ANNUAL GROUP PROGRAM QUESTIONNAIRE

LOWER SHORE CHILD CARE RESOURCE CENTER

Instructions: Please complete a separate questionnaire for each licensed program facility/site which you operate. Please follow all instructions carefully to insure accurate information is maintained on your facility(s) and programs. This questionnaire is for many different kinds of programs. If the question does not apply to you, please indicate with a "NR" (not relevant) in the space provided. If you have any questions, please call the LOCATE staff at (410) 548-3279 . Please return the completed questionnaire to: **Karen Goldman, Lower Shore Child Care Resource Center, Salisbury University, Suite 500, Power Professional Building, Salisbury, MD 21801**

PLEASE TYPE OR PRINT

Date_____

1. Name of facility/program _____
2. Address_____ Community/Development_____
3. City _____ 4. County _____
5. Zip _____ 6. Site Phone ( ) _____

   Fax ( )_____

   E-mail _____
7. Site Director _____
8. a. Please check all that describe your program:

_____child care center (provides care to 2-5 year olds)
_____infant program (provides care to children under 2 years old)
_____nursery school (preschool program approved by the MSDE)
_____kindergarten (private kindergarten approved by MSDE)
_____part-day program (part-time preschool program for 2, 3 or 4 year olds, licensed by OCC)
_____school-age program (kindergarten and older school-age children)
  _____full-time (accepts kindergarten and older school-age children for summer, school closings, and holidays)
  _____before kindergarten
  _____after kindergarten
  _____before school
  _____after school
_____summer program (offers summer care to kindergarten and older school-age children)
_____special education (program for children with disabilities, approved by MSDE)
_____Head Start (government-funded preschool for low-income children, 2-5 years old)
_____Early Head Start (government-funded program for low-income pregnant women, infants and toddlers)
_____pre-kindergarten (pre-kindergarten targeted to at-risk children)

b. If you indicated that you offer a school-age program, please check all of the activities your program offers:

_____Homework Help	_____Arts & Crafts	_____Community Service
_____Sports & Recreation	_____Performing Arts	_____Computer Activities
_____Tutoring	_____Ethnic/Cultural	

7/05.11

©Maryland Committee for Children, Inc., 2005.

(For Office Use: Map/Coordinates _____)