

Early Childhood Excellence Center Program Report

Reporting Period
October 1, 2004- March 31, 2005 (6 months) Due April 15, 2005

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

Grantee Name: JUST KID INN DAY CARE - 43RD ST

- 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).

None

- 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 Consultant	Was Consultant Paid ?	Estimated Number of Hours	Estimated Number of Children Reached
None	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		

	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		
	<input type="checkbox"/> Yes <input type="checkbox"/> No		

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)	1	6	
Health & Safety (SIDS, CPR, fire safety, etc)	6	53	
Staff Career & Personal Development (career options, staff training, yoga, etc)	1	28	
Other (please specify)			

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.)		
Health & Safety Education (CPR, fire, nutrition, etc.)	6	108
Social Events (fun nights, holiday celebrations, etc.)	1	55
Teacher Conferences	1	25
Advisory Board Meetings		
Other major ways in which families are involved:		

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

We have installed door and drawer locks in our kitchen areas for safety.

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