

Head Start Reports

Sample Selections

Sample Reports

30 Days Empty Slots

Select by Program, School Year, Center and Class and the date to show if there are and how many empty slots that have been empty for 30 Days or more. Select to Group By Program or by Class.

ABS001DomDomain/HeadStart/General/30 Days Empty Slots

Agency Name	Minnesota Community Action Partnership	Program Name	099HeadStart_pg	View Report
School Year	2009-2010	GroupBy	Program	
Center	%	Class	%	
Report Date	5/31/2010			

30 Days Empty Slots - Grouped by Program

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Minnesota Community Action Partnership
099HeadStart_pg
30 Days Empty Slots

Program: 099HeadStart_pg School Year: 2009-2010 Report Date: 5/31/2010

Center	Total number of slots in the class (open or filled)	Enrollment number for the class at the start of the thirty days	Enrollment number for the class at the end of the 30 days	Number of empty slots open for 30 days
All class in 099HeadStart_pg				
	41	40	40	1

30 Days Empty Slots - Grouped by Class

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Minnesota Community Action Partnership
099HeadStart_pg
30 Days Empty Slots

Program: 099HeadStart_pg School Year: 2009-2010 Report Date: 5/31/2010

Center	Total number of slots in the class (open or filled)	Enrollment number for the class at the start of the thirty days	Enrollment number for the class at the end of the 30 days	Number of empty slots open for 30 days
WestHSCenter				
ComboCenterWest1	3	3	3	0
ComboHomeWest1	3	3	3	0
Home1West	3	3	3	0
West1AM	3	3	3	0
West2PM	3	3	3	0
West3AM-5Day	3	3	3	0
West4PM-5Day	3	3	3	0
Main Office - MinnCAP				
Main1AM	5	5	5	0
Main2AM	5	4	4	1
Main3PM	5	5	5	0
Main4Full5DayClass	5	5	5	0

30 Days Empty Slots Funding

Select by Program, School Year, Funding, and Date.

/AES001DomDomain/HeadStart/General/30 Days Empty Slots Funding

Agency Name: Program Name: [View Report](#)

School Year: Funding:

Report Date:

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Minnesota Community Action Partnership
099HeadStart_pg
30 Days Empty Slots for Funding
Program: 099HeadStart_pg School Year: 2009-2010 Report Date: 5/31/2010

Funding	Total Funding Slots	Enrollment number for the funding at the start of the thirty days	Enrollment number for the funding at the end of the 30 days	Number of funding slots open for 30 days
099 Federal HS	26	24	24	2
099 State HS	15	15	15	0
Total	41	39	39	2

Age Eligible Children – Listing of children

Select by Date, Start and End Age, and Applied to Program

/AES001DomDomain/HeadStart/General/AgeEligibleChildren

Agency: Date: [View Report](#)

Start Age: End Age:

Applied:

7/26/2010

Minnesota Community Action Partnership
HeadStart Age-Eligible Children as of 9/1/2010

ChildName	Age	Date of Birth	Head of Household	Primary Phone	Secondary Phone	Home Address	Mailing Address	Already Applied to HeadStart?
Anderson, Harry	4	6/3/2006	Anderson, Paul	(777)-777-7777x Cell Phone	(555)-555-5555x Work Phone	765 Burns Avenue Hopkins, MN 55343		Yes
Anderson, Sam	4	6/3/2006	Anderson, Paul	(777)-777-7777x Cell Phone	(555)-555-5555x Work Phone	765 Burns Avenue Hopkins, MN 55343		No
Bengston, Cathy	4	8/5/2006	Bengston, Fred	(888)-888-8888x Cell Phone	(555)-555-5555x Work Phone	987 Campbell Drive Hopkins, MN 55343		Yes
Bengston, James	4	8/5/2006	Bengston, Fred	(888)-888-8888x Cell Phone	(555)-555-5555x Work Phone	987 Campbell Drive Hopkins, MN 55343		Yes
Clemens, Jason	4	6/2/2006	Clemens, John	(333)-333-3333x Cell Phone	(444)-444-4444x Work Phone	123 Eaton Avenue W Hopkins, MN 55343		Yes
Davis, Sam	4	1/5/2006	Davis, Jane	(555)-555-5555x Home Phone		123 Pine Hackensack, ND 55555		Yes
Erickson, Rex	4	6/3/2006	Anderson, Paul	(777)-777-7777x Cell Phone	(555)-555-5555x Work Phone	765 Burns Avenue Hopkins, MN 55343		Yes
Erickson, Rose	4	6/3/2006	Anderson, Paul	(777)-777-7777x Cell Phone	(555)-555-5555x Work Phone	765 Burns Avenue Hopkins, MN 55343		Yes
Flaco, Junior	4	2/4/2006	Flaco, Dana			456 Oak Street W Hopkins, MN 55343		Yes
Foster, Sam	4	3/2/2006	Smith, Mary	(222)-222-2222x Work Phone	(666)-666-6666x Cell Phone	765 Oak Street W Hopkins, MN 55343		Yes

