minority Status may be "NA".)

Factor	Level 2 Significant Factor	Level 1 Potential Factor	Level 0 Negligible Impact
Family income	☐ Eligible for free lunch	☐ Eligible for reduced price lunch	☐ Ineligible
Child's health status	☐ Child is identified as mentally or physically chronically ill or medically fragile	☐ Child is seen or has been seen by a pediatric specialist for a chronic health concern	☐ Child has no significant health concerns
Identified special needs	☐ Child has a current Individualized Education Program (IEP)	☐ Child has an Individualized Family Service Plan (IFSP) but does not qualify for an Individualized Education Program (IEP)	☐ No special needs identified
Parent education	☐ Mother (or primary caregiver) does not have a high school diploma	☐ Mother (or primary caregiver) has a GED	☐ Mother (or primary caregiver) has a high school diploma
Parent employment	☐ Mother (or primary caregiver) is unemployed	☐ Mother (or primary caregiver) has been employed at current job for less than 12 months	☐ Mother (or primary caregiver) has been employed at current job for 12 months or more
Family composition	☐ Child lives with a single parent and there are compounding factors such as parental substance abuse or abuse/neglect	☐ Child lives with single parent	☐ Child lives with two parents
Housing stability	☐ Child has no stable place to live. Child may be homeless	☐ Child has lived at multiple addresses during the preceding 12 months	☐ Child has resided at the same address during the preceding 12 months
English proficiency	☐ Family and child do not speak English	☐ Family and child speak limited English	☐ Family and child speak English
Minority status *(Check appropriate level box or NA)* ☐ NA	☐ Child is a member of a minority group and demonstrates any 4 or more risk factors	☐ Child is a member of a minority group and demonstrates up to 3 risk factors	☐ Child is a member of a minority group and does not demonstrate any risk factors

14. Child's More at Four Service Priority Status at time of enrollment *(Check one. Specify if Other)*
- ☐ 1 Child has never been served in child care
- ☐ 2 Child is eligible for financial assistance for child care services but is not receiving any assistance
- ☐ 3 Child is currently being served in child care setting that does not meet More at Four program standards
- ☐ 4 Other, *specify below*

continued on next page

Child's First and Last Name:

Child Form • Page 2 of 4

More at Four Report

(For office use only) Cnty / Site / Classroom / Child / **2001-2002** Year

15. Has Child previously been served in a licensed or regulated child care setting? *(Check one)*
☐ No
☐ Yes

16. Number of adults (age 18 and older) residing in Child's household

17. Number of children (under age 18) residing in Child's household

18. County of current household residence

19. Date Child enrolled in More at Four: *(mm/dd/yyyy)*

20. Date Child withdrew from More at Four if before end of school year:
(Check NA if Child is still enrolled or enter date as mm/dd/yyyy)
☐ NA *(skip to Item 21)*

20a. If Child withdrew from More at Four, indicate reason: *(Check one)*
☐ Child moved out of service area
☐ Parent choice
☐ Unknown
☐ Other *(specify below)*

21. Number of days Child attended More at Four classroom each month
(Enter a number for each month or enter 0 if Child was not enrolled that month.)

January 2002 attendance	February 2002 attendance	March 2002 attendance	April 2002 attendance	May 2002 attendance

Child's First and Last Name:

(For office use only) Cnty / Site / Classroom / Child / **2001-2002** Year

22. Has this Child been referred for evaluation for a disability? *(Check one. Specify date of referral if Yes)*
☐ No *(Skip to end of Form)*
☐ Yes, <u>prior</u> to More at Four entry *(specify date)* Date of referral:
☐ Yes, <u>after</u> More at Four entry *(specify date)* Date of referral:

22a. What was the decision from the disability evaluation for this Child?
☐ No disability identified *(Skip to end of Form)*
☐ Evaluation decision in process *(Skip to end of Form)*
☐ One or more disabilities identified

