

Early Childhood Excellence Center Program Report

Reporting Period
April 1, 2004- September 30, 2004 (6 months) Due October 15, 2004

Please indicate on this sheet if there are any corrections to the following:

Grantee Name: PLEASANT PRAIRIE RENAISSANCE SCHOOL

II. Briefly list any classroom/center **physical quality improvements** you have implemented in the past 6 months (e.g. new learning materials, new equipment, and other physical improvements to your center).

Painting all classroom and hallways in progress, 10 new tricycles purchased for playground,

Purchased 6 new classroom/dorm size refrigerators, New playground mulch,

Purchased 4 new digital cameras and accessories for teachers and classroom use,

Purchased 2 new computers for parent use in lobby and main station (directors),

Replaced 2 recorders for listening centers, re-supplied all classrooms with fall

Materials, ie art supplies, batteries, calendars, felt boards, puppets, puppet theatre,

Refinished floors in all classrooms, housekeeping supplies, toddler tunnels, toddler mirrors, dress up clothes, purchased new books for all classrooms.

III. Please identify any **outside consultants** (e.g. nurse, event speakers, musician, artist, curriculum consultant, etc.), paid or not, who came to your center in the past 6 months. Estimate their total number of hours at your center and the total number of children they reached.

Type of Outside Contact	Was Consultant Paid ?	Estimated Number of Hours	Estimated Number of Children Reached
Magician	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	3	155
Firemen (2 visits)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	10	88
Nurse (asthma awareness) (2)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6	29
Nurse (Baby's healthy mind)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	3	20
Dentist	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	6	86
City Officials read to classrooms	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	2	78
Policemen visit	Yes <input checked="" type="checkbox"/> No	2	66
Food Service personnel	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1	66
Postal carrier	<input checked="" type="checkbox"/> No	2	66
Physician	<input checked="" type="checkbox"/> No	2	66

IV. Please summarize all **staff training events** sponsored by your center during the past 6 months, by category and total number of staff in attendance. Please include any other training not listed.

Staff Training Event	Total Number of Events	Total Number of Staff in Attendance	Comments
Classroom Curriculum / Child Development (classroom training, Birth to 3, etc)	2	30	Curriculum development
Health & Safety (SIDS, CPR, fire safety, etc)	2	26	Staff training and fire safety
Staff Career & Personal Development (career options, staff training, yoga, etc)	4	28	Monthly inservices on staff development
Other (please specify)	1	18	Housekeeping mtg for staff

V. Please summarize the total number of **family educational /social /participatory events** sponsored by your center in the past 6 months, and estimate the total number of participants.

Type of Family Event	Number of Events	Number of Total Participants
Family Education (managing money, reading to your child, cultural heritage, etc.)	4	56
Health & Safety Education (CPR, fire, nutrition, etc.)	3	39
Social Events (fun nights, holiday celebrations, etc.)	6	366
Teacher Conferences	2	41
Advisory Board Meetings		
Other major ways in which families are involved: Drop in visits daily by parents, parent volunteers		

VI. What was the most significant happening at your center in the past six months?

We hold annual food fests which are the biggest event. We added a fall festival with a petting zoo, which was a big hit with the families.

We have a very supportive group of parents. We think they are wonderful!!

Thank you for completing this Excellence Initiative program report. We look forward to finding out what is new with your center.