## **NEW YORK STATE**

## CONSOLIDATED FISCAL REPORT

For the Period: July 1, 2010 to June 30, 2011

SCHEDULE SED-1
PROGRAM AND
ENROLLMENT DATA

Page .

AGENCY NAME: AGENCY CODE: SCHOOL CODE: **COLUMN NUMBER** Line PROGRAM NAME No. PROGRAM CODE (PROGRAM CODE INDEX) ENROLLMENT (FTE) SCHOOL SCHOOL SCHOOL SCHOOL SCHOOL BY FUNDING SOURCE SUMMER YEAR **SUMMER** YEAR SUMMER YEAR **SUMMER** YEAR SUMMER YEAR 100 Non-disabled-UPK 101 Non-disabled-Other 102 Sec.4402 (Art.89) Sch. Dist. Placement 103 Department of Health Chapter 428 104 Sec.4408 (Art.89) Sch. Dist. Placement 105 Sec.4410 (3-4 yr.olds) Sch. Dist. Placement 106 Local Social Services District 107 Other 108 Total by Funding Source (Sum Lines 102-107) 109 Number of Days in Session 110 Care Days (Line 108 times Line 109) 115 Actual SEIS or SEIT Units Provided 201 Approved Classroom Ratio 202 Number of Classrooms 203 Student FTE 301 Approved Classroom Ratio 302 Number of Classrooms 303 Student FTE 401 Approved Classroom Ratio 402 Number of Classrooms 403 Student FTE 501 Approved Classroom Ratio 502 Number of Classrooms 503 Student FTE 601 Approved Classroom Ratio 602 Number of Classrooms 603 Student FTE 701 Approved Classroom Ratio 702 Number of Classrooms 703 Student FTE 801 Approved Classroom Ratio 802 Number of Classrooms 803 Student FTE 901 Approved Classroom Ratio 902 Number of Classrooms 903 Student FTE 999 Total Student FTE