Average Daily Attendance – Month

Select by Program, School Year, Center, Class, Class Type, Funding Source, and Month and show Home Visit or Not. Home Visits do not count in attendance percentage.

Sample report shows Home Visits (displayed as “H”) for Class Main1AM on January 8th.

AES001DomDomain/HeadStart/General/Average Daily Attendance_Month

Agency Name	Minnesota Community Action Partnership	Program Name	099HeadStart_pg	View Report
School Year	2009-2010	Center Name	Main Office - MinnCAP	
Class Type	CB Part 4 Day AM Class	Class Name	%	
FundingSource	%	Month Name	January	
Show Home Visit	<input checked="" type="radio"/> True <input type="radio"/> False			

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Minnesota Community Action Partnership
099HeadStart_pg
Average Daily Attendance - Monthly

Program Name: 099HeadStart_pg School Year: 2009-2010 Month Name: January Funding Source: %

X: Present E: Excused Absence A: UnExcused Absence L: Late LE: Leave Early H: Home Visit

Child	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31		
Main Office - MinnCAP: Main1AM																																	
Anderson, Pam				X	X	X	X				X	X	X	X					X	X	X					X	X	X	X				
Johnson, James				X	C	C	X	H			X	X	X	X					X	X	X							X	X				
Johnson, Jim				X	E	E	X	H			X	X	X	X					X	X	X							X	X				
Johnson, Kathy				X	E	E	X	H			X	X	X	X					X	X	X							X	X				
Smith, Hunter				X	X	X	X				X	X	X	X					X	X	X							X	X				
Class Attendance Total	01	0	0	0	5	2	2	5	0	0	0	5	5	5	5	0	0	0	0	5	5	5	0	0	0	1	1	5	5	0	0	0	
Class Total Days	57																																
Class Average %:	91.04 %																																

Average Daily Attendance – Weekly

Select by Program, School Year, Center, Class, Class Type, Funding Source, Month, and Week of Month and show Home Visit or Not. Home Visits do not count in attendance percentage.

AES001DomDomain/HeadStart/General/Average Daily Attendance_Weekly

Agency Name:	Minnesota Community Action Partnership	Program Name:	099HeadStart_pg	View Report
School Year:	2009-2010	Center Name:	Main Office - MinnCAP	
Class Type	%	Class Name:	Main1AM	
FundingSource	%	Selected Month:	January	
Week of Month:	2	Show Home Visit	<input checked="" type="radio"/> True <input type="radio"/> False	

Minnesota Community Action Partnership

099HeadStart_pg

Average Daily Attendance - Weekly

Program: 099HeadStart_pg Funding Source: %

School Year: 2009-2010 Month Name: January Week of Month: 2

X: Present E: Excused Absence A: UnExcused Absence L: Late LE: Leave Early H: Home Visit

	Child Name	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday
Main Office - MinnCAP : Main1AM								
	Anderson, Pam		X	X	X	X		
	Johnson, James		X	E	E	X	H	
	Johnson, Jim		X	E	E	X	H	
	Johnson, Kathy		X	E	E	X	H	
	Smith, Hunter		X	X	X	X		
Class Attendance Total	14	0	5	2	2	5	0	0
Class Total Days	20							
Class Average %:	70							

Average Enrolled Attendance CenterClass

Select by Program, School Year, Center, Class, and Start and End Dates for the report.

