

APPENDIX B

CHILD CARE SURVEY OF POSTSECONDARY INSTITUTIONS

THE CHILD CARE SURVEY OF POSTSECONDARY INSTITUTIONS

This questionnaire has two sections.

I. CHILD CARE SERVICES – Section I asks questions about A) your institution’s child care services and funding, B) resources and referrals, and C) impact of services on persistence and graduation rates for Pell Grant recipients.

II. ON-CAMPUS CHILD CARE CENTERS – Section II asks questions about your institution’s on-campus child care centers: D) operations and accreditation, E) staffing, F) access and services, G) characteristics of children of postsecondary students using the services, and H) fees and subsidies.

For all questions, “your institution” refers only to this specific campus location.

Terms Used in the Survey

Child care center:

Place where care is provided to children in a group setting separate from a residence. Centers may operate independently or as part of a child care program in which multiple centers are administered by an organization or agency.

Children:

Children of postsecondary students at your institution (do not include children of staff or faculty) who are age 12 or younger and require care and supervision when parents are not present.

Students:

Postsecondary students enrolled full- or part-time at your institution.

Child care services:

Direct provision of child care services in on-campus or off-campus centers, as well as other child care assistance, such as child care subsidies, child care resource and referral services, and other child care assistance for postsecondary students.

Community child care provider:

A local child care center, preschool, Head Start, nursery school, or family child care provider that is not operated by the postsecondary institution.

Family child care provider:

A family child care provider cares for nonresident children in her/his home on a regular basis, usually for pay, so that parents and primary caregivers can work, attend school or training, or participate in other regular activities.

Family child care provider network:

A group of family child care providers sponsored by a central organization, which may provide training and technical assistance to providers, facilitate communication and support among providers, recruit families needing child care and make referrals to the providers, handle the collection of fees from parents and payments to providers, monitor the quality of care provided, and/or advocate for providers in policymaking forums.

According to the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. The valid OMB control number for this information collection is XXXX-XXXX. The time required to complete this information collection is estimated to average 45 minutes per response, including the time to review instruction, search existing data resources, gather the data needed, and complete and review the information collected. If you have any comments

concerning the accuracy of the time estimate or suggestions for improving this form, please write to: U.S. Department of Education, 400 Maryland Ave, SW, Room 6W226, Washington, DC 20202. If you have comments or concerns regarding the status of your individual submission of this form, write directly to: Dr. Patricia Butler, U.S. Department of Education, Policy and Program Studies Services, 400 Maryland Ave., SW, Room 6W226, Washington, DC 20202. This survey is authorized by the Consolidated Appropriations Act, 2005 (P. L. 108-447).

I. CHILD CARE SERVICES

A. FUNDING FOR CHILD CARE SERVICES

A1. In the **2005-2006** academic year, did your institution provide any of the following child care services for postsecondary students? *Check all that apply.*

| Child Care Services for Postsecondary Students | 2005-2006 |
|---|---------------------------------------|
| a. Regular child care at centers or through family child care networks sponsored by the institution | <input type="checkbox"/> ¹ |
| b. Additional child care services such as sick child care and/or drop-in or emergency services | <input type="checkbox"/> ¹ |
| c. Resource and referral activities..... | <input type="checkbox"/> ¹ |
| d. Child care subsidies for postsecondary students who are Pell Grant recipients and have children | <input type="checkbox"/> ¹ |
| e. Transportation for children..... | <input type="checkbox"/> ¹ |
| f. Involvement of parents in activities with children or education workshops for parents | <input type="checkbox"/> ¹ |
| g. None of the above..... | <input type="checkbox"/> ¹ |

A2. **Column A.** What were your institution's sources of funds for all child care services for postsecondary students in the **2005-2006** academic year?

