CCSA Preschool Literacy Services Application Durham County 2020-2021

Name of Child Care Program		 -	
Child Care License #	Date Current Licen	se Issued	
Email Address Contact Person Street Address			
Contact Person	Title		
Street Address	City	Zip Code	
Mailing Address (if different)	<u>-</u>		
Mailing Address (if different) Telephone Number Type of Program (check one)	F;	3X	
	Small Center (29 childrom)Medium Center (30-80Large Center (81 childrom)	children)	
Has your program ever received	Technical Assistance from	sno If yes, how many? Child Care Services Association?	
YesN If yes: Dates Name of Technical Assistance S	taff		
Please provide the following info having receive Literacy Services		ol (ages 3-5) classroom(s) you are interested	in
Preschool Classroom One			
Teacher Name Experience Level (years)		_	
Education Level			
		?	
Number of children Ag		·	
Is this an NC Pre-K class?	jes of efficient		
Please give us some information		in this classroom:	
Preschool Classroom Two Teacher Name		_	
Experience Level (years)			
Education Level		0	
		?	
Number of children Aç	ges of children	_	
Is this an NC Pre-K class?			
Please give us some information	about the curriculum used	in this classroom:	

Please describe what you believe to be the strengths of your program in the area of literacy:		
Please describe what you believe to be the weaknesses of your program in the area of literacy:		

Thank you for taking the time to complete this application. The answers to your questions will help us provide you with personalized literacy support, uniquely designed to meet your program needs.

Please return to:

Monnie Griggs at monnieg@childcareservices.org





This project is supported by the Durham's Partnership for Children, a Smart Start initiative