## **NEW YORK STATE**

## CONSOLIDATED FISCAL REPORT

For the Period: July 1, 2012 to June 30, 2013

SCHEDULE SED-1
PROGRAM AND
ENROLLMENT DATA

											Page
AGE	AGENCY NAME:										
AGENCY CODE:											
SCHOOL CODE:											
	COLUMN NUMBER										
Line	PROGRAM NAME										
No.	PROGRAM CODE (PROGRAM CODE INDEX)		( )		( )		( )		( )		( )
	ENROLLMENT (FTE)		SCHOOL								
	BY FUNDING SOURCE	SUMMER	YEAR								
	Non-disabled-UPK										<u> </u>
	Non-disabled-Other										
	Sec.4402 (Art.89) Sch. Dist. Placement										<del> </del>
	Department of Health Chapter 428										
	Sec.4408 (Art.89) Sch. Dist. Placement										
	Sec.4410 (3-4 yr.olds) Sch. Dist. Placement Local Social Services District										<del>                                     </del>
	Other										
	Total by Funding Source (Sum Lines 102-107)										
	Number of Days in Session										
	Care Days (Line 108 times Line 109)										
	Actual SEIS or SEIT Units Provided										
	Approved Classroom Ratio										
	Number of Classrooms										
	Student FTE										
	Approved Classroom Ratio										
	Number of Classrooms										
	Student FTE										
	Approved Classroom Ratio										
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	Student FTE										
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	Number of Classrooms										
	Student FTE										
	Approved Classroom Ratio Number of Classrooms										
	Student FTE										
	Approved Classroom Ratio Number of Classrooms										<del></del>
	Student FTE										
999	Total Student FTE										<u> </u>

Note: Line 108 must reconcile to line 999.