

District Name and Code

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This paper form should not be returned to SED.

This paper form must only be used for the local gathering of data. Data represented in this form are required to be submitted to SED via the On-line BEDS IMF Application. Your district's BEDS Coordinator or Superintendent will have details for entering data into the On-line BEDS IMF Application and your district's protocol for doing so.

1. Enrollment in This District

a. Regular day school enrollment by grade in this district.

Note: Enrollment in this part "a" will cumulate automatically as each school's enrollment data are submitted online.

<i>Pre-K*</i>	<i>K (1/2-day)</i>	<i>K(full-day)</i>	<i>1</i>	<i>2</i>	<i>3</i>	<i>4</i>	<i>5</i>	<i>6</i>	<i>Ungr Elem.**</i>
<i>7</i>	<i>8</i>	<i>9</i>	<i>10</i>	<i>11</i>	<i>12</i>	<i>Ungr. Sec.**</i>	<i>Total</i>		

* Will automatically populate with the total number of all full- and part-time prekindergarten students reported in Item 1d below.

**Students with disabilities receiving all of their instruction from BOCES personnel (either in BOCES facilities, district classrooms or other facilities) should be excluded above, and reported in Item 4c.

b. Enter the number of students reported in Item 1a who are **not residents of this district** and for whom tuition is or could be charged and who are:

1. residents of New York State (exclude Pre-K and homeless students)

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2. **not** residents of New York State (exclude Pre-K and homeless students)

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c. Enter the number of non-resident students enrolled in this district that are participating in the voluntary **Inter-District Urban-Suburban Transfer Program**.

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d. Distribute the total number of students to be reported in the Pre-K section of Item 1a into the following:

	Universal Pre-K Funded Students (including former TPK Programs)		Number of Pre-K Students NOT Funded by UPK Money
	Number of UPK Students in District Operated Classrooms	Number of UPK Students in CBO Operated Settings	
Half - Day			
Full - Day			

e. Enter the number of **Universal Pre-K Students** reported in Item 1d who are **not residents** of this district and for whom tuition is or could be charged

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f. Enter the number of CBO-placed UPK students reported in 1d who are in the following Community-based Organization settings:

CBO Setting:	Number of Students	CBO Setting:	Number of Students
Day Care Center		Special Ed 4410 Preschool	
Head Start		Nonpublic School	
Family (incl. Group) Day Care		Museum	
Nursery School		Library	
BOCES		Other	

2. Enter the number of incarcerated youth served by this district who are in correctional facilities operated by a county or the City of New York, regardless of district of residence:

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3. Enter the number of resident students who are over the compulsory age of attendance, who are not included on any regular day school register, and who are in **equivalent attendance programs** operated by:

a. This district b. a BOCES c. Other

4. Enter the number of resident students for whom this district is paying or could be charged tuition for education outside of this district. Do not include students counted in Item 3 or Pre-Kindergarten students.

a. Students with disabilities enrolled full time in other public school districts.....	<input type="text"/>
b. General education students enrolled full time in other public school districts	<input type="text"/>
c. Students with disabilities enrolled full-time at BOCES	<input type="text"/>
d. General education students enrolled full-time at BOCES	<input type="text"/>
e. Students with disabilities attending schools under Sections 4201, 4402 or 4407 of the Education Law. (Include Special Act District placements and placements at state-supported nonpublic schools.)	<input type="text"/>
f. Students with disabilities attending the New York State School for the Blind at Batavia or the New York State School for the Deaf at Rome	<input type="text"/>

5. Home- or Hospital-bound Students – This Year (2009-10)

How many students currently unable to attend school are being instructed at home or in a hospital facility at district expense and have not been reported as enrolled in Item 1a or by any school in this district?.....	<input type="text"/>
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6. Home-bound Students – Last Year (2008-09)

How many students were instructed at home at district expense for the following number of days during the regular, 2008-09 school year (September through June)?		
a. Under 30	<input type="text"/>	b. 30 to 90
		<input type="text"/>
		c. Over 90
		<input type="text"/>

7. Children Instructed at Home

Are there children of compulsory school age in this district being educated at home by parents or a parent-employed tutor? Do not include children receiving home- or hospital-bound instruction by the district or BOCES. (Read complete definition in the instructions before completing this item.)

Yes ____ No ____

If Yes:

- a. Enter the number of households in which instruction is taking place
- b. Enter the number of children involved at the:
1. Elementary Level (grades K-6)
2. Secondary Level (grades 7-12)
- c. Of the total number of students reported in Items b1 and b2 above, how many students are known to have a disability?

8. Prekindergarten Teachers

How many teachers employed by this district teach exclusively at the prekindergarten level?

Full-time

Part-time

9. Title 1 Paraprofessionals

a. Enter the total number of **Title 1** paraprofessionals employed by this district as of October 7, 2009

b. Enter the number of "qualified" **Title 1** paraprofessionals employed by this district as of October 7, 2009

10. Total Professional Staff in This District. Total staff reported in this item must equal the number of persons completing BEDS personnel forms. Persons who complete a teaching form and a non-teaching form should be counted only once in the category that accounts for the greater portion of their time. *Be sure to count staff assigned to Central Office and staff who are shared between two or more schools. Do not include BOCES staff working in this district.*

(1) (2) (3) (4) (5) (6)

Staff Category		American Indian or Alaska Native	Black or African American (not Hispanic origin)	Asian or Pacific Islander	Hispanic or Latino	White (not Hispanic origin)	Multi-Racial (not Hispanic origin)	TOTAL
Full-time	Principals							
	Assistant principals							
	Teachers							
	Other professional staff							
Part-time	Principals							
	Assistant principals							
	Teachers							
	Other professional staff							

11. Other Staff in District

Type of Staff		Full-time	Part-time	Full-time Equivalence (FTE) of Part-time Only (to the nearest tenth)
Teaching Assistants*	Programs for students with disabilities			.
	Programs for students with limited English proficiency			.
	Occupational education programs			.
	All other programs			.
Teacher Aides	Programs for students with disabilities			.
	Programs for students with limited English proficiency			.
	Occupational education programs			.
	All other programs			.
Pupil personnel service aides				.
Library support staff				.
Health services staff				.
Other paraprofessional staff				.
Secretaries, typists, clerks				.
Maintenance workers, custodians				.
Bus drivers, mechanics				.
School lunch workers				.
Other support staff				.

