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| **OPENING REPORT Fiscal Year** **-**  |
| The director of the ECEC program shall submit an annual Opening Report and Program Staff Worksheet:* which includes data for each age group served by the program as well as data for each staff member
* to the **local conference office of education**
* the local conference ECEC liaison will forward a copy to the Pacific Union Conference ECEC
* by the September 15 or check with your local conference liaison
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| Pacific Union Conference | Local Conference:       |
| **PROGRAM INFORMATION** |
| [ ]  Church-based Program | [ ]  School-based Program |
| 1. Name of Program:
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| 1. Address:
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| Street Address |
|  |       |       |       |
|  | City | State | Zip |
| 1. Telephone:
 | Fax:       | E-mail:       |
| 1. Name of Director:
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| 1. Type of Program\* (check all that apply)
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|  | [ ]  Infant  | [ ]  Toddler | [ ]  A.M. Pre-School Only | [ ]  Pre-Kindergarten |
|  | [ ]  Pre-School and Child Care | [ ]  Before & After School Care | [ ]  School-age Summer Program |  |
| 1. Size of Program\*
 | Licensed Capacity | #       | Part-time Clients | #       | Full-time Clients | #       | Full-time Equiv | #       |
| **OPENING REPORT** |
| 1. Enrollment Total\*:
 | Date:       | 6 wks – 12 mos:       | 12 – 24 mos:       |
|  | 24 – 36 mos:       | 36 – 48 mos:       | 48 – 60 mos:       | 60 mos – school age:       | Special:       |
| 1. Religious Affiliation\*
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| How many children have at least one parent/guardian Adventist member? |       |
| Religious affiliation unknown |       |
| How many ECEC students are now attending Adventist kindergarten? |       |
| \*INSTRUCTIONS1. Check those that most closely describe the services of your program.
2. Breakdown of enrollment by contractual agreement. (See census worksheet )
3. Include all enrolled clients; full-time and part-time.
4. Provide a breakdown of religious affiliation based on whether or not the child has at least one Adventist parent/ guardian, or none.
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| **PROGRAM STAFF WORKSHEET** |
| Pacific Union Conference | Local Conference:       |
| Name of Program:       |
| **Staff Information** | **Total Number of Staff** |  |
| **NAME** OF EMPLOYEE\* | TITLE | MALE | FEMALE | PART TIME | FULL TIME | SDA CHURCH MEMBERSHIP | SDA ECEC PAR\*\* | SDA ELEM CRED | STATE CDC PERMIT | STATE ELEM CERT | LESS THAN 6 ECE SU\*\*\* | 6-12 ECE SU | 12 OR MORE ECE SU | AA W/12+ ECE SU | BA W/12+ ECE SU | MA W/12+ ECE SU | ADDITIONAL DATA |
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| \*EMPLOYEE INCLUDES ALL PERSONNEL, SUCH AS PROGRAM ADMINISTRATORS, TEACHERS, SUPPORT STAFF, STUDENT TEACHERS AND VOLUNTEERS. \*\*PROFESSIONAL ACHIEVEMENT RECOGNITION CERTIFICATION. \*\*\*SU = SEMESTER UNITS |

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| **PROGRAM STAFF WORKSHEET (continued)** |
| Name of Program:       |
| **Staff Information** |
| **NAME** OF EMPLOYEE\* | TITLE | MALE | FEMALE | PART TIME | FULL TIME | SDA CHURCH MEMBERSHIP | SDA ECEC PAR\*\* | SDA ELEM CRED | STATE CDC PERMIT | STATE ELEM CERT | LESS THAN 6 ECE SU\*\*\* | 6-12 ECE SU | 12 OR MORE ECE SU | AA W/12+ ECE SU | BA W/12+ ECE SU | MA W/12+ ECE SU | ADDITIONAL DATA |
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