



STATE OF MISSOURI
 DEPARTMENT OF ELEMENTARY AND SECONDARY EDUCATION
 FEDERAL FINANCIAL MANAGEMENT
 P.O. BOX 480, JEFFERSON CITY, MISSOURI 65102-0480
**ANNUAL SURVEY OF CHILDREN IN LOCAL INSTITUTIONS FOR NEGLECTED OR
 DELINQUENT CHILDREN OR IN CORRECTIONAL INSTITUTIONS, TITLE I, ESEA**

This report is required by Title I of the Elementary and Secondary Education Act of 1965, as amended, sections 1124, 1402, 1411, and 1412. Failure to submit this report will result in the loss of funds to the local educational agency to provide services to meet the special educational needs of the children residing in this institution.

FISCAL YEAR

2014

SECTION I – INSTITUTION AND SCHOOL DISTRICT

1. LEGAL NAME AND ADDRESS OF INSTITUTION	3.A. NAME OF LOCAL PUBLIC SCHOOL DISTRICT IN WHICH CHILDREN RESIDING IN THIS INSTITUTION ATTEND SCHOOL	
	3.B. ADDRESS OF PUBLIC SCHOOL DISTRICT	
2. TYPE OF INSTITUTION (CHECK ONLY ONE BOX TO IDENTIFY THE TYPE OF INSTITUTION BEING REPORTED.) <input type="checkbox"/> “An Institution for Neglected Children” - A public or private residential facility, other than a foster home, that is operated for the care of children who have been committed to the institution or voluntarily placed in the institution under applicable State law, due to abandonment, neglect, or death of their parents or guardians. <input type="checkbox"/> “An Institution for Delinquent Children” – A public or private residential facility for the care of children who have been adjudicated to be delinquent or in need of supervision.	3.C. NAME OF COUNTY IN WHICH SCHOOL DISTRICT IS LOCATED	
	4. LEGAL OR ADMINISTRATIVE BASIS FOR DESIGNATION OF THIS INSTITUTION, AS INDICATED IN ITEM 2	
	5. DATES OF 30-DAY TIME PERIOD Start Date: _____ End Date: _____	
2A. INDICATE YOUR INTENTION TO PARTICIPATE IN THE TITLE I FEDERAL EDUCATIONAL PROGRAM. <input type="checkbox"/> Yes, we intend to participate. <input type="checkbox"/> No, we have determined not to participate.	6. CASELOAD (See Instructions)	
	A. Total number of children, ages 5-17, inclusive, who live in the institution for at least one day during a 30 consecutive day period, at least one day of which falls within the month of October 2012.	
	B. How many of the total number of students listed in section A attended the public schools?	
		C. How many of the total number of students listed in section A attended institutional school programs?

SECTION II – CERTIFICATION BY CHIEF ADMINISTRATIVE OFFICIAL OF INSTITUTION

I CERTIFY that the information provided on this form is, to the best of my knowledge, complete and accurate. A knowingly false claim on this report is a criminal offense under U.S. Code, Title 18, Section 1001 or Section 287.

SIGNATURE	DATE SIGNED
PRINT NAME AND TITLE	TELEPHONE NUMBER
EMAIL ADDRESS	FAX NUMBER

MO 500-0294 (09-12)

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INSTRUCTIONS

(For the Preparation for Form No. 500-0294, Annual Survey of Children in Local Institutions for Neglected or Delinquent Children or in Correctional Institutions, Title I, ESEA)

The purpose of this annual survey is to provide the U.S. Department of Education and the Missouri Department of Elementary and Secondary Education with current information on the location and number of children living in institutions for neglected or delinquent children. The information is needed for the formula that will be used to compute school year 2013-2014 allocations for local educational agencies responsible for providing education for institutionalized neglected or delinquent children.

In some cases, education for children in a State-operated institution is provided by the local education agency. The institution should be included in this survey of children in local institutions unless there are specific arrangements for reimbursement for the State agency responsible for providing free public education.

A separate report should be completed for each institution that meets the requirements of the definitions in Section I, Item 2, of the survey form.

SECTION I - INSTITUTION AND SCHOOL DISTRICT

- 1. Name and Address of Institution** - Enter legal name and address of institution. If the name of the institution has changed since last year, please show the old name in parentheses.
- 2. Type of Institution** - Check only one box to identify the type of institution being reported. If an institution does not meet the definitions of institutions cited in the Title I regulations, it **SHOULD NOT BE INCLUDED** for purposes of this survey. Please note that the category of an institution should not change from year to year unless there has been an official change in the purpose for which the institution is operated. For example, if an institution is operated for the care of neglected children, but the majority of the children residing in the institution during October are children adjudicated to be delinquent, the institution should still be reported as an institution for neglected children until its charter or purpose is officially changed to show that it is an institution operated for the care of delinquent children. Consistency in reporting from year to year is necessary.
 - A. Participation** – Indicate your intention to participate in the Title I federal educational program.
- 3. Name of Local (PUBLIC) School District**
 - A.** Enter the name of the school district in which the children residing in this institution attend school.
 - B.** Enter the address of the school district in which the children residing in the institution attend school.
 - C.** Identify the county in which the school district is located.
- 4. Legal or Administrative Basis for Designation of this type of Institution**

State precisely the legal or administrative basis upon which this institution has been designated as an institution primarily for neglected children, or adjudicated delinquent children, or as a correctional institution housing children aged 5-17 inclusive. The legal or administrative basis could include one of the following: (a) basis for State license, (b) charter, (c) appropriate legal citations, (d) recognition by a welfare agency.
- 5. 30-Day Counting Period**

Enter the dates of the 30-day time period that was chosen to report the caseload in 6A. The 30 consecutive day period chosen by your institution can be any 30 consecutive day window between September 2 and November 29, 2012 (ie. September 15 through October 14, 2012).
- 6. Caseload Data**
 - A.** Enter the total number of children, ages 5-17, inclusive, who live in the institution for at least one day during a 30 consecutive day period, **at least one day** of which falls within the month of October 2012. This data will be used in the Title I formula for the computation of grants. There should be documentation available to support the caseload data reported in this item since this count generates Title I funds and is subject to audit.
 - B.** Enter the number of children who attend public schools.
 - C.** Enter the number of children who attend institutional school programs.

SECTION II - CERTIFICATION BY CHIEF ADMINISTRATIVE OFFICIAL OF INSTITUTION

This report must be signed by the Chief Administrative Official of the institution to certify that the information reported is complete and accurate.