Column B. For each source selected in Column A, what percentage of funds were provided by that source? *Percentages should sum to 100 percent.*

| Source | A. Funds Received for Child Care Services for Postsecondary Students | B. Percentage of Funds for Child Care Services for Postsecondary Students |
|--|---|--|
| a. Institutional dollars (including tuition, student activity fees, etc.)..... | □ ¹ | □□□ % |
| b. Child Care Access Means Parents in School (CCAMPIS) grant..... | □ ¹ | □□□ % |
| c. Other federal grants..... | □ ¹ | □□□ % |
| d. National organizations (e.g., Boys & Girls Clubs, YMCA/YWCA)..... | □ ¹ | □□□ % |
| e. Libraries or museums..... | □ ¹ | □□□ % |
| f. Businesses..... | □ ¹ | □□□ % |
| g. County or municipal agencies (e.g., police, Parks and Recreation, Social Services)..... | □ ¹ | □□□ % |
| h. Faith-based organizations..... | □ ¹ | □□□ % |
| i. Hospitals/clinics/health providers..... | □ ¹ | □□□ % |
| j. Community fundraisers..... | □ ¹ | □□□ % |
| k. Child care fees..... | □ ¹ | □□□ % |
| l. Other (please specify): _____ _____ | □ ¹ | □□□ % |
| TOTAL | | 100% |

A3. **Column A.** If your institution received a Child Care Access Means Parents in School (CCAMPIS) grant for the **2005-2006** academic year, on which services were the CCAMPIS funds used? *Check all that apply.*

*If your institution did NOT receive a CCAMPIS grant in the 2005-2006 school year, please check this box and skip **Column A** below.* → ⁻⁴

Column B. If your institution received a CCAMPIS grant for the **2004-2005** school year, on which services were the CCAMPIS funds used? *Check all that apply.*

*If your institution did NOT receive a CCAMPIS grant in the 2004-2005 school year, please check this box and skip **Column B** below.* → ⁻⁴

| Use of CCAMPIS Child Care Funds | A. 2005-2006 | B. 2004-2005 |
|--|---------------------------------------|---------------------------------------|
| a. Resource and referral activities..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| b. Child care subsidies for Pell Grant recipients who have children..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| c. Transportation for children..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| d. Involvement of parents in activities with children or education workshops for parents..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| e. Expanded hours and/or days of service at child care centers..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| f. Additional child care services provided such as sick child care and/or drop-in or emergency services..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| g. Staffing for direct service provision..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| h. Staffing for center administration..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| i. Accreditation fees or cost of accreditation process..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| j. Staff training..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| k. Equipment to enhance learning/play activities..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| l. Recruitment..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| m. Rent or facilities cost..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| n. Contracting for spaces in community child care settings. . | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| o. Developing and maintaining family child care networks.... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |
| p. Other (please specify): _____ _____ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ¹ |

B. INSTITUTIONAL RESOURCES AND REFERRALS

B1. What resources and referral services did your institution offer directly or in partnership with community-based organizations to Pell Grant recipients who were looking for child care in the **2006-2007** academic year? *Check all that apply.*

- ¹ None
- ² Referrals to specific child care arrangements
- ³ Information about the licensing and accreditation status or other indicators of quality of care at various child care centers or family child care homes
- ⁴ Information about how to select a child care provider
- ⁵ Information about the cost of child care at different centers
- ⁶ Information about available subsidies and other monetary support for child care
- ⁷ Participation in visits to child care centers with the student and his/her child(ren)
- ⁸ Other (please specify): _____

B2. Did your institution have any contracts with community child care providers in the **2006-2007** academic year?

- ¹ Yes
- ⁰ No → (Go to **Question B5**)

B3. With how many community child care providers did your institution have contracts in the **2006-2007** academic year?

providers (If none, enter 0, and go to **Question B5.**)

B4. Which of the following did the contracts include? *Check all that apply.*

- ¹ Reserved number of slots for children of students referred by the institution
- ² Payment for slots filled by children of students attending the institution
- ³ Specifications for the quality of care to be provided for children of students attending the institution
- ⁴ Other (please specify): _____

B5. In the **2006-2007** academic year, did your institution sponsor a network of family child care providers that care for students' children?

- ¹ Yes
- ⁰ No → (Go to **Section B7**)

B6. How many family child care providers participated in the network in the **2006-2007** academic year?

family child care providers

B7. Did your institution make referrals to or work with (either formally or informally) off-campus child care centers to arrange child care for students in the **2006-2007** academic year?

