Program Approach Form — Grantee/Delegate Number Agency Name						
I. Enrollment by Program Option						
This section should be filled out and submitted for each grantee and delegate ag	ency.					
	,					
1. Funded child enrollment by program option ¹ :	2. Number of pregn	ant women e	enrolled for I	EHS:		
Center-based enrollment Home-based enrollment Combination option enrollment Family child care enrollment Other option enrollment						
Total Child Enrollment						
II. Program Schedule This section should be filled out for each group of children served for different Complete #1-3 for all groups of children	This section should be filled out for each group of children served for different hours of service each year.					
Program schedule number		1	2	3	4	5
Program option identification			I			
3. Funded enrollment	<u> </u>					
Complete #4-9 for center-based, family child care, combination, and other optio	ns			1	_	<u> </u>
4a. Number of classes/groups/family child care settings						
4b. Double session, enter D						
5. Number of hours of classes/groups/FCC settings per child, per day						
6. Number of days of classes/groups/FCC settings per child, per week						
7. Number of days of classes/groups/FCC settings per child, per year						
8. Number of home visits per child, per year						
9. Number of hours per home visit						
Complete #10-13 for home-based options					l	
10. Number of home visits per child, per year						
11. Number of hours per home visit						
12. Number of hours per home-based socialization experience						

Notes

Item 1: If more than 5 different schedules, photocopy form and write in 6, 7, 8, etc.

13. Number of home-based socialization experiences per child, per year

Item 2: Identify each program schedule as center-based (CB), home-based (HB), combination program (CO), family child care (FC), or other program option (OT). For combination options (CO and other options (OT), the items on the form that more appropriately describe the services provided by these options should be filled out

¹Funded enrollment by program option must equal the total number of children supported through the budget contained on the SF 424A and the Line-Item Budget.

	Position	HS/EHS Cost for Program Operations	HS/EHS Cost for Training & Technical Assistance	Non-Federal Share (Cash and in-kind)	Number of People Employed
a.	PERSONNEL (Object cl	ass 6a)			
Chi	ild Health and Developmen	ntal Services Personnel			
1.	Program Managers & Content Area Experts				
2.	Teachers/Infant Toddler Teachers				
3.	Family Child Care Personnel				
4.	Home Visitors				
5.	Teacher Aides & Other Education Personnel				
6.	Health/Mental Health Services Personnel				
7.	Disabilities Services Personnel				
8.	Nutrition Services Personnel				
9.	Other Child Services Personnel				

- a1. Include program managers, supervisors, and content experts in child development, health, mental health, nutrition, and disabilities services. Include home-based and family child care supervisors.
- a2. Include all teachers, including infant and toddler teachers.
- a3. Include family child care staff, if they are agency employees. If providers are not agency employees, enter costs under item (f)(6) or (h)(10).
- a6. Include nurses, health services aides, speech therapists, mental health staff and other health services personnel.
- a8. Include nutritionists, cooks, and other food services staff.
- a9. Include any personnel that provide services to children that cannot be reported in any other category.

Position	HS/EHS Cost for Program Operations	HS/EHS Cost for Training & Technical Assistance	Non-Federal Share (Cash and in-kind)	Number of People Employed
Family and Community Partne	erships Personnel			
10. Program Managers & Content Area Experts				
11. Other Family & Community Partnerships Personnel				
Program Design and Managen	nent Personnel			
12. Managers				
13. Staff Development				
14. Clerical Personnel				
15. Fiscal Personnel				
16. Other Program Design Personnel				
Other Personnel				
17. Maintenance Personnel				
18. Transportation Personnel				
19. Other Personnel				
TOTAL PERSONNEL (6a)				

- a10. Include program managers, coordinators, supervisors, and content experts in parent involvement, social services, volunteer coordination, or other family and community partnership activities.
- all. Include social workers, family service workers, social services aides, parent involvement aides, and other family and community partnerships staff.
- a12. Include executive directors, Head Start or Early Head Start directors, deputy or assistant directors, and other administrators.
- a13. Include staff responsible for coordinating staff development and training. (Note: Report any salaries paid by T&TA funds in the second column.)
- a19. Include any personnel that cannot be reported in any other category.

Position	HS/EHS Cost for Program Operations	HS/EHS Cost for Training & Technical Assistance	Non-Federal Share (Cash and in-kind)
b. FRINGE BENEFITS (Object Class 6	b)		
Social Security (FICA), State Disability, Unemployment (FUTA), Workers Compensation			
2. Health/Dental/Life Insurance			
3. Retirement			
4. Other Fringe			
TOTAL FRINGE (6b)			
c. TRAVEL (Object Class 6c)			
1. Staff Out-of-Town Travel			
TOTAL TRAVEL (6c)			
d. EQUIPMENT (Object Class 6d)			
1. Office Equipment			
2. Classroom/Outdoor/Home- based/FCC			
3. Vehicle Purchase			
4. Other Equipment			
TOTAL EQUIPMENT (6d)			

- c1. Enter the total costs of travel outside of the grantee service area for employees of the project, including per diem expenses. Do not include costs for consultant travel, parent travel, or local transportation. [A brief explanation of travel costs should be included in the budget justification.]
- d. "Equipment" means an article of tangible, non expendable, personal property having a useful life of more than one year and an acquisition cost of \$5,000, or more, per unit. Include leased equipment only if costs are \$5,000 or more per unit; costs for other leased equipment may be reported in object class (h). [An itemized list of equipment should be included in the budget justification.]
- d2. Includes equipment used for classrooms, group settings for infants and toddlers, family child care settings, playgrounds, home-based programs, and family and community partnerships.

