BASIC EDUCATIONAL DATA SYSTEM (BEDS)

REPORT OF NONPUBLIC SCHOOLS

FALL 2015

All nonpublic schools are encouraged to submit their BEDS Report of Nonpublic schools electronically by way of the On-line BEDS IMF application. If your school opts to report via the on-line application, then returning this paper document to SED is not necessary. Your principal or other chief school officer will have details concerning the On-line BEDS IMF application.

ENTER BEDS CODE NUMBER AND SCHOOL NAME IN THIS AREA

PERSON COMPLETING THIS FORM

Name _____

Title _____

Phone _____
Area Code Number

E-Mail Address _____

Signature _____

School's Web Address: _____

The University of the State of New York
THE STATE EDUCATION DEPARTMENT
Information and Reporting Services - Room 865 EBA
Albany, New York 12234
dataquest@mail.nysed.gov

1. BEDS CODE

2. SCHOOL NAME

3. ENROLLMENT IN THIS SCHOOL AS OF OCTOBER 7, 2015

	American Indian or Alaska Native		Black or African American (not Hispanic origin)		Asian		Native Hawaiian or Other Pacific Islander		Hispanic or Latino		White (not Hispanic origin)		Multi-Racial (not Hispanic origin)		Total Enrollment
	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	Male	Female	
Prekindergarten															
Kindergarten (1/2-day)															
Kindergarten (full-day)															
First															
Second															
Third															
Fourth															
Fifth															
Sixth															
Ungraded Elementary*															
Seventh															
Eighth															
Ninth															
Tenth															
Eleventh															
Twelfth															
Ungraded Secondary*															

** Students with Disabilities who do not have a grade level assigned to them.*

4. COUNT OF STUDENTS BY DISTRICT OF RESIDENCE

These data are being collected for textbook aid purposes.				
A. New York State Residents		Number of Pupils		
District of Residence	District Code**	Pre-K	K-6*	7-12*
1.				
2.				
3.				
4.				
5.				
6.				
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				
21.				
22.				
23.				
24.				
25.				
B. Out-of-State and/or Out-of-Country Residents				
C. Other Ineligibles				
TOTAL COUNT OF STUDENTS ***				

**K-6 includes ungraded elementary and 7-12 includes ungraded secondary students.*

**An alphabetical listing of public school districts and their six-digit district codes is available at www.p12.nysed.gov/irs/

Note: Please visit the following website – http://schools.nyc.gov/schoolsearch/ if you need assistance in locating the correct NYC Geo District for NYC residents.

The sum of PreK , K-6 and 7-12 students must match the Total Enrollment for all grades listed in Item #3.

NOTE: Please attach additional pages if needed.

5. PROFESSIONAL STAFF IN THIS SCHOOL

Title	Full-time		Part-time		Total
	Elementary (PK-6)	Secondary (7-12)	Elementary (PK-6)	Secondary (7-12)	
Principal or Chief Executive Officer					
Assistant Principals					
Supervisors and Department Heads					
Teachers					
Librarians					
Guidance Counselors					
Other Professional Staff					

6. FOREIGN LANGUAGE INSTRUCTION IN THIS SCHOOL

Is this school offering foreign language instruction during the 2015-16 school year? Yes ☐ No ☐

If Yes, indicate student enrollment and number of teachers by the grade levels specified for each language offered

DO NOT INCLUDE PRE-K STUDENTS

LANGUAGE	Grade Level					
	K-6		7-9		10-12	
	Enrollment	Teachers	Enrollment	Teachers	Enrollment	Teachers
1. French						
2. Spanish						
3. German						
4. Italian						
5. Russian						
6. Hebrew						
7. Latin						
8. Other (Specify) _____						

7. LIMITED ENGLISH PROFICIENT STUDENTS (Formerly ELLs)

Does this school have students who are limited English proficient (LEP)?…….. Yes ☐ No ☐

If **Yes**, enter the number of students by grade range:

Pre-K	K-6	7-12
NA		

8. FREE AND REDUCED-PRICE LUNCH

A. Do students in this school qualify for the federal free and/or reduced-price-lunch program? Yes ☐ No ☐

B. Does this school participate in a free and/or reduced-price lunch program?…….…… Yes ☐ No ☐

C. If either "A" or "B" above is Yes, for students enrolled in this school, enter by grade level the number of approved applicants for free and reduced-price lunches. Enter zeroes where appropriate. CEO schools refer to instructions.

NOTE: Counts are needed even if this school has a Provision 2 Agreement.

	Pre-K	K-6*	7-12**
FREE	NA		
REDUCED	NA		

D. If this school has a free and/or reduced-price lunch program, is the program available to half-day kindergarten students? Yes ☐ No ☐ NA ☐ No half day program

** Including ungraded elementary.* *** Including ungraded secondary.*

9. STUDENTS SUPPORTED BY PUBLIC FUNDS UNDER CONTRACT WITH A PUBLIC SCHOOL DISTRICT

This item applies only to private schools approved for reimbursement with public funds for educating children with disabilities.

Enter the number of students, by grade, who are attending this school as of October 7, 2015 and whose tuition is supported by public funds under contract with a public school district.