22b. Type of identified disability(ies) for this Child *(Check all that apply)*
☐ Autistic
☐ Deaf-Blind
☐ Behaviorally/Emotionally Disabled
☐ Educable Mentally Disabled
☐ Hearing Impaired
☐ Specific Learning Disabled
☐ Multi-handicapped
☐ Other Health Impaired
☐ Orthopedically Impaired
☐ Speech/Language Impaired
☐ Severe /Profound Mentally Disabled
☐ Trainable Mentally Retarded
☐ Visual Impaired
☐ Traumatic Brain Injured
☐ Preschool Developmentally Delayed

22c. Does this Child have an active IEP? *(Check one)*
IEP=Individualized Education Plan
☐ No *(Skip to end of Form)*
☐ Yes

22d. Has this Child been referred for services related to disability? *(Check one)*
☐ No *(Skip to end of Form)*
☐ Yes

22e. Is this Child receiving services related to disability? *(Check one. Specify type of services if Yes)*
☐ No
☐ Yes *(Specify type of services)* Type of services:

Notes about this Child Form

End of Child Form

Checklist:
✓ Make sure that everything is spelled correctly
✓ Make sure that all fields are filled out
✓ Print out the form for sending to FPG
✓ Print (or photocopy) a copy for your records
✓ Bundle forms together as explained in Instructions

Child's First and Last Name:

Appendix B

Instructions for Child- and Program-Specific Reporting Forms for Spring 2002

General Instructions and Information

I. **This packet contains required More at Four Report Forms and Forms Instructions.** You as the Program Contact are responsible for making sure that all necessary forms are completely filled out, compiling the information, bundling all printed forms together, and sending the bundle to the FPG Child Development Institute.

II. **There are four levels of Report Forms, and they capture descriptive and service information.** These Year 1 reports will capture descriptive information AND service information through May 2002. This applies to all four levels of report forms. Each More at Four grant program is required to submit:

✓ one (1) completed Contract Administrator Form (1 page, 6 items)

(For office use only) __ / __ / __ Only 2001-2002 *Year*

Contract Administrator Form 6 items Refer to Contract Administrator Form Instructions

✓ as many completed Site Forms as there are More at Four Sites (2 pages, 11 items)

(For office use only) __ / __ / __ Only __ / __ *Site* / __ *Year* 2001-2002 *Year*

Site Form Complete one for each Site 11 items Refer to Site Form Instructions

✓ as many completed Classroom Forms as there are More at Four Classrooms (3 pages, 11 items)

(For office use only) __ / __ / __ Only __ / __ *Site* / __ *Classroom* 2001-2002 *Year*

Classroom Form Complete one for each classroom 11 items Refer to Classroom Form Instructions

✓ as many completed Child Forms as there are More at Four Children (4 pages, 22 items)

(For office use only) __ / __ / __ Only __ / __ *Site* / __ *Classroom* / __ *Child* / __ / __ 2001-2002 *Year*

Child Form Complete one for each More at Four child 22 items Refer to Child Form Instructions

A diagram showing how to bundle the **completed paper forms** for return is provided later in these instructions.

III. **Definitions of Reporting Levels**

Contract Administrator is the unit that administers the More at Four program at the county or region level (for example, Person County, or Region A).

Site is a service-level setting that hosts the More at Four classroom(s), for example, a child care facility, local school, or Head Start center. A site may be part of a larger agency such as a public school district.

Classroom is a classroom where one or more More at Four children are enrolled.

Child is any child who is *enrolled in* More at Four.

IV. **There are multiple ways to get the forms and instructions.**

(1) *As email attachments.* Save the email attachments (electronic files of blank copies of the four different forms and corresponding instructions) onto your computer.

(2) *Download from the Web.* You may download electronic files of blank copies of the four different forms and corresponding instructions from this Web site: **www.fpg.unc.edu/~mafeval/**. You can then save the files onto your computer.

(3) *In the FPG mailing.* You may wait for the mailing from the More at Four Evaluation Team at the FPG Child Development Institute and make photocopies of the included paper versions of the forms and instructions. This packet will also contain a CD with the electronic version all of the forms and instructions (use this CD if you were unable to get the email attachments or download from the Web).

General Instructions • Page 1 of 3

V. **Fill out the forms either on the computer (recommended) or with pen on paper.** With either method, you are to return the completed set of forms, **in paper copies only**, to the FPG More at Four Evaluation Team.