A "*formal working relationship*" is characterized by a written contract or agreement that may include, but is not limited to, the following elements of child care services: a specified number of reserved slots for children of postsecondary students, provision of care at a set fee, and/or acceptance of funds from the institution to subsidize care for children of postsecondary students.

An "*informal working relationship*" does not involve a contract or written agreement. This usually involves institutional staff and staff at the off-campus center(s) communicating and working together in some way to provide care for children of postsecondary students. Examples include making referrals, sharing resources for the provision of child care, and/or partnering on staff training.

¹ Yes

⁰ No → (Go to **Section B10**)

B8. How many off-campus child care centers did your institution make referrals to or work with (either formally or informally) to arrange child care for students in the **2006-2007** academic year?

If you are not sure, please enter your best estimate.

off-campus child care centers

B9. How many of the off-campus child care centers that your institution made referrals to or worked with in the **2006-2007** academic year were **licensed, registered, or certified** by the state, county, or city? *If none, enter 0.*

number of centers

If there are no data available to respond to this question, please check this box. → ⁻¹

B10. Did your institution offer **subsidies** to Pell Grant recipients for the cost of off-campus child care in any academic year from 2001-2002 through 2006-2007?

¹ Yes

⁰ No

⁻¹ Don't know

C. PELL GRANT RECIPIENTS: PERSISTENCE AND GRADUATION INFORMATION

C1. In what academic year did your institution first begin offering child care services to postsecondary students? *Check one only.*

- ¹ Before the 2001-2002 academic year
- ² In the 2001-2002 academic year
- ³ In the 2002-2003 academic year
- ⁴ In the 2003-2004 academic year
- ⁵ In the 2004-2005 academic year
- ⁶ In the 2005-2006 academic year
- ⁷ In the 2006-2007 academic year
- ⁸ In the 2007-2008 academic year

Child care services include direct provision of child care services in on-campus or off-campus centers, as well as other child care assistance, such as child care subsidies, child care resource and referral services, and other child care assistance for postsecondary students.

C2. Since 2001-2002, has providing child care assistance to Pell Grant recipients at your institution resulted in improved persistence and graduation rates among these students?

If you do not have records on which to base your response, please answer based on your experience.

- ¹ Yes
- ⁰ No
- ⁻¹ Don't know → (Go to **Question C6**)

C3. What source(s) of information did you use to answer Question C2? *Check all that apply.*

- ¹ Consulted institutional records
- ² Consulted records from the child care program
- ³ Asked child care center staff
- ⁴ Asked students
- ⁵ Relied on your experience
- ⁶ Other (please specify) _____

*If persistence and graduation rates have **NOT** improved among Pell Grant recipients as a result of providing child care assistance to them (Question C2=No), please check this box and go to **Question C6**. → ⁻⁴*

C4. To what extent has each of the following contributed to improved persistence and graduation rates at your institution for Pell Grant recipients with children?

If you do not have records on which to base your response, please answer based on your experience.

Check one box in each row. Check "N/A" if your institution does not offer the service.

| Services Offered | A Great Deal | Some | A Little | Not At All | N/A |
|--|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|--|
| a. Financial assistance for child care..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ⁴ | <input type="checkbox"/> ⁻⁴ |
| b. Assistance in finding child care to meet students' needs..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ⁴ | <input type="checkbox"/> ⁻⁴ |
| c. Child care with flexible hours..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ⁴ | <input type="checkbox"/> ⁻⁴ |
| d. Child care for sick children..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ⁴ | <input type="checkbox"/> ⁻⁴ |
| e. Child care for special needs children. | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ⁴ | <input type="checkbox"/> ⁻⁴ |
| f. High quality child care..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ⁴ | <input type="checkbox"/> ⁻⁴ |
| g. Training to improve child care staff qualifications..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ⁴ | <input type="checkbox"/> ⁻⁴ |
| h. An easily accessible location..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ⁴ | <input type="checkbox"/> ⁻⁴ |
| i. A safe and secure location / facility... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ⁴ | <input type="checkbox"/> ⁻⁴ |
| j. Immediate enrollment..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ⁴ | <input type="checkbox"/> ⁻⁴ |

C5. What source(s) of information did you use to answer Question C4? *Check all that apply.*

¹ Consulted institutional records

² Consulted records from the child care program

³ Asked child care center staff

⁴ Asked students

⁵ Relied on your experience

⁶ Other (specify)_____

C6. If resources were available at your institution, what child care services would you like to add (Column A) or improve (Column B) to help Pell Grant recipients with children persist in their studies and graduate?