Pre-K	K(1/2-day)	K (full-day)	1	2	3	4	5	6	Ungr. Elem.*
7	8	9	10	11	12	Ungr. Sec.*	Total		

Students with Disabilities not assigned to a grade

10. COMPUTER RESOURCES

A. Enter the number of computing devices located in the following areas (DO NOT include obsolete or surplus computers):

Location:	Total	Location:	Total
1. Classrooms or science labs		4. Administrative or PPS offices and other non-instructional areas	
2. Computer technology labs		5. Mobile computer labs	
3. Library/Media centers		6. Total Computers	--auto-generated--

B. Enter the total number of peripheral devices used for instructional purposes:

1. Printers ☐ 2. Scanners ☐ 3. Cameras ☐ 4. Speakers ☐

C. Approximately what percentage of teachers in this school have a computer in their classroom? (Select one.)

1. 0 to 20 % 2. 21 to 40 % 3. 41 to 60 % 4. 61 to 80 % 5. 81 to 100 %

11. INTERNET CONNECTIVITY

A. Of the total number of computing devices used for instruction reported in question 10A (#s 1, 2, 3 and 5), how many have Internet access in the following categories:

Dial-up ☐ High-speed/Broadband (Wired or Wireless) ☐ No Internet Connectivity ☐

B. How many devices, other than the computers reported above, does this school possess that can connect to the Internet and are used primarily by students for instructional purposes? (See instructions for examples.)…….. ☐

C. Does this school provide individual E-mail accounts to: (check all that apply)

☐ Administrators ☐ Teachers ☐ Students

12. DISTANCE LEARNING/ONLINE LEARNING

A. Does this school use distance learning/online learning?…….. **Yes** ☐ **No** ☐

If you have answered **YES** to Part "A" above:

B. Which of the following does this school use for distance learning/online learning:

1. E-mail correspondence? ……. **Yes** ☐ **No** ☐
2. Internet content (e.g., connected University)? ……. **Yes** ☐ **No** ☐
3. One-to-one, real-time video conferencing (e.g., CUSeeMe, I-chat)?…… **Yes** ☐ **No** ☐
4. Synchronous, multi-point (one to many or many to many) real-time video conferencing? …….. **Yes** ☐ **No** ☐
5. Online instruction?.....……. **Yes** ☐ **No** ☐
6. Other: (please specify) _____

13. LIBRARY/LIBRARY MEDIA CENTER (LMC)

A. Facility

1. Does this school have a school library/LMC or access to a shared school library/LMC in this building? ..... **Yes** ☐ **No** ☐

If NO, skip to Item 14 on the next page.

2. Does another school in this building share this school library? …….. **Yes** ☐ **No** ☐

B. Resources as of October 7, 2015

1. Total number of **books** in this school library/LMC (traditional paper copy)…….……. ☐
2. Total number of **electronic books** that are cataloged and available in this school library/LMC ……. ☐
3. Total number of **non-book materials** that are cataloged and processed in this school library/LMC……..... ☐
4. Total number of **database subscriptions**, including those provided by NOVEL (statewide) regional library council, School Library System, or other library consortia …….……. ☐
5. Total **number** of computers with **Internet access** in this school library/LMC ……..……... ☐
6. a. Does the library have an **automated system** to access library resources? ……..……. **Yes** ☐ **No** ☐
   b. If yes, is this school's library catalog available on the Internet? …….……. **Yes** ☐ **No** ☐
7. Is this school a participant in a School Library System (SLS)? ……..……..…… **Yes** ☐ **No** ☐
8. Does the library have a Web presence in the form of a Web page or Web Portal?..... **Yes** ☐ **No** ☐
9. Is this library equipped with an **LCD projector**?..... **Yes** ☐ **No** ☐
10. Is this library equipped with an **interactive white board**?..... **Yes** ☐ **No** ☐

C. Program

1. How many hours is the library media center **staffed and open for student use**? (Check one.)

a. fewer than 10 hours a week ☐ b. 10-20 hours a week ☐ c. open during all school hours ☐ d. open during all school hours and before and/or after school ☐

2. Which of the following terms BEST describes the method used to schedule school library classes? (Select one)

☐ a. Fixed/Block: classes scheduled at regularly specified times
☐ b. Flexible: open schedule, i.e., scheduled at varying times according to need
☐ c. Mixed: some classes block scheduled; some classes flexibly scheduled
☐ d. No classes are scheduled

3. Collaboration and integration

a. Does the LMS **collaborate and plan** with classroom teachers for instruction? **Yes** ☐ **No** ☐

b. Do classroom teachers accompany students to the library for whole-class instruction? **Yes** ☐ **No** ☐

c. Are **library and information literacy skills** taught and **integrated** into core academic areas to meet the NYS Learning Standards? (Check all that apply)

English Language Arts	☐	Career Dev & Occupational Studies (CDOS)	☐
Math, Science & Technology (MST)	☐	The Arts (Dance, Music, Theatre, Visual Arts)	☐
Social Studies	☐	Health, Phys Ed, Family & Consumer Science	☐
Languages Other than English (LOTE)	☐	Other	☐

4. Does the library promote **Inquiry- or Problem-based learning activities?**.....**Yes** ☐ **No** ☐

14. OPERATIONAL STATUS

A. Indicate with a checkmark whether this school is for profit or is nonprofit:

For Profit ☐ Nonprofit ☐

B. Please specify, if Nonprofit, whether the school is operated by:

1. Education Corporation (with Regents Charter) ☐
2. Religious Corporation ☐
3. Unincorporated Religious Organization ☐
4. Not-For-Profit Corporation (NFP) ☐

**Name on incorporation papers must match name on BEDS application (front page). Stated corporate purpose must specify authority to operate the grades cited on page 3 of the application*.

15. CERTIFICATION

I certify that the information provided on this form is correct:

CEO Name: _____

CEO Title: _____ Date: _____

CEO E-Mail Address: _____

CEO Telephone: _____ CEO Fax: _____

Schools Web Address (if applicable) _____