Method A) *(recommended)* Fill out the forms on your computer and print each one out. We encourage you to use this method.

To fill out the forms on your computer, you must have the Adobe Acrobat Reader program* (version 3.0 or higher) and the four form files. Open the first file that you want to work on. Type in your response to each blank or check the appropriate box. Use the Tab key or click with the mouse to move to the next blank. After filling out the entire form, print it. Please staple multi-page forms. Close the file.

(**Warning**: The Acrobat Reader does not allow you to save your filled in form.)

To proceed, open another blank form, type in responses, print the form, and staple the pages together. You only need to complete one Contract Administrator Form, but you'll (probably) need multiple Site, Classroom, and Child Forms.

* The free Adobe Acrobat Reader program is available from the Adobe web site:
http://www.adobe.com/products/acrobat/readstep.html

or

Method B) Fill out the forms with pen on paper. If you choose this method, print out and/or make as many photocopies of each form as you need for your More at Four program grant (or contact the FPG More at Four Evaluation Team to request copies). Make sure that responses are legible and the marks are clear.

VI. **Follow these guidelines for each form.**
Regardless of which method you choose to fill out forms, note:

♦ *ALL fields of all forms must be filled out.* Do not leave any of the questions unanswered unless you are asked to skip to a later item ("skip to Item 21," for example). Then you may leave the skipped items unanswered. Check NA if a question is not applicable.

♦ *Mark only in the boxes and blanks provided.* Do not write in the margins of the paper – these marks will not be processed. There is a space to type in Notes in the Child Form.

♦ *Make sure all pages of multi-page forms are stapled together.* Because every program is filling out these same forms, it is important that all pages of multi-page forms stay together.

VII. **There may be more than one way of getting the required information.**
The information may be housed at your More at Four contract administrator site and/or at your school/child care sites. You as the Program Contact may have the information you need to complete all four levels of these report forms. Or you may distribute report forms to be completed by the More at Four site(s) and/or classroom(s) in your county/region. Or you might collect the information another way.

VIII. **Bundle the completed forms as described.**
The diagram on the next page displays how the forms should be bundled (each More at Four grant program has one Contract Administrator, but grant programs have different numbers of Sites, Classrooms, and Children).

• Put all completed Child Forms from one classroom together.

• A completed Classroom Form goes on top of these to make a Classroom Report stack.

• Put all Classroom Report stacks from one site together.

• A completed Site Form goes on top of these to make a Site Report stack.

• Put all Site Report stacks together. The completed Contract Administrator Form goes on top.

• You will send this entire bundle to the FPG More at Four Evaluation Team.

General Instructions • Page 2 of 3

Contract Administrator Form Specific Instructions

Contract Administrator Form

(For office use only) ___ / ___
Date

2001-2002
Year

6 Items

Refer to Contract Administrator Form Instructions

Complete *one* Contract Administrator Form for your county/region. Answer all 6 items in this 1-page form.

1. **Reporting date** • Enter the date that the Contract Administrator Form was completed (formatted as mm/dd/yyyy).

   1. Reporting date   *(mm-dd-yyyy)*   05/23/2002

2. **More at Four county or region** • Enter the county or region where this More at Four grant program is administered.

   Ex: Dogwood County

   Ex: Region A

3. **Administrative agency for More at Four contract** • Enter the name of the agency handling the More at Four grant program -- usually a school district or a Smart Start partnership.

   Ex: Dogwood County School District

4. **More at Four program contact name** • Enter the name of the program contact person for this More at Four grant. This is the person who is responsible for completing the report forms.

   Ex: Chris Cardinal

5. **More at Four program contact phone number** • Enter the phone number for the program contact person (include the area code).

6. **Number of More at Four slots allocated for this grant by month** • Enter the number of slots allocated for More at Four children for this grant for each month through May 2002. The number of slots allocated might be the same for all months.

