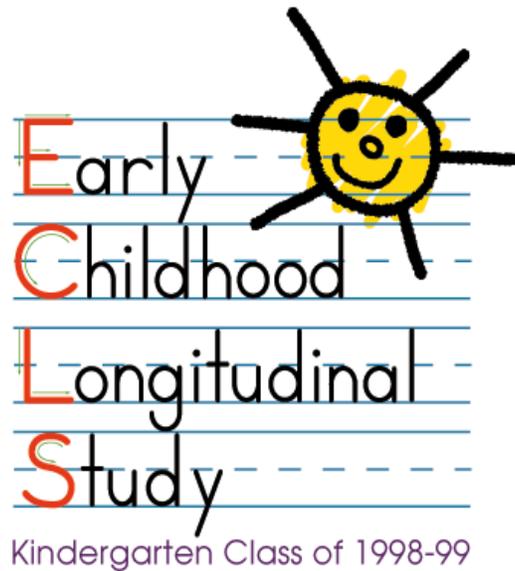


SPRING 2002 SCHOOL FACT SHEET



L A B E L

Prepared for the U.S. Department of Education
National Center for Education Statistics

by Westat
1650 Research Boulevard
Rockville, Maryland 20850
(301) 251-1500

Assurance of Confidentiality

The collection of information in this survey is authorized by Public Law 100-297 and continued under the auspices of Section 404(a) of the National Education Statistics Act of 1994, Title IV of the Improving America's Schools Act of 1994, Public Law 103-382. Participation is voluntary. You may skip questions you do not wish to answer; however, we hope that you will answer as many questions as you can. The information you provide will be kept confidential and will be protected to the fullest extent allowable under law. Information will be protected from disclosure by federal statute (20 USC 9003a —9007 as amended). Data will be combined to produce statistical reports. No individual data that links your name, address, telephone number, or identification number with your responses will be reported.

INTRODUCTION

Instructions for Completing this Form

This form is an important part of a major longitudinal study of children's early educational experiences beginning with kindergarten and continuing through grade 5.

This form collects information from your school records regarding your school and your attendance policies.

To complete this form, please refer to your school records and record your answers directly on the form by circling the appropriate number or by writing your responses in the spaces provided.

If you have questions about completing this form, please call the Respondent Hotline at 1-800-750-6206.

Thank you very much for your help.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is 1850-0750. The time required to complete this information collection is estimated to average 5 minutes per response, including the time to review instructions, search existing data resources, gather the data needed, and complete and review the information collected. If you have any comments concerning the accuracy of the time estimate or suggestions for improving the survey instrument, please write to: U.S. Department of Education, Washington, DC 20202-4651. If you have comments or concerns regarding the status of your individual response to this survey, write directly to: National Center for Education Statistics, 1990 K Street, N.W., Washington, DC 20006.

1. Circle all grade levels included in your school.

- a. Ungraded..... 1
- b. Programs for special needs children..... 2
- c. Prekindergarten..... 3
- d. Kindergarten..... 4
- e. 1st..... 5
- f. 2nd..... 6
- g. 3rd 7
- h. 4th..... 8
- i. 5th..... 9
- j. 6th..... 10
- k. 7th..... 11
- l. 8th..... 12
- m. 9th..... 13
- n. 10th..... 14
- o. 11th..... 15
- p. 12th..... 16

2. Is this a public school? CIRCLE ONE NUMBER.

- a. Yes 1 **(GO TO Q3)**
- b. No 2 **(SKIP TO Q4)**

3. Is your school a... CIRCLE ONE NUMBER ON EACH LINE.

	<u>Yes</u>	<u>No</u>
a. Regular public school (do not include a magnet school or school of choice)?	1	2
b. School with a magnet program (e.g., science/math school, foreign language immersion school)?	1	2
c. School of choice (charter school, open enrollment, non-specialized curriculum)?.....	1	2
d. Bureau of Indian Affairs (BIA) or tribal school?	1	2
e. Special Education school – primarily serves children with disabilities?	1	2
f. Early Childhood Center (school/center includes preschool and/or early elementary grades?	1	2

SKIP TO Q5

THANK YOU FOR YOUR COOPERATION

Please return this completed questionnaire in the envelope provided to:

Galen McKeever
Westat
9274 Gaither Road, W-14
Gaithersburg, Maryland 20877-1420

Or you may give it to the ECLS-K field supervisor at your school.

OFFICE USE ONLY

C	1
DR C	2
DR R	3
R	4