

NEW YORK STATE
CONSOLIDATED FISCAL REPORT
For the Period: January 1, 2000 to December 31, 2000

SCHEDULE SED-1
PROGRAM AND
ENROLLMENT DATA

Page _____

AGENCY NAME: _____
AGENCY CODE: _____
SCHOOL CODE: _____

Line No.	COLUMN NUMBER										
	PROGRAM NAME:										
	PROGRAM CODE:										
	ENROLLMENT (FTE) BY FUNDING SOURCE	SUMMER	SCHOOL YEAR	SUMMER	SCHOOL YEAR	SUMMER	SCHOOL YEAR	SUMMER	SCHOOL YEAR	SUMMER	SCHOOL YEAR
100	Non-disabled										
101	Sec.4402 (Art.89) Sch. Dist. Placement										
102	Department of Health Chapter 428										
103	Sec.4408 (Art.89) Sch. Dist. Placement										
104	Sec.4410 (3-4 yr olds) Sch. Dist. Placement										
105	Local Social Services District										
106	Other										
107	Total by Funding Source (Sum Lines 101-106)										
108	Number of Days in Session										
109	Care Days (Line 107 times Line 108)										
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	Total Student FTE (sum lines 203,303,403,503)										

Note: Line 107 must reconcile to line 601.