

Missouri Nonpublic School Accrediting Association

EARLY CHILDHOOD ANNUAL REPORT FORM

(Use tab key or arrows to move between fields)

SCHOOL DATA

CURRENT SCHOOL YEAR **2022-2023** DATE COMPLETED [Click or tap to enter a date.](#)

YEAR OF LAST SCHOOL IMPROVEMENT PLAN [Choose an item.](#):

SCHOOL: [Click or tap here to enter text.](#)

ADDRESS: [Click or tap here to enter text.](#)

City/State: [Click or tap here to enter text.](#)

Zip: [Click or tap here to enter text.](#)

ADMINISTRATOR: [Click or tap here to enter text.](#)

PHONE NUMBER: [Click or tap here to enter text.](#)

ENROLLMENT (Ages: [Choose an item.](#) through: [Choose an item.](#))

TOTAL ENROLLMENT: (Current Year) [Click or tap here to enter text.](#)

Does the school/center offer an Exceptional Learning Needs Program or is it a Special Learning Needs School? [Choose an item.](#)

STATUS OF SCHOOL IN PREVIOUS YEAR: [Choose an item.](#)

INDICATORS OF MEMBERSHIP

Please select YES from the drop down menu for all the indicators that the school fulfills. If the indicator is only partially fulfilled or not fulfilled at all, select NO. An explanation of the circumstances preventing the fulfillment of particular indicator(s) and the steps that will be taken to address these indicators must be included on page 5 of this form.

Membership & Philosophy		Leadership		Personnel		Curriculum	
1A	Choose an item.	3A	Choose an item.	4A	Choose an item.	5A	Choose an item.
1B	Choose an item.	3B	Choose an item.	4B	Choose an item.	5B	Choose an item.
1C	Choose an item.	3C	Choose an item.	4C	Choose an item.	5C	Choose an item.
1D	Choose an item.	3D	Choose an item.	4D	Choose an item.	5D	Choose an item.
1E	Choose an item.	3E	Choose an item.	4E	Choose an item.	5E	Choose an item.
1F	Choose an item.	3F	Choose an item.	4F	Choose an item.	5F	Choose an item.
		3G	Choose an item.	4G	Choose an item.	5G	Choose an item.
	Climate	3H	Choose an item.	4H	Choose an item.	5H	Choose an item.
2A	Choose an item.	3I	Choose an item.	4I	Choose an item.	5I	Choose an item.
2B	Choose an item.	3J	Choose an item.	4J	Choose an item.	5J	Choose an item.
2C	Choose an item.	3K	Choose an item.	4K	Choose an item.	5K	Choose an item.
2D	Choose an item.	3L	Choose an item.	4L	Choose an item.	5L	Choose an item.
2E	Choose an item.	3M	Choose an item.	4M	Choose an item.	5M	Choose an item.
2F	Choose an item.	3N	Choose an item.	4N	Choose an item.		
2G	Choose an item.	3O	Choose an item.	4O	Choose an item.		
2H	Choose an item.	3P	Choose an item.	4P	Choose an item.		
2I	Choose an item.	3Q	Choose an item.				
2J	Choose an item.	3R	Choose an item.				

2K	Choose an item.	3S	Choose an item.				
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Instruction		Services		Facilities		Finance and Planning	
6A	Choose an item.	7A	Choose an item.	8A	Choose an item.	9A	Choose an item.
6B	Choose an item.	7B	Choose an item.	8B	Choose an item.	9B	Choose an item.
6C	Choose an item.	7C	Choose an item.	8C	Choose an item.	9C	Choose an item.
6D	Choose an item.	7D	Choose an item.	8D	Choose an item.	9D	Choose an item.
6E	Choose an item.	7E	Choose an item.	8E	Choose an item.	9E	Choose an item.
6F	Choose an item.	7F	Choose an item.	8F	Choose an item.	9F	Choose an item.
6G	Choose an item.	7G	Choose an item.	8G	Choose an item.	9G	Choose an item.
6H	Choose an item.	7H	Choose an item.	8H	Choose an item.	9H	Choose an item.
6I	Choose an item.	7I	Choose an item.	8I	Choose an item.	9I	Choose an item.
6J	Choose an item.	7J	Choose an item.	8J	Choose an item.	9J	Choose an item.
6K	Choose an item.	7K	Choose an item.	8K	Choose an item.		
6L	Choose an item.	7L	Choose an item.	8L	Choose an item.		
6M	Choose an item.	7M	Choose an item.	8M	Choose an item.		
6N	Choose an item.	7N	Choose an item.	8N	Choose an item.		
6O	Choose an item.	7O	Choose an item.	8O	Choose an item.		
		7P	Choose an item.	8P	Choose an item.		
				8Q	Choose an item.		
				8R	Choose an item.		
				8S	Choose an item.		
				8T	Choose an item.		
				8U	Choose an item.		

Supplemental Program Indicators of Membership

Complete only if you have an Exceptional Learning Needs program at your school.

Exceptional Learning Needs School or Program	
10A	Choose an item.
10B	Choose an item.
10C	Choose an item.
10D	Choose an item.
10E	Choose an item.
10F	Choose an item.
10G	Choose an item.
10H	Choose an item.

PLAN FOR IMPROVEMENT

Please list activities/strategies implemented during the current (2022-2023) school year.

PLAN FOR IMPROVEMENT

Please list activities/strategies to be implemented in the next (2023-2024) school year.

CURRENT DEVIATIONS IN INDICATORS

Give a brief explanation of circumstances that prevent the fulfillment of any of the indicators to which a "no" was given on pages 1-2. Also include the steps that will be taken to address this indicator. (Include a separate sheet if necessary.)

MEMBERSHIP INDICATOR NUMBER

EXPLANATION OF DEVIATION IN INDICATORS

CITED VIOLATIONS FROM PREVIOUS YEAR

List below the violations cited by the Association in the previous year's report. Explain progress made. (Use a separate sheet if necessary.)

INDICATOR NUMBER:

EXPLANATION OF PROGRESS MADE

All material included on this Annual Form is accurate and complete.

Signature of Administrator

Return this form to your Sponsoring Agency with annual dues payable to your Sponsoring Agency.

FOR USE OF SPONSORING AGENCY:

It is the opinion of the Sponsoring Agency of this school that all policies and procedures of said agency are adequately followed and that the school's Plan for Improvement demonstrates a viable plan for school improvement.

Signature of Sponsoring Agency Director
