REV 07/2014 STATUTORY REF.: C.G.S. Sections 10-10a; 10-16p; 10-261(a)(2); 10-262f STATE OF CONNECTICUT DEPARTMENT OF EDUCATION BUREAU OF GRANTS MANAGEMENT 165 CAPITOL AVENUE HARTFORD, CT 06106-1630 FILING INSTRUCTIONS: FILE THIS REPORT ON OR BEFORE OCTOBER 15

## PUBLIC SCHOOL INFORMATION SYSTEM—SUMMER SCHOOL FULL-TIME EQUIVALENT CREDIT

LEA	SCHOOL DISTRICT		CONTACT PERSON			TELEPHONE	TELEPHONE		
CODE	JOHOOL DIS	SCHOOL DISTRICT		CONTACT PERSON					
						E-MAIL ADDRES	SS		
SCHEDULE 1: SUMMER SCHOOL FULL-TIME EQUIVALENT CREDIT – Free programs for resident students only. Do not report students in grades K through 12 who attended summer school in accordance with an Individualized Education Program (IEP).									
Col. 1	Col. 2	Col. 3		Col. 4a	Col. 4b	Col. 5	Col. 6	Col. 7	
Line No.	Receiving LEA Code	Program/Course	Name	No. PK Students	No. K-12 Students	Number of Pgm. Days	Instructional Mins. Per Day *	FTE Summer School **	
1								***	
2								***	
3								***	
4								***	
5								***	
6								***	
7								***	
8								***	
9								***	
10								***	
11								***	
12								***	
13								***	
14								***	
15								***	
16								***	

99	Total Full-time Equivalent Summer School Credit (Equals Sum of Col. 7)	***

17

18

<sup>\*</sup> Not to exceed 300 minutes per day.

<sup>\*\*</sup> FTE Summer School = (Col. 4a + Col. 4b) x Col. 5 x Col. 6 / 180 / 300.

<sup>\*\*\*</sup> For local use only. The State Department of Education data processing system will compute this amount automatically.