   6. Number of More at Four slots allocated for this grant by month   *(Enter a number for each month)*

January	February	March	April	May
120	120	120	124	124
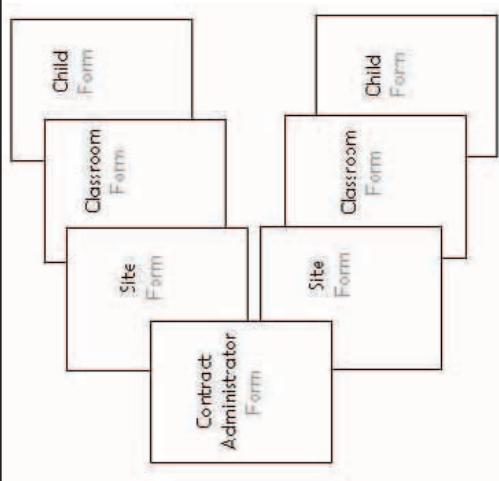
IX. **All forms are due to the FPG More at Four Evaluation Team by June 5th 2002.**

After completing and printing all forms, place them in an appropriately-sized envelope or box, attach the pre-paid, pre-addressed UPS mailer label provided for you by FPG, and arrange for a UPS pickup. You must send by *Tuesday June 4, 2002* in order to meet the June 5th deadline.

X. **FPG More at Four Evaluation Team contact information:**

Phone number: 919-843-3671 (call collect)

Email address: mafeval@unc.edu

Web site: www.fpg.unc.edu/~mafeval

> The ~ tilde symbol is usually located on the left side of the top row of your keyboard

Program Contacts may contact the FPG More at Four Evaluation Team with any questions. Please have Sites, Classrooms, and Teachers communicate with their local More at Four Program Contact.

More at Four Spring 2002 / Year 1 Report Instructions

Site Form Specific Instructions

Site Form
Complete one for each Site

(For office use only) ___ / ___ — — /
Cnty   Site

2001-2002
Year

11 items
Refer to Site Form Instructions

Complete one Site Form for each More at Four site in your county/region. Answer all 11 items in this 2-page form.

1. **Reporting date** • Enter the date that the Site Form was completed (formatted as mm/dd/yyyy).

   1. Reporting date   (mm-dd-yyyy)   05/23/2002

2. **County where More at Four Site is located** •
   Ex: Dogwood County

3. **More at Four Site name** •
   Ex: Dogwood Elementary School

4. **Type of agency this Site is part of** • Check the box next to the type of agency that this Site is part of, and then fill in the name of the agency.

   4. Type of agency this Site is part of: Dogwood County School District
   (check all that apply and indicate name of agency)
   - ☑ Public school district: ....
   - ☐ Public charter school: ....
   - ☐ Head Start: ....
   - ☐ Private for-profit child care center: ....
   - ☐ Private non-profit child care center: ....
   - ☐ Other: ....

5. **More at Four Site Director/Principal name** • Enter the name of the Site Director or Principal.
   Ex: Pat Emerald

6. **Director/Principal phone number** • Enter the phone number for the Principal/Director (include the area code).

7. **Director/Principal Education and Credentials/Certification information** • For both Education and Certifications/Credentials, check all that apply and fill in where requested.

Site Form Instructions • Page 1 of 2

---

7. Director/Principal information   (Check all that apply)

   Education
   - ☐ Ph.D. or Ed.D., specify major
   - ☐ Working toward Ph.D. or Ed.D.
   - ☑ MA/MS or higher degree, specify major
     Child Development
   - ☐ Working toward MA/MS or higher degree
   - ☑ BA/BS degree, specify major
     Psychology
   - ☐ Working toward BA/BS degree
   - ☐ AA or AAS degree, specify major
   - ☐ Working toward AA or AAS degree
   - ☐ High School diploma or GED
   - ☐ Less than or working toward High School or GED

   Certifications/Credentials
   - ☐ Principal's Certification
   - ☐ Working toward Principal's Certification
   - ☐ Child Care Administrator Certification (CCAC) Level III
   - ☐ Working toward CCAC Level III
   - ☑ Child Care Administrator Certification Level II
   - ☐ Working toward CCAC Level II
   - ☐ Child Care Administrator Certification Level I
   - ☐ Working toward CCAC Level I
   - ☐ Other (specify below)

8. **Number of operation days for this site each month** • For each month, January through June 2002, check the box next to each day that this site was in operation *serving children*. Do not check a box if the site was not serving any children that day (for example, do not check box for a teacher workday).