/AES001DomDomain/HeadStart/General/Average Enrolled Attendance CenterClass

Agency: Minnesota Community Action Partnership Program: 099HeadStart_pg [View Report](#)

School Year: 2009-2010 Center Name: Main Office - MinnCAP

ClassName: % Start Date: 10/1/2009

End Date: 10/31/2009

Minnesota Community Action Partnership

099HeadStart_pg

Average Enrolled Attendance - Center/Class

Program Name:099HeadStart_pg, SchoolYear:2009-2010, Data Range:10/1/2009 To 10/31/2009

Center Name:Main Office - MinnCAP, Class Name: All

Center Name	Class Name	Number of class days	Number of days present	Attendance Percentage
<u>Main Office - MinnCAP</u>				
	Main1AM	56	50	89.29 %
	Main2AM	81	81	100.00 %
	Main3PM	75	75	100.00 %
	Main4Full5DayClass	100	100	100.00 %
			Agency Total:	4

BMI

Select Program, School Year, Center, Class, and Start and End Dates for the measurements.

AES001DomDomain/HeadStart/General/BMI

Agency Name	Minnesota Community Action Partnership	Program Name	099HeadStart_pg	View Report
School Year	2009-2010	CenterName	Main Office - MinnCAP	
ClassName	Main1AM	Status	Enroll	
Report Start Date	9/1/2009	Report End Date	8/31/2010	

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Minnesota Community Action Partnership
099HeadStart_pg
BMI

Program Name: 099HeadStart_pg School Year: 2009-2010 Date Range: 9/1/2009 - 8/31/2010 Status: Enroll

Child Name	Sex	Date Of Birth	Date Done	Age(yrs)	Weight LBS OZ Convert	Height Inc. In1/8 Convert	Wgt/Hg t%	BMI
Main Office - MinnCAP:Main1AM								
Johnson, James	Male	3/6/2006	9/8/2009	4 Y 4 M	40.00 40 0.00 0.00	43.00 43 0.00 0.00	93.02 %	15.21
Johnson, Jim	Male	2/4/2006	9/8/2009	4 Y 5 M	45.00 45 0.00 0.00	43.00 43 0.00 0.00	104.65 %	17.11
Johnson, Kathy	Female	2/4/2006	9/8/2009	4 Y 5 M	46.00 46 0.00 0.00	43.00 43 0.00 0.00	106.98 %	17.49
Agency Children Total: 3								

Child Funding Source Over Income

AES001DomDomain/HeadStart/General/Child Funding Source Over Income

AgencyName	Minnesota Community Action Partnership	ProgramName	099HeadStart_pg	View Report
School Year	2009-2010	Funding Source	ALL	
Income Status	Over-Income	Enroll Status	Enroll	
County	%	Report Date	12/31/2009	

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Minnesota Community Action Partnership
Child Funding Source Over Income

Program: 099HeadStart_pg SchoolYear: 2009-2010

% of Over Income on Last Day of the Month: 3.00 %

First Name	Last Name	Date Of Birth	Funding Source	County	Zip	Class Name	Teacher	Income Status
Hannah	Kramer	10/5/2005	099 Federal HS	Mille Lacs	56342	ComboCenter West1		Over-Income
Total: 1								

Children Enrolled Less Than 45 Days

Select Program and School Year.