*Report as teaching assistants only persons who actually hold licenses or certificates as teaching assistants.

12. Teachers of Core Academic Subjects Who Completed a HOUSSE

Enter the unduplicated count of teachers of classes in core academic subjects who completed the High Objective Uniform State Standard of Evaluation (HOUSSE) between July 1, 2008 and June 30, 2009 to become "highly qualified."	
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13. Homeless Children

a. Enter by grade the number of homeless children enrolled in this district during the 2008-09 school year.					
Grade Level	Number of Homeless	Grade Level	Number of Homeless	Grade Level	Number of Homeless
Pre-school (age 3)		Grade-4		Grade-9	
Prekindergarten		Grade-5		Grade-10	
Kindergarten		Grade-6		Grade-11	
Grade-1		Ungr. Elem.		Grade-12	
Grade-2		Grade-7		Ungr. Sec.	
Grade-3		Grade-8			
b. For the total number of homeless children reported above, provide the estimated number who had the following as their primary nighttime residence: (The sum of counts in Item 13a should equal the sum of counts in Item 13b.)					
Primary Nighttime Residence			Number of Homeless Children		
Shelters					

Doubled-up	
Hotels/Motels	
Transitional Housing	
Awaiting Foster Care	
Unsheltered (cars, parks, campgrounds, etc.)	

14. Appeals to Graduate with a Lower Score on a Regents Examination

a. Enter the number of appeals sought and granted between 7/1/08 and 6/30/09 for the following Regents Examinations: (Note: the highest score on the appealed exams must have been 62, 63 or 64)

Title of Regents Examination	Number of Appeals Sought	Number of Appeals Granted
Comprehensive English		
Mathematics A		
Mathematics B		
Global History and Geography		
U.S. History and Government		
Living Environment		
Physical Setting: Earth Science		
Physical Setting: Chemistry		
Physical Setting: Physics		
Other Regents		

b. How many students were granted appeals on two Regents exams in 2008-09..... _____

15. Resources Devoted to State and Federal Reporting

a. Enter the number of and extent to which 2008-09 staff time was devoted to state and federal reporting.

Staff Category	Number of Staff Assigned Full-time	Part-time Staff	
		Number of Staff Assigned Part-time	Full-time Equivalence of Part-time Staff
Professional			
Clerical & Support			

b. Does this district have someone designated as its Chief Information Officer (CIO) to coordinate state and federal reporting?.....YES NO

If the response to “b” above is YES:

c. What is the CIO’s 1) Last Name _____ First Name _____

2) E-mail address: _____

3) Telephone #: _____

d. Approximately what portion of a full-time position do the duties of the CIO consume?

one-quarter half-time three-quarters full-time

e. If the CIO duties require less than a full-time position, what is the CIO’s other primary responsibility? (check one)

District Administrator		Pupil Personnel Services	
School Administrator		Other Duties	
Teacher			

16. Computer and Technology Literacy (these questions are for federal reporting purposes)

a. Has this district effectively and fully integrated technology as defined by the State?

YES NO NA*

b. Enter the unduplicated counts of professional personnel achieving and not achieving acceptable performance on standards-based profiles of technology user skills during the 2008-09 school year as defined by the State:

Staff Category	Number of Personnel Achieving	Number of Personnel Not Achieving
Teachers		
Librarians		
Other Professional Staff		

c. Enter the number of eighth grade students, evaluated at the end of the eighth grade for school year 2008-09, who were evaluated as being either technology literate or not technology literate, or for whom evaluations were not done.

See directions for the NYSED definition of technology literacy.	Number of Eighth Grade Students Who Were Evaluated as being:
Technology Literate	
Not Technology Literate	
Not Evaluated for Technology Literacy	

d. Indicate whether or not this district has fully integrated acceptable use policies (AUP) in the areas indicated below as part of the district's Technology Plan:

1. Does the school district have an acceptable use policy for its students?	<input type="checkbox"/> yes	<input type="checkbox"/> no
2. Does the school district have an acceptable use policy for its staff?	<input type="checkbox"/> yes	<input type="checkbox"/> no
3. Does the school district have an acceptable use policy in its student handbook?	<input type="checkbox"/> yes	<input type="checkbox"/> no
4. Does the school district have an Internet filter that is in compliance with the Children's Internet Protection Act (CIPA)?	<input type="checkbox"/> yes	<input type="checkbox"/> no
5. Does the school district provide instruction for students on the responsible use of the Internet, including ethics and safety issues?	<input type="checkbox"/> yes	<input type="checkbox"/> no
6. Does the school district provide professional development for staff on the responsible use of the Internet, including ethics and safety issues?	<input type="checkbox"/> yes	<input type="checkbox"/> no

* Allowable response only if the district does not receive federal Title IID funds.

17. Office of the Superintendent

Provide, if one exists, for the **Office of the Superintendent**:

E-Mail Address: _____

FAX Number: _____

18. World Wide Web Address

Provide, if one exists, the **Web address (URL) for this district**:

http :// www._____

Contact Person

Person to contact if clarification of any item(s) is necessary:

Name: _____ Telephone: _____
(area code) (number)

Title: _____