   Number of **operation days** for this site each month
   (Check the box next to each day that the site was in operation and serving children. Do not check a box for a teacher workday)

   January 2002

Sun	Mon	Tue	Wed	Thur	Fri	Sat
		1	2	3	4	5
6	7	8 ☑	9 ☑	10 ☑	11 ☑	12
13	14 ☑	15 ☑	16 ☑	17 ☑	18 ☑	19
20	21 ☑	22 ☑	23 ☑	24 ☑	25	26
27	28 ☑	29 ☑	30 ☑	31 ☑		

   February 2002

Sun	Mon	Tue	Wed	Thur	Fri	Sat
					1 ☑	2
3	4 ☑	5 ☑	6 ☑	7 ☑	8 ☑	9
10	11 ☑	12 ☑	13 ☑	14 ☑	15 ☑	16
17	18 ☑	19 ☑	20 ☑	21 ☑	22 ☑	23
24	25 ☑	26 ☑	27 ☑	28 ☑		

9. **Dates of teacher workdays at this site by month** • Enter all dates of teacher workdays January 2002 through June 2002 (formatted as mm/dd/yyyy).

   Dates of **teacher workdays** at this site by month
   (Enter date or dates of teacher workdays for each month, formatted as mm/dd/yyyy)

January	February	March	April	May	June
01/25/2002	02/22/2002		04/26/2002 04/29/2002	05/03/2002 05/06/2002	

10. **End date of More at Four services** • Enter the date of the last day that this site will be/was in operation *serving children for the More at Four program* this year (formatted as mm/dd/yyyy).

11. **Number of More at Four slots allocated for this site each month** • Enter the number of slots allocated for More at Four children at this site each month through May 2002. The number of slots allocated might be the same for all months.

    11. Number of More at Four **slots allocated** for this site each month

January	February	March	April	May
24	24	24	24	24

   ✎ If you fill out this form with pen to paper, you will need to write the Site Name on the bottom of the second page (this will be done automatically if you fill out the form using Adobe Acrobat).

Site Form Instructions • Page 2 of 2

More at Four Spring 2002 / Year 1 Report Instructions

Classroom Form Specific Instructions

Classroom Form
Complete one for each classroom
2001-2002 Year
11 items
Refer to Classroom Form Instructions

Complete one Classroom Form for *each* More at Four classroom in each Site. Answer all 11 items in this 3-page form.

1. **Reporting date** • Enter the date that the Classroom Form was completed (formatted as mm/dd/yyyy).

   1. Reporting date   *(mm-dd-yyyy)*   05/23/2002

2. **County where Classroom is located** • Enter the county where this Classroom is located.

   Example: *Dogwood County*

3. **Site name** • Enter the Site name that this Classroom is part of (same as Item 3 of Site Report Form).

   Ex: *Dogwood Elementary School*

4. **Type of classroom serving More at Four children** • Check all that apply. If the answer is "Other", specify.

   4. Type of classroom serving More at Four children:
   (Check all that apply. Specify if Other)
   - Head Start classroom
   - Public pre-K classroom
   - Private child care center classroom
   - Other type of classroom, *specify below*

5. **Classroom code** • Each classroom should be assigned a two-digit classroom code to distinguish it from other classrooms in the same Site. This code can be assigned by the More at Four Program Contact or by someone at the Site level. The classroom code is requested on the corresponding Child Report Form(s). For each site, start with "01" and continue assigning codes for each classroom at that site.

   Ex: At Dogwood Elementary School, the first classroom is assigned code "01." The next classrooms would be coded "02", "03", etc.
   At Magnolia Child Care Center, the first classroom is assigned code "01" and the next classrooms would be coded "02", "03", etc.

6. **Date that first More at Four child enrolled** • Enter the first date that this classroom began serving More at Four children (formatted as mm/dd/yyyy).

7. **More at Four classroom start time** • Enter the time of day that the More at Four classroom starts (if it starts at a different time on different days, enter the time that it *usually* starts). This start time might be the same time that non-More at Four classrooms start.

   Ex: 7:30 a.m.