If there are no services you would like to add or improve to help Pell Grant recipients with children persist in their studies and graduate, check this box and go to **Question C7**. →

| Services | A. Add Service | B. Improve Service |
|---|---------------------------------------|---------------------------------------|
| a. Financial assistance for child care..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |
| b. Assistance in finding child care to meet students' needs . . | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |
| c. Child care with flexible hours..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |
| d. Child care for sick children..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |
| e. Child care for special needs children..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |
| f. High quality child care..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |
| g. Training to improve child care staff qualifications..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |
| h. An easily accessible location..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |
| i. A safe and secure location / facility..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |
| j. Immediate enrollment..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |
| k. Other (please specify): _____..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |
| l. Other (please specify): _____..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |
| m. Other (please specify): _____..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² |

C7. Besides child care services, what other programs and resources does your institution offer that are designed to improve persistence in and graduation from postsecondary education among Pell Grant recipients with children? *Check all that apply.*

- ¹ Tutoring programs
- ² Mentoring programs
- ³ Internship programs
- ⁴ Work/study programs
- ⁵ Financial aid
- ⁶ Other (please specify): _____

II. ON-CAMPUS CHILD CARE CENTERS

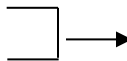
D. OPERATIONS AND ACCREDITATION

D1. How many on-campus child care centers serving children of postsecondary students were operating at your institution in each of the following academic years?

If no centers were operating, please enter 0.

If there are no data available to answer this question, please provide your best estimate.

| Academic Year | Number of Centers |
|-----------------|---|
| a. 2001-2002... | <input type="text"/> <input type="text"/> |
| b. 2002-2003... | <input type="text"/> <input type="text"/> |
| c. 2003-2004... | <input type="text"/> <input type="text"/> |
| d. 2004-2005... | <input type="text"/> <input type="text"/> |
| e. 2005-2006... | <input type="text"/> <input type="text"/> |
| f. 2006-2007... | <input type="text"/> <input type="text"/> |
| g. 2007-2008... | <input type="text"/> <input type="text"/> |



If no on-campus centers were operating in the 2006-2007 academic year, you have completed the Child Care Survey of Postsecondary institutions. Thank you very much for participating.

D2. Think about the on-campus child care center operating in the **2006-2007** academic year that has been opened the longest and the one that opened most recently. How many years has each been in operation?

- a. The center that has been open the longest? years OR ⁻¹ Less than one year
- b. The center that opened most recently? years OR ⁻¹ Less than one year

D3. How many of your institution's on-campus child care centers were **licensed, registered, or certified** by the state, county, or city as of the **2006-2007** academic year?

number of centers

D4. How many of your institution's on-campus child care centers were **accredited** as of the **2006-2007** academic year? *That is, how many centers have been assessed and shown to meet standards for quality (in addition to licensing standards)?*

number of centers (If none, enter 0, and go to **Question D6.**)

D5. Which of the following **accredited** your institution's on-campus child care centers in the **2006-2007** academic year? *Check all that apply.*

¹ National Academy of Early Childhood Programs (NAECP)

² National Association for the Education of Young Children (NAEYC)

³ State Department of Education

⁴ National Child Care Association (NCCA)

⁵ Other (please specify): _____

D6. How many of your institution's on-campus child care centers were seeking accreditation in the **2006-2007** academic year?

number of centers

E. ACCESS AND SERVICES

E1. What was the earliest arrival time and latest departure time for each day in a typical non-holiday week in the **2006-2007** academic year?