Position	HS/EHS Cost for Program Operations	HS/EHS Cost for Training and Technical Assistance	Non-Federal Share (cash and in-kind)
e. SUPPLIES (Object Class 6e)			
1. Office Supplies			
2. Child and Family Services Supplies			
3. Food Services Supplies			
4. Other Supplies			
TOTAL SUPPLIES (6e)			

f. (f. CONTRACTUAL (Object Class 6f)			
1.	Administrative Services (e.g., Legal, Accounting)			
2.	Health/Disabilities Services			
3.	Food Services			
4.	Child Transportation Services			
5.	Training & Technical Assistance			
6.	Family Child Care			
7.	Delegate Agency Costs			
8.	Other Contracts			
	TOTAL CONTRACTUAL (6f)			

- f. Enter the costs of contracts for services and goods, except those belonging in other categories, such as equipment, supplies, construction, etc. Include contracts with organizations for the provision of training or technical assistance. **Do not include payments to individuals in this category;** services of individuals (other than employees) should be reported in object class (h). Do no include service contracts; such maintenance agreements also may be reported in object class (h). [An itemized list of contracts should be included in the budget justification.]
- f6. Include contracts with umbrella organizations. Contracts with individuals should be included in line (h)(10).

	Position	HS/EHS Cost for Program Operations	HS/EHS Cost for Training and Technical Assistance	Non-Federal Share (cash and in-kind)
g. (CONSTRUCTION (Object Class 6g)			
1.	New Construction			
2.	Major Renovation			
3.	Acquisition of Buildings/Modular Units			
	TOTAL CONSTRUCTION (6g)			
h. (OTHER (Object Class 6h)		,	
1.	Depreciation/Use Allowance			
2.	Rent			
3.	Mortgage			
4.	Utilities, Telephone			
5.	Building & Child Liability Insurance			
6.	Building Maintenance/Repair and Other Occupancy			
7.	Incidental Alterations/Renovations			
8.	Local Travel			

h1. Enter proposed occupancy expenses. Rent may be charged only when the applicant does not own or have substantial interest in the real property. Depreciation/Use Allowances should be charged when the building is owned by or has been donated to the applicant or there is a less-than-arms-length lease agreement. See OMB Circular A-122, Cost Principles for Non-Profit Organizations or OMB Circular A-87, Cost Principles for State and Local Governments.

9.

Nutrition Services

Child Services Consultants

- h8. List proposed costs associated with transporting children to and from the center, on field trips, etc. Include all costs of maintaining, repairing, operating, and insuring vehicles that transport children.
- h10. If individuals who provide direct service to children are paid as consultants rather than as staff, the cost should be included in this category. Include consultants providing education and child development services, medical or dental exams, screening care, mental health services, nutrition services, speech therapy, disability services, family child care services, or other child services.

Position	HS/EHS Cost for Program Operations	HS/EHS Cost for Training and Technical Assistance	Non-Federal Share (cash and in-kind)
h. OTHER (Object Class 6h)			
11. Volunteers			
12. Substitutes (if not paid benefits)			
13. Parent Services			
14. Accounting & Legal Services			
15. Publications/Advertising/Printing			
16. Training or Staff Development			
17. Other			
TOTAL OTHER (6h)			
i. TOTAL DIRECT CHARGES Sum of Line 6a-6h			
j. INDIRECT COSTS Enter Costs Not Reflected in i above			
k. TOTALS ALL BUDGET CATEGORIES			

h11. Enter the in-kind value of volunteers (parents or others) who participate in program activities in the non-Federal share column.

h13. Include parent activities, parent local and out-of-town travel, and other parent services.

The Federal and non-Federal costs proposed in the SF 424A and the Line-Item Budget are the costs that, when agreed upon, will be included in the Head Start grant award. There may be other cash or in-kind resources that are necessary to support the services that will be provided to Head Start children and their families. Applicants are asked to explain these resources in Part 3 of the <i>Budget and Budget Justification</i> . The value of these resources should be shown below. (Resources that the applicant uses to serve children who are not enrolled in Head Start should not be included.)	Value
Federal Funding	
1. Federal Child Development and Child Care funds	
2. USDA Funds for Nutrition Services	
3. Other Federal Funding	
State Funding	
4. State Preschool Programs	
5. Other State Funding	
Local Government Funding	
6. School District Funding	
7. Other Local Government Funding	
Other Funding	
8. Tribal Government Funding	
9. Fund-raising Activities	
10. Other	
TOTAL	