8. **More at Four classroom end time** • Enter the time of day that the More at Four classroom ends/dismisses (if it ends at a different time on different days, enter the time that it *usually* ends). This end time might be the same time that non-More at Four classrooms end.

   Ex: 5:30 p.m.

9. **Class size (*slots filled*) by month, including More at Four and non-More at Four children** • Enter the class size for this classroom for each month through May 2002. This item is counting slots, not specific children. For non-More at Four children, if two part-time children share one slot, count this as one slot for class size. The class size might be the same for all months. In the following example, the class size was 16 in January, February and March, and then 15 in April and May.

Classroom Form Instructions • Page 1 of 2

---

9. Class size (*slots filled*) by month, including More at Four and non-More at Four children

January	February	March	April	May
16	16	16	15	15

10. **Number of More at Four slots *allocated* for this classroom each month** • Enter the number of slots allocated for More at Four children at this site each month through May 2002. The number of slots allocated might be the same for all months.

   10. Number of More at Four slots *allocated* for this **classroom** each month

January	February	March	April	May
2	2	2	2	2

11. **More at Four Teachers** • Enter information for each teacher who serves More at Four children. Enter information about the current Lead Teacher first. There are enough blank rows to enter information for up to five more teachers; fill in only as many as you need. For each:

   Indicate whether teacher is Lead, Assistant, or Long-Term Substitute;

   (Long-Term Substitute = teacher who substituted for at least 1 month);

   Enter the teacher's first name and last name;

   Enter the teacher's entry date IF the teacher began working in this classroom after the More at Four classroom started. Check NA if the teacher was teaching at the start of the More at Four classroom;

   Enter the teacher's exit date IF the teacher left before the end of the school year. Check NA if the teacher has not left (is still teaching or taught through May 2002).;

   Provide Education and Certification/Credentials for this teacher. Check all that apply and fill in where requested.

   Note: If a More at Four classroom has more than six teachers this year, please contact the FPG More at Four Evaluation Team via email or phone.

11. More at Four Teachers
   (Provide information on any Lead, Assistant, or Long-Term Substitute Teacher that was in the More at Four classroom. Enter information about the current Lead Teacher first.)

   11a. ☑ Lead | First name: Marta | Last name: Bass | Entry date: 02/01/2002 ☐ NA | Exit date: ☑ NA

   Education *(Check all that apply)*
   - MA/MS or higher degree, *specify major*
   - Working toward MA/MS or higher degree
   - ☑ BA/BS degree, *specify major* — Family Studies
   - Working toward BA/BS degree
   - AA/AAS degree, *specify major*
   - Working toward AA/AAS degree
   - ☑ High School diploma/GED
   - Less than or working toward High School/GED

   Certifications/Credentials *(Check all that apply)*
   - NC teacher's license, *specify area*
   - Another state's teacher's license, *specify area*
   - Working toward teacher's license
   - B-K or preschool add-on licensure
   - Working toward B-K or preschool add-on licensure
   - ☑ CDA (Child Development Associate) credential
   - Working toward CDA credential
   - NC early childhood credential
   - Working toward NC early childhood credential
   - Other, *specify*

   ✎ If you fill out this form with pen to paper, you will need to write the Lead Teacher Name on the bottom of the second and third pages (this will be done automatically if you fill out the form using Adobe Acrobat).

Classroom Form Instructions • Page 2 of 2

More at Four Spring 2002 / Year 1 Report Instructions

Child Form Specific Instructions

(For office use only) __/__ __/__ __/__ __/__ / **2001-2002**
Copy   Site   Classroom   Child   Year

Child Form
Complete one for each More at Four child

22 Items
Refer to Child Form Instructions

Complete one Child Form for *each* More at Four Child served. Answer all 22 items in this 4-page form.

1. **Reporting date** • Enter the date that the Child Form was completed (formatted as mm/dd/yyyy).

   Example: 5/16/2002

2. **County where Child attends** • Enter the county where the Child receives More at Four services.

   Ex: Dogwood County

3. **Site name** • Enter the Site name that this Child is part of (same as Item 3 of Classroom Form).