Please take into account all sessions offered for children, such as regular morning and afternoon sessions and extended sessions (covering time before and after regular sessions).

| Day of the Week | Earliest Arrival Time | | Latest Departure Time | |
|------------------|--|---|--|---|
| | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm |
| a. Monday..... | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm |
| b. Tuesday..... | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm |
| c. Wednesday.... | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm |
| d. Thursday..... | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm |
| e. Friday..... | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm |
| f. Saturday..... | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm |
| g. Sunday..... | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm | <input type="text"/> : <input type="text"/> <input type="text"/> | <input type="text"/> ¹ am or <input type="text"/> <input type="text"/> ² pm |

E2. Did any of your institution's on-campus child care centers offer the following child care services in the 2005-2006 or 2006-2007 academic years? *Check all that apply in each row.*

| Services | 2005-2006 | | | 2006-2007 | | |
|---|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|---------------------------------------|
| | Yes | No | Don't know | Yes | No | Don't know |
| a. Before school?..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ |
| b. After school?..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ |
| c. Evenings?..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ |
| d. Overnight?..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ |
| e. On any public school holidays?..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ |
| f. On days that public schools close due to bad weather?..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ |
| g. For children who are sick?..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ |
| h. For children with special needs?..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ |
| i. For children of part-time students?..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ |
| j. For children of full-time students?..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ |
| k. Drop-in or emergency services?..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ² | <input type="checkbox"/> ³ |

F. STAFF AT ON-CAMPUS CENTERS

F1. How many full-time and part-time teachers were employed across all on-campus child care centers at your institution in the **2006-2007** academic year? *By teachers, we mean any persons in charge of a group or classroom of children, often with staff supervisory responsibilities.*

teachers

F2. Thinking about the **highest education level** completed, how many of these teachers had...

| Education | Number of Teachers |
|---|---|
| a. Not completed high school or obtained a GED? ... | <input type="text"/> <input type="text"/> |
| b. A high school diploma or GED? | <input type="text"/> <input type="text"/> |
| c. Some college, but no degree? | <input type="text"/> <input type="text"/> |
| d. An Associates of Art (A.A.) degree? | <input type="text"/> <input type="text"/> |
| e. A Bachelor's degree (B.A. or B.S.)? | <input type="text"/> <input type="text"/> |
| f. A graduate degree (M.A., Ph.D., or Ed.D)? | <input type="text"/> <input type="text"/> |

F3. How many of these teachers had completed a Child Development Associate (CDA) credential?

teachers

F4. How many full-time and part-time assistant teachers and aides were employed across all on-campus child care centers at your institution in the **2006-2007** academic year?

assistant teachers and aides

G. CHILDREN USING ON-CAMPUS CHILD CARE CENTERS

- G1. In the **2005-2006** academic year:
- | | | |
|---|---------------|-------------------|
| | Number | Don't Know |
| a. How many child care centers that served children of postsecondary students <u>operated</u> on-campus? | □ □ | |
| b. What was the maximum number of children of postsecondary students that your institution's on-campus child care centers could <u>serve</u> (across all centers)? | □ □ □ | □ ⁻¹ |
| c. How many children of postsecondary students were <u>enrolled</u> in your institution's on-campus child care centers? | □ □ □ | □ ⁻¹ |

- G2. In the **2006-2007** academic year:
- | | | |
|---|---------------|-------------------|
| | Number | Don't Know |
| a. What was the maximum number of children of postsecondary students that your institution's on-campus child care centers could <u>serve</u> (across all centers)? | □ □ □ | □ ⁻¹ |
| b. How many children of postsecondary students were <u>enrolled</u> in your institution's on-campus child care centers? | □ □ □ | □ ⁻¹ |

For the remaining items in Section G, please use this number as the total number of children of postsecondary students in on-campus child care centers at your institution.

- G3. How many children of postsecondary students were in each of the **age groups** below in the **2006-2007** academic year?

*If there are no data available to respond to this question, please check this box and go to **Question G4**.* → □⁻¹

| Age Range | Number Enrolled in 2006-2007 |
|--------------------------|------------------------------|
| a. 0 to 24 months..... | □, □ □ □ |
| b. 25 to 36 months..... | □, □ □ □ |
| c. 37 to 48 months..... | □, □ □ □ |
| d. 49 months or older... | □, □ □ □ |

- G4. How many children of postsecondary students were **Hispanic or Latino** in the **2006-2007** academic year?