AES001DomDomain/HeadStart/General/Children Enrolled Less Than 45 Days

Agency Name: Program Name:

School Year:

Minnesota Community Action Partnership
099HeadStart_pg
Enroll Less than 45 Days (not including 45 days)
Program: 099HeadStart_pg School Year: 2009-2010

Child Name	Date Of Birth	Enroll Date	Terminate Date
Main Office - MinnCAP : Main1AM			
Smith, Hannah	4/28/2005	9/14/2009	10/11/2009
Test, Sam	1/5/2006	9/7/2009	10/11/2009
Class Total: 2			
Main Office - MinnCAP : Main2AM			
Smith, Hunter	3/5/2006	9/25/2009	10/21/2009
Class Total: 1			
Center Total: 3			
Agency CenterBased Total 3			

Children Who Have Dropped

Select Program, School Year, and Date selection for Dropped Date

AES001DomDomain/HeadStart/General/Children Who Have Dropped

Agency Name: Program:

School Year: Report start date:

Report end date:

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Minnesota Community Action Partnership
099HeadStart_pg
Dropped Children List
Program: 099HeadStart_pg, School Year: 2009-2010, Date Range: 9/1/2009--8/31/2010

Child Name	Date Of Birth	Reason	Drop Date
Anderson, Pam	3/23/2005		6/11/2010
Erickson, Rex	6/3/2006		5/1/2010
Foster, Sam	3/2/2006		4/1/2010
Johnson, Donna	2/4/2006		12/22/2009
Smith, Hunter	3/5/2006		2/18/2010
Smith Kid, Grand	4/28/2005		11/17/2009
Test, Sam	1/5/2006		10/11/2009
Agency Total (Unduplicated): 7			

Children with Suspected Special Needs – Comes from the Program Entry Question about Special Needs

Select Program, School Year and Start and End Dates.

AES001DomDomain/HeadStart/General/Children with Suspected Special Needs

AgencyName: Minnesota Community Action Partnership	ProgramName: 099HeadStart_pg	View Report
SchoolYear: 2009-2010	Report Start: 7/1/2009	
Report End: 6/30/2010	Status: %	

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Minnesota Community Action Partnership
099HeadStart_pg
Children with Suspected Special Needs

Program : 099HeadStart_pg School Year : 2009-2010 Status : % Date Range : 7/1/2009 - 6/30/2010

Center Name : Class Name	Child Name	DateOfBirth	Suspected Disability	Comments
Main Office - MinnCAP : Main1AM				
	Anderson, Pam	3/23/2005		
Main Office - MinnCAP : Main2AM				
	Anderson, Harry	6/3/2006		
Agency Total (Unduplicated): 2				

Class Roster Report

Select Program, Center, Class Type, Class Name, Date for Class Listing, and Enroll Status.

AES001DomDomain/HeadStart/General/ClassRoster

Agency: Minnesota Community Action Partnership	Program: 099HeadStart_pg	View Report
SchoolYear: 2009-2010	CenterName: Main Office - MinnCAP	
Class Type: %	ClassName: Main2AM	
EndDate: 12/31/2010	Enroll Status: Enroll	

Minnesota Community Action Partnership
099HeadStart_pg
Class Roster

Program : 099HeadStart_pg School Year : 2009-2010 Report Cut Off Date : 12/31/2010

ChildName	1st Adult	2nd Adult	Live Address	C S Zip	1st Emergency Contact	2nd Emergency Contact	Status
DOB	Work# Cell#	Work# Cell#	Mailing Address	Home Tel#	Contact#	Contact#	Status Date
Main Office - MinnCAP : Main2AM							
Anderson, Harry 6/3/2006	Anderson, Paul W: (555)-555-5555x C: (777)-777-7777x		L: 765 Burns Avenue	Hopkins, MN 55343			Enroll 6/7/2010
Jones, Jim 5/6/2006	Smith, Gary W: (098)-760-0000x C: (869)-599-9999x	Jones, Bridget C: (976)-976-5090x	L: 2563 Vix	Owatonna, MN 12121 (787)-658-9999x			Enroll 9/1/2009
Smith, Hannah 4/28/2005	Smith Sr., Henry C: (765)-555-5777x		L: 1030955 Oak Street W M: 1030 Isle St West, Minnetonka, MN 55333-	New Hope, MN 55544 (654)-763-7577x			Enroll 10/11/2009
Smith, Sarah 3/5/2006	Smith, Mary W: (222)-222-2222x C: (866)-666-6666x		L: 785 Oak Street W	Hopkins, MN 55343 (444)-444-4444x	Smith, Mark (886)-666-6666(x)		Enroll 9/7/2009
Smith, Wanda 4/30/2006	Smith Jr., Henry W: (765)-865-8876x3344 C: (654)-777-7777x		L: 333 Oak Street W Apartment 12	Hopkins, MN (234)-222-3444x			Enroll 9/16/2009
Class Total:							5