   Ex: Dogwood Elementary School

4. **Classroom code** • Enter the Classroom code for the classroom that this Child is part of (same as Item 5 of Classroom Form).

   Ex: 01

5. **Lead teacher name** • Enter the first name and last name of the current Lead Teacher for the classroom that this Child is part of (same as Lead Teacher in Item 11 of Classroom Form).

   Ex: Marta Bass

6. **Child's first name** • Enter the Child's first name.

   Ex: Rose

7. **Child's middle initial** • Enter the Child's middle initial (one letter only, no period).

   Ex: B

8. **Child's last name** • Enter the Child's last name.

   Ex: Elmwood

9. **Child's date of birth** • Enter the Child's date of birth (formatted as mm/dd/yyyy).

   Example: 10/19/1997

10. **Child's identification numbers** • Check box to indicate what type of identification number Child has and enter identification number. Check all boxes that apply and fill in as many identification numbers as Child has. DHHS identification number is assigned for the Early Intervention system. SIMS identification number is assigned for Department of Public Instruction (DPI) purposes.

10.	Child's identification numbers	
	(Check all boxes that apply and fill in all identification numbers available for child.	☑ Social Security number............ 123-45-6789
		☑ DHHS identification number......... hastd10191997
		☐ SIMS identification number.........
	Specify type of ID number if Other,)	☐ Other identification number.........
		Specify type of Other ID number ....

11. **Child's gender** • Check one box to indicate Child's gender or sex.

   Ex: ☐ Male
       ☑ Female

12. **Child's race** • Check all that apply to indicate Child's race. (These are race categories as they appear on the US census.)

Child Form Instructions • Page 1 of 4

---

12. Child's race   (Check all that apply)
    ☑ White or European American
    ☐ Black or African American
    ☑ American Indian or Alaska Native
    ☐ Asian
    ☐ Native Hawaiian or Other Pacific Islander
    ☐ Spanish / Hispanic / Latino

13. **Child's More at Four risk criteria at time of enrollment** •
   The risk criteria are based on the More at Four Program Guidelines. Check one of the three risk levels for this child for each More at Four risk factor (for example, family income, Child's health status). Check ONE risk level box for EACH factor – do not leave any factors blank. Note that Minority Status is a risk factor that may be "NA" and has this option box.

13. Child's More at Four risk criteria at time of enrollment

(For each factor, check one level. Minority Status may be "NA".)

Factor	Level 2 Significant Factor	Level 1 Potential Factor	Level 0 Negligible Impact
Family income	☐ Eligible for free lunch	☐ Eligible for reduced price lunch	☑ Ineligible
Child's health status	☐ Child is identified as mentally or physically chronically ill or medically fragile	☑ Child is seen or has been seen by a pediatric specialist for a chronic health concern	☐ Child has no significant health concerns
Identified special needs	☐ Child has a current Individualized Education Program (IEP)	☑ Child has an Individualized Family Service Plan (IFSP) but does not qualify for an Individualized Education Program (IEP)	☐ No special needs identified

14. **Child's More at Four Service Priority Status at time of enrollment** • These service priority categories are based on the More at Four Program Guidelines. Check one of the More at Four service priority status indicators for this Child. If Other, specify.

14. Child's More at Four Service Priority Status at time of enrollment

(Check one. Specify if Other)

☐ 1   Child has never been served in child care
☑ 2   Child is eligible for financial assistance for child care services but is not receiving any assistance
☐ 3   Child is currently being served in child care setting that does not meet More at Four program standards
☐ 4   Other, *specify below*

15. **Has Child previously been served in a licensed or regulated child care setting?** • Check one box to indicate whether or not this Child has ever been served in a licensed or regulated child care setting since birth.

   Ex: ☐ No
       ☑ Yes

16. **Number of adults (age 18 and older) residing in Child's household** • Enter number of adults (age 18 years and older) who reside in this Child's household.

   Ex: 3

17. **Number of children (under age 18) residing in Child's household** • Enter number of children (under age 18 years) who reside in this Child's household including this More at Four-eligible Child.

   Ex: 2

18. **County of current household residence** • Enter name of county in which this Child's household is currently located.