*If there are no data available to respond to this question, please check this box and go to **Question G5**.* → □⁻¹

| Ethnicity | Number Enrolled in 2006-2007 |
|--------------------------------|------------------------------|
| a. Hispanic or Latino..... | □, □ □ □ |
| b. Not Hispanic or Latino..... | □, □ □ □ |

- G5. How many children of postsecondary students were in the following **racial groups** in the **2006-2007** academic year? *Count each child in only one racial category.*

If there are no data available to respond to this question,

please check this box and go to **Question G6.** → ⁻¹

| Race | Number Enrolled in 2006-2007 |
|---|--|
| a. American Indian or Alaska Native..... | <input type="text"/> , <input type="text"/> <input type="text"/> |
| b. Asian | <input type="text"/> , <input type="text"/> <input type="text"/> |
| c. Black or African-American..... | <input type="text"/> , <input type="text"/> <input type="text"/> |
| d. Native Hawaiian or other Pacific Islander. . | <input type="text"/> , <input type="text"/> <input type="text"/> |
| e. White..... | <input type="text"/> , <input type="text"/> <input type="text"/> |
| f. Two or more races..... | <input type="text"/> , <input type="text"/> <input type="text"/> |

G6. How many children of postsecondary students had **special needs** in the **2006-2007** academic year?

Children with special needs: Children who have an Individual Family Service Plan (IFSP) or an Individual Education Plan (IEP) through Part C (infants or toddlers) or Part B (preschoolers) of the Individuals with Disabilities Act.

If there are no data available to respond to this question,
please check this box and go to **Question G7.** → ⁻¹

special needs children

G7. How many postsecondary students at your institution were on a **waiting list** for on-campus child care for their children in the **2006-2007** academic year?

If a postsecondary student was on more than one waiting list, please count him or her only once.

If there are no data available to respond to this question,
please check this box and go to **Question H1.** → ⁻¹

, postsecondary students with children on waiting lists

H. FEES AND SUBSIDIES AT ON-CAMPUS CENTERS

H1. Did fees vary across your institution's on-campus child care centers in the **2006-2007** academic year?

- ¹ Yes, fees varied across on-campus child care centers. → (Go to **Question H3**)
- ² No, this institution had only one on-campus child care center.
- ³ No, the same fees applied to all of the institution's on-campus child care centers.

H2. How much did a full-fee paying student pay to have his or her child cared for full-time at your institution's on-campus child care center(s) in the **2006-2007** academic year?

Please indicate the amount and the timeframe.

\$, per

¹ year

² semester

³ month

⁴ week

⁵ day

⁶ hour

Go to **Question H4**

H3. How much did a full-fee paying student pay to have his or her child cared for full-time at the following in the **2006-2007** academic year:

Please indicate the amount and the timeframe.

a. The on-campus child care center with the lowest fees?

\$, per

¹ year

² semester

³ month

⁴ week

⁵ day

⁶ hour

b. The on-campus child care center with the highest fees?

\$, per

¹ year

² semester

³ month

⁴ week

⁵ day

⁶ hour

H4. Across all on-campus centers operating at your institution in the **2006-2007** academic year, did fees **vary** based on any of the following? *Check all that apply.*

- ¹ None
- ² Number of children enrolled from the same family
- ³ Family income, regardless of whether an outside agency is paying for care
- ⁴ Number of hours or days per week the child attends the program
- ⁵ Whether the child attends the program for extended hours
- ⁶ Whether child care is provided on weekends
- ⁷ The child's age
- ⁸ Whether the child is toilet trained
- ⁹ Whether the center provides diapers for the child
- ¹⁰ Whether the center provides meals for the child
- ¹¹ Whether the center provides transportation for the child
- ¹² Whether the child has a diagnosed disability
- ¹³ Whether parents or an outside agency such as welfare or a training program is subsidizing the child care
- ¹³ Other (please specify) _____

H5. Did your institution offer **subsidies** for the cost of on-campus child care to Pell Grant recipients in the **2006-2007** academic year,?