Daily Weekly Meal Counts

Select by Program, School Year, Center, Class, Month and Week

/AES001DomDomain/HeadStart/General/DailyWeeklyMealCounts

AgencyName	Minnesota Community Action Partnership	Program	099HeadStart_pg	View Report
SchoolYear	2009-2010	Center	%	
Class	%	Month	January	
Week Of Month	2			

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Minnesota Community Action Partnership 099HeadStart_pg Daily/Weekly Meal Counts

Program: 099HeadStart_pg School Year: 2009-2010 Date Range: 1/3/2010 - 1/9/2010

Center: Main Office - MinnCAP Class: Main1AM

B=Breakfast, MS=Morning Snack, L=Lunch, AS=Afternoon Snack, D=Dinner

Child Daily Totals					Adult Daily Totals				
Mon	Tue	Wed	Thur	Fri	Mon	Tue	Wed	Thur	Fri
B 4	B 5	B 5	B 5	B 0	B 1	B 1	B 1	B 1	B 0
MS 4	MS 5	MS 5	MS 5	MS 0	MS 1	MS 1	MS 1	MS 1	MS 0
L 4	L 5	L 5	L 5	L 0	L 1	L 1	L 1	L 1	L 0
AS 0	AS 0	AS 0	AS 0	AS 0	AS 0	AS 0	AS 0	AS 0	AS 0
D 0	D 0	D 0	D 0	D 0	D 0	D 0	D 0	D 0	D 0

Child Weekly Totals					Adult Weekly Totals				
B	MS	L	AS	D	B	MS	L	AS	D
19	19	19	0	0	4	4	4	0	0

	Monday					Tuesday					Wednesday					Thursday					Friday									
	B	MS	L	AS	D	B	MS	L	AS	D	B	MS	L	AS	D	B	MS	L	AS	D	B	MS	L	AS	D					
Anderson, Pam	Present					Present					Present					Present														
						✓	✓	✓			✓	✓	✓			✓	✓	✓			✓	✓	✓							
Johnson, James	Present					Excused Absence					Excused Absence					Present														
	✓	✓	✓			✓	✓	✓			✓	✓	✓			✓	✓	✓			✓	✓	✓							
Johnson, Jim	Present					Excused Absence					Excused Absence					Present														
	✓	✓	✓			✓	✓	✓			✓	✓	✓			✓	✓	✓			✓	✓	✓							
Johnson, Kathy	Present					Excused Absence					Excused Absence					Present														
	✓	✓	✓			✓	✓	✓			✓	✓	✓			✓	✓	✓			✓	✓	✓							
Smith, Hunter	Present					Present					Present					Present														
	✓	✓	✓			✓	✓	✓			✓	✓	✓			✓	✓	✓			✓	✓	✓							

End of Month Enrollment less than 30 days

/AES001DomDomain/HeadStart/General/End of Month Enrollment Less than 30 Days

Agency Name: Program:

School Year: CenterName:

ClassName: End Of Month:

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Minnesota Community Action Partnership
099HeadStart_pg
End of Month Enrollment Less than 30 Days
Program: 099HeadStart_pg School Year: 2009-2010

Child Name	Enroll Date	Enroll Status	Dropped	Vacancies LessThan 30 Days
Main Office - MinnCAP : Main1AM				
Anderson, Pam	11/17/2009	Enroll		
Johnson, Donna	11/2/2009	Terminate	12/22/2009	
Johnson, James	12/21/2009	Enroll		
Johnson, Jim	9/14/2009	Enroll		
Johnson, Kathy	9/13/2009	Enroll		
Smith Kid, Grand	9/7/2009	Terminate	11/17/2009	
Smith, Hannah	9/14/2009	Terminate	10/11/2009	
Smith, Hunter	10/21/2009	Terminate	2/18/2010	X
Test, Sam	9/7/2009	Terminate	10/11/2009	
Vacancies Total:				1

