DEPARTMENT OF DEFENSE CHILD DEVELOPMENT PROGRAM ANNUAL SUMMARY OF OPERATIONS

INSTRUCTIONS

Complete the following information for your Service. If information is available for Reserve and other child development programs under your Service's jurisdiction, complete a separate form. Date of record for specific entries noted by an asterisk (*) is the last Wednesday in September of each fiscal year.

1. BRANCH OF SERVICE/DEFENSE AGENCY	**2. TIME PERIOD COVERED** *(YYYY1001 to YYYY0930)*

3. TOTAL INSTALLATIONS PROVIDING CARE*

a. Center Based Care Only		b. In-Home Care Only		c. Resource & Referral (R&R)/ Supplemental Programs only	
(1) On-Installation		(1) On-Installation			
(2) Off-Installation Subsidized by Service		(2) Off-Installation Subsidized by Service		d. Combination of center-based and in-home care	
(3) Both On and Off Installation		(3) Both On and Off Installation			
				e. Combination of center-based, in-home, and R&R/Supplemental	

4. TOTAL FACILITIES*		**5. OPERATIONAL CAPACITY***		**6. OPERATIONAL CAPACITY BY AGE GROUP IN CHILD DEVELOPMENT CENTERS***	
a. Separate Child Development Centers		a. On-Installation Child Development Center			
		b. Off-Installation Child Development Center subsidized by the Service		a. Infants *(0 - 12 months)*	
b. Licensed In-Home Care Homes located on the installation				b. Pretoddlers *(13 - 24 months)*	
		c. On-Installation In-Home Care		c. Toddlers *(25 - 36 months)*	
c. Licensed In-Home Care Homes located off the installation		d. Off-Installation In-Home Care		d. Preschool *(37 months - 5 years)*	
		e. Resource & Referral Supplemental Programs		e. School-Age *(5 - 12 years)*	
				f. **TOTAL**	

7. PAID ENROLLMENT ON DATE OF RECORD*					
CHILDREN OF	**CENTER**	**ON-BASE IN-HOME CARE**	**OFF-BASE IN-HOME CARE**	**SUP/R&R**	**TOTAL**
a. Active Duty Military					
b. DoD Civilian					
c. Reservists on Active Duty or during inactive duty personnel training					
d. Contractor					
e. Coast Guard					
f. Other *(Specify)*					

8. NUMBER OF CHILDREN WITH SPECIAL NEEDS ENROLLED IN THE CHILD DEVELOPMENT PROGRAM*

9. FISCAL YEAR NONAPPROPRIATED FUND (NAF) FINANCIAL DATA FOR CHILD DEVELOPMENT CENTERS	
a. NAF income generated from parent fees	

10. IN-HOME CARE DIRECT CASH SUBSIDY	
a. Separate Child Development Centers	
b. Licensed In-Home Care Homes located on the installation	
c. Licensed In-Home Care Homes located off the installation	

11. HOW MANY OF THE FOLLOWING TRAINING AND CURRICULUM SPECIALISTS POSITIONS ARE:	
a. Currently authorized*	b. Currently filled*

12. TOTAL DIRECT/NON-SUPERVISORY SERVICE POSITIONS FILLED* *(APF/NAF/Contractor)*			
NAF		**APF**	
a. CC 1		f. GS 2	
b. CC 2		g. GS 3	
c. CC 3		h. GS 4	
d. CC 4		i. GS 5	
e. CC 5		j. GS 6/7	
Total NAF		Total APF	
Total Contractor			

13. NUMBER OF DIRECT SERVICE STAFF WHO ARE FAMILY MEMBERS OF ACTIVE DUTY* *(Spouse Employment)*	**14. NUMBER OF DIRECT SERVICE STAFF RECEIVING BENEFITS***

15. NUMBER OF DIRECT SERVICE STAFF IN THE FOLLOWING CATEGORIES*			
NAF:		APF:	
a. Regular		c. Full-Time	
b. Flex		d. Part-Time	

16. NUMBER OF CHILD CARE SPACES THAT CANNOT BE FILLED DUE TO LACK OF STAFF*

17. ACCREDITATION*	
a. Total number of eligible centers	
b. Number of eligible centers accredited	
c. Total number of on-base in-home care homes accredited	
d. Total number of off-base in-home care homes accredited	

18. DOD CERTIFICATION*	
a. Number of Child Development Programs DoD certified	
b. Number of Child Development Programs without current certification	
c. Number of Child Development Programs operating under a waiver	

19. REMARKS *(Attach additional pages if necessary)*

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