- ¹ Yes
- ⁰ No → (Go to **Question H9**)
- ⁻¹ Don't know → (Go to **Question H9**)

H6. What were the eligibility requirements for Pell Grant recipients to receive a subsidy in the **2006-2007** academic year?

| Eligibility Criterion for Subsidy | Yes | No | Don't Know |
|---|---------------------------------------|---------------------------------------|--|
| a. Pell Grant recipient..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ⁰ | <input type="checkbox"/> ⁻¹ |
| b. Minimum GPA..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ⁰ | <input type="checkbox"/> ⁻¹ |
| c. Full-time status..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ⁰ | <input type="checkbox"/> ⁻¹ |
| d. Children within a certain age range... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ⁰ | <input type="checkbox"/> ⁻¹ |
| e. Other (please specify): _____ _____ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ⁰ | <input type="checkbox"/> ⁻¹ |

H7. How much was the **typical subsidy** provided to Pell Grant recipients for on-campus child care in the **2006-2007** academic year? *If you do not know the amount of the typical subsidy, please estimate the percent of the typical subsidy.*

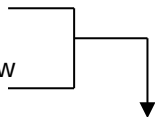
| | | | |
|--|--|--|--|
| Amount of Typical Subsidy | Frequency | Percent of Typical Subsidy <i>(If you don't know the amount)</i> | Don't Know |
| \$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> | <input type="checkbox"/> ¹ Per year <input type="checkbox"/> ² Per semester <input type="checkbox"/> ³ Per month <input type="checkbox"/> ⁴ Per week <input type="checkbox"/> ⁵ Per day <input type="checkbox"/> ⁶ Per hour | <input type="text"/> <input type="text"/> <input type="text"/> % <i>Round percents to the nearest whole number.</i> | <input type="checkbox"/> ⁻¹ |

H8. Were any CCAMPIS funds used to provided child care subsidies in the **2006-2007** academic year?

- ¹ Yes
- ⁰ No
- ⁻¹ Don't know

H9. Did your institution offer **subsidies** for the cost of on-campus child care to Pell Grant recipients in the **2005-2006** academic year?

- ¹ Yes
- ⁰ No
- ⁻¹ Don't know



If your institution did not offer child care subsidies to Pell Grant recipients in the 2005-2006 academic year, you have completed the Child Care Survey of Postsecondary institutions. Thank you very much for participating.

H10. What were the eligibility requirements for Pell Grant recipients to receive a subsidy in the **2005-2006** academic year?

| Eligibility Criterion for Subsidy | Yes | No | Don't Know |
|---|---------------------------------------|---------------------------------------|--|
| a. Pell Grant recipient..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ⁰ | <input type="checkbox"/> ⁻¹ |
| b. Minimum GPA..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ⁰ | <input type="checkbox"/> ⁻¹ |
| c. Full-time status..... | <input type="checkbox"/> ¹ | <input type="checkbox"/> ⁰ | <input type="checkbox"/> ⁻¹ |
| d. Children within a certain age range. . | <input type="checkbox"/> ¹ | <input type="checkbox"/> ⁰ | <input type="checkbox"/> ⁻¹ |
| e. Other (please specify): _____ | <input type="checkbox"/> ¹ | <input type="checkbox"/> ⁰ | <input type="checkbox"/> ⁻¹ |

H11. How much was the **typical subsidy** provided to Pell Grant recipients for on-campus child care in the **2005-2006** academic year?

If you do not know the amount of the typical subsidy, please estimate the percent of the typical subsidy.

| Amount of Typical Subsidy | Frequency | Percent of Typical Subsidy <i>(If you don't know the amount)</i> | Don't Know |
|--|--|---|--|
| \$ <input type="text"/> <input type="text"/> , <input type="text"/> <input type="text"/> | <input type="checkbox"/> ¹ Per year | <input type="text"/> <input type="text"/> <input type="text"/> % | <input type="checkbox"/> ⁻¹ |
| | <input type="checkbox"/> ² Per semester | <i>Round percents to the nearest whole number.</i> | |
| | <input type="checkbox"/> ³ Per month | | |
| | <input type="checkbox"/> ⁴ Per week | | |
| | <input type="checkbox"/> ⁵ Per day | | |
| | <input type="checkbox"/> ⁶ Per hour | | |

H12. Were any CCAMPIS funds used to provide child care subsidies in the **2005-2006** academic year?

- ¹ Yes
- ⁰ No
- ⁻¹ Don't know

**Thank you very much for participating in the
Child Care Survey of Postsecondary Institutions.**