Health Conditions

/AES001DomDomain/HeadStart/General/Health Conditions

Agency: Program:

School Year:

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Agency Name : Minnesota Community Action Partnership
Health Conditions
Prog:099HeadStart_pg School Year: 2009-2010

Last Name DOB Enroll Date	First Name	Center Class	Food Allergy	Asthma	Kidney Problem	Med Allergies	Convulsions	Insect Allergies	Heart Condition	Ear Infection	Diabetes
Anderson 6/3/2006 6/7/2010	Harry	Main Office - MinnCAP Main2AM		Yes			Yes			Yes	
Anderson 3/23/2005 9/2/2009	Paula	WestHSCenter Home1West		Yes							
Bengston 8/5/2006 9/3/2009	Cathy	WestHSCenter ComboHomeV est1	Yes								
James 3/4/2006 9/1/2009	Susan	WestHSCenter ComboCenter West1		Yes							
Johnson 3/6/2006 12/22/2009	James	Main Office - MinnCAP Main1AM	Yes					Yes			
Sampson 9/3/2005 11/3/2009	Bonnie	WestHSCenter West4PM- 5Day							Yes		
Smith 6/2/2006 9/21/2009	Kari	WestHSCenter West2PM		Yes							
Smith 3/5/2006 9/7/2009	Sarah	Main Office - MinnCAP Main2AM		Yes							

Health Service Gaps

Select the Screening(s) you want for the School Year.

Agency: Program:
 SchoolYear: Enrollment:
 CenterName: ClassName:
 Health Activity:

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Minnesota Community Action Partnership
 099HeadStart_pg
Health Service Gaps
 Program Name: 099HeadStart_pg School Year: 2009-2010

Center	Class	Name DateOfBirth EnrollStatus EnrollDate	Previous Yrs	Needs	Blood Pressure	Blood Work	Dental Screening	Physical Exam
					CompleteDate Status ExpireDate	CompleteDate Status ExpireDate	CompleteDate Status ExpireDate	CompleteDate Status ExpireDate
Main Office - MinnCAP	Main1AM	Erickson, Rose 8/3/2006 Enroll 5/2/2010			4/1/2010	4/1/2010	4/1/2010	4/1/2010
		Johnson, James 3/6/2006 Enroll 12/22/2009	0	Blood Pressure		12/29/2008 Current/Up to date 1/28/2014	9/8/2009 Current/Up to date 10/8/2010	9/8/2009 Current/Up to date 10/8/2010
		Johnson, Jim 2/4/2006 Enroll 9/14/2009			12/29/2008 Current/Up to date 1/28/2010	12/29/2008 Current/Up to date 1/28/2014	9/8/2009 Current/Up to date 10/8/2010	9/8/2009 Current/Up to date 10/8/2010
		Johnson, Kathy 2/4/2006 Enroll 9/13/2009		Blood Pressure		9/1/2009 Current/Up to date 10/1/2014	9/8/2009 Current/Up to date 10/8/2010	9/8/2009 Current/Up to date 10/8/2010
		Kramer, Betty 8/6/2006 Enroll 6/11/2010	0		6/11/2010	6/11/2010	6/11/2010	6/11/2010

Health Service Needs Treatment

Agency Name: Program Name:
 School Year: CenterName:
 ClassName: Health Screening:

1 of 1 100% Find | Next Select a format Export

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Minnesota Community Action Partnership
 099HeadStart_pg
Health Service - Needs Treatment
 Program: 099HeadStart_pg School Year: 2009-2010

Child Name	DOB	Treatment	Treatment Date	Status	Provider Type	Provider
Agency Total: 0						

Average Daily Attendance – Weekly