   Ex: Dogwood

Child Form Instructions • Page 2 of 4

22c. Does this Child have an active IEP? • Check one box to indicate whether or not this Child has an active IEP (Individualized Education Plan). If No, skip to the end of the form.

22d. Has this Child been referred for services related to disability? • Check one box to indicate whether or not this Child has been referred for services related to her/his identified disability. If No, skip to the end of the form.

22e. Is Child receiving services related to disability? • Check one box to indicate whether or not this Child has received services related to her/his identified disability. If services have been received, specify type of service(s) if known.

22e. Is this Child receiving services related to disability?
(Check one. Specify type of services if Yes)
☐ No
☑ Yes *(Specify type of services)*
Type of services:
audiology, speech therapy

Notes about this Child Form • If necessary, write in any notes about this Child Form here (remember that there should be no marks anywhere on the form except in the response boxes).

✎ If you fill out this form with pen to paper, you will need to write the Child's Name on the bottom of the second, third and fourth pages (this will be done automatically if you fill out the form using Adobe Acrobat).

Child Form Instructions • Page 4 of 4

---

19. Date Child enrolled in More at Four • Enter the date that this Child enrolled in the More at Four classroom (formatted as mm/dd/yyyy).
Ex: 3/15/2002

20. Date Child withdrew from More at Four if before end of school year • Enter the date that this Child withdrew from the More at Four classroom (formatted as mm/dd/yyyy) if date is before the end of the school year. If Child is absent for a period prior to being formally withdrawn, record withdrawal date as first date of absence. If Child is still enrolled, check NA - and skip to Item 21 and leave Item 20a blank.
Ex: If Child has been absent since April 4 and then formally withdrew from More at Four program on April 11, enter withdrawal date as 4/4/2002.

20a. If Child withdrew from More at Four, indicate reason • Check one box to indicate reason Child withdrew from More at Four. If Other, specify reason.

21. Number of days Child attended More at Four classroom each month • Enter the number of days that Child was present in the classroom for each month of More at Four operation in this classroom. For months for which the More at Four program did NOT operate or for which the child was not enrolled in this classroom, enter "0" (zero).
Ex: This is an attendance record in a classroom that was not operating as a More at Four classroom in January and began enrolling children February 4, 2002. This Child enrolled on March 7 and was present on 12 days in March, 3 days in April, and none of the days in May (because the Child withdrew from the More at Four classroom on April 4).

21. Number of days Child attended More at Four classroom each month
(Enter a number for each month or enter 0 if Child was not enrolled that month.)

January 2002 attendance	February 2002 attendance	March 2002 attendance	April 2002 attendance	May 2002 attendance
0	0	12	3	0

22. Has this Child been referred for evaluation for a disability? • Check one box to indicate if this Child has been referred for evaluation for a disability. If Yes, enter date of referral (formatted as mm/dd/yyyy). If No, skip to the end of the form and leave Items 22a – 22e blank.

22. Has this Child been referred for evaluation for a disability?
(Check one. Specify date of referral if Yes)
☐ No *(Skip to end of Form)*
☑ Yes, prior to More at Four entry *(specify date)*
Date of referral: 04/01/2001
☐ Yes, after More at Four entry *(specify date)*
Date of referral:

22a. What was the decision from the disability evaluation for this Child? • Check one box to indicate the decision status of this Child's disability evaluation. If No disability was identified or if the evaluation decision is still in process, skip to the end of the form.

22b. Type of identified disability(ies) for this Child • Check all that apply to indicate type of disability(ies) this Child has been identified with.

22b. Type of identified disability(ies) for this Child *(Check all that apply)*
☐ Autistic
☐ Deaf-Blind
☐ Behaviorally/Emotionally Disabled
☐ Educable Mentally Disabled
☑ Hearing Impaired
☐ Specific Learning Disabled
☐ Multi-handicapped
☐ Other Health Impaired
☐ Orthopedically Impaired
☑ Speech/Language Impaired
☐ Severe /Profound Mentally Disabled
☐ Trainable Mentally Retarded
☐ Visual Impaired
☐ Traumatic Brain Injured
☐ Preschool Developmentally Delayed

Child Form Instructions • Page 3 of 4