

BASIC EDUCATION DATA SYSTEM (BEDS) BOCES SUMMARY FORM FALL 2021

Introduction

Before completing the form, refer to the BOCES BEDS Form Instructions located here: <http://www.p12.nysed.gov/irs/beds/IMF/home.html>. This paper form must only be used for the local gathering of data. Data represented in this form are required to be submitted to SED via the online IRS Data Exchange (IDEx) application at <http://portal.nysed.gov>. Your BOCES BEDS Coordinator or District Superintendent will have details concerning the online BEDS IMF form. Please visit <https://bedsvadirsupport.nysed.gov/> for more information.

BOCES Name:

BEDS Code:

1. Enrollment Counts

1A. Full-Time BOCES Enrollment for Prekindergarten and Ungraded Students

Ethnicity and Gender	Prekindergarten (all Pre-K programs)	Ungraded Elementary Students with Disabilities (under age 12- school age children only)	Ungraded Secondary Students with Disabilities (age 12 or over – school age children only)
American Indian or Alaska Native – Male			
American Indian or Alaska Native – Female			
American Indian or Alaska Native – Nonbinary			
Black or African American – Male (not Hispanic origin)			
Black or African American – Female (not Hispanic origin)			
Black or African American – Nonbinary (not Hispanic origin)			
Asian – Male			
Asian – Female			
Asian – Nonbinary			
Native Hawaiian or Other Pacific Islander – Male			
Native Hawaiian or Other Pacific Islander – Female			
Native Hawaiian or Other Pacific Islander – Nonbinary			
Hispanic or Latino – Male			
Hispanic or Latino – Female			
Hispanic or Latino – Nonbinary			
White – Male (not Hispanic origin)			
White – Female (not Hispanic origin)			
White – Nonbinary (not Hispanic origin)			
Multi-Racial – Male (not Hispanic origin)			
Multi-Racial – Female (not Hispanic origin)			
Multi-Racial – Nonbinary (not Hispanic origin)			
Total Enrollment			

1B. Prekindergarten

Distribute the total number of Pre-K students reported in item 1A (above) into the following program areas

Day Length	Universal Pre-K Programs (including former TPK programs)	Other Prekindergarten Programs
Half-Day		
Full-Day		

1C. Total Prekindergarten

Enter the Sum Total of all Prekindergarten students reported in 1B.

1D. Alternative Education Programs

Alternative Education Programs are designed for students who wish to pursue individualized approaches to achieving academic standards. Report only Alternative Education Programs that meet Part 100.5 requirements of Commissioner’s Regulations for credit toward a local or Regents high school diploma.

Enter the enrollment for any students in grades 7-12 enrolled full time in this BOCES in Alternative Education Programs leading to a Local or Regents high school diploma. (Students to be reported here are not on the register of a home district and are not included in Item 1A above.)

Grade	7	8	9	10	11	12
Enrollment						

2. Paraprofessional and Nonprofessional Staff

Enter the number of BOCES staff and FTE for the positions listed below:

Type of Staff	Full-time	Part-time	Full-time Equivalence Of Part-time <u>Only</u>
TEACHING ASSISTANTS*			
Programs for students with disabilities			.
Programs for ELL students			.
Occupational education programs			.
All other programs			.
TEACHER AIDES			
Programs for students with disabilities			.
Programs for ELL students			.
Occupational education programs			.
All other programs			.
OTHER			
Pupil personnel service aides			.
Library support staff			.
Health services staff			.
Other paraprofessional staff			.
Secretaries, office support staff, clerks			.
Maintenance workers, custodians			.
Bus drivers, mechanics			.
School lunch workers			.
Other support staff			.

****Report as teaching assistants only persons who actually hold licenses or certificates as teaching assistants.***

3. Title I Paraprofessionals

Number of Title I paraprofessionals and "certified" Title I paraprofessionals employed by this BOCES.

Enter the number of **Title 1** paraprofessionals employed by this BOCES as of October 6, 2021:

Enter the number of **"certified" Title 1** paraprofessionals employed by this BOCES as of October 6, 2021:

4. Person Completing This Form

Name:

Title:

Phone (including area code):

Fax (including area code):

E-Mail Address: