

## 2024-2025 No Internet Paper Profiles

*LinkB5 registration for VQB5 participants with no internet*

*\*Indicates required field*

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**Please send completed profiles to:**

LinkB5  
University of Virginia  
School of Education and Human Development  
PO Box 800784  
Charlottesville, VA 22904

## **Pre-Registration Questions**

*Primary Site Administrators (PSAs) must complete Pre-Registration questions and the Assurance Agreement before completing all other steps.*

### **1. VPI Question \***

*If you answer 'yes', please skip to Question 3. If you answer 'no', please proceed to Question 2 and answer the four VQB5 Eligibility Screener Questions.*

- a. Are you a VPI program participant or receive VPI Funding?
  - Yes
  - No

### **2. Four VQB5 Eligibility Screener Questions \***

*If you answer 'yes' to all four screener questions, please proceed with this form. If you answer 'no' to one of the screener questions, you do not need to complete the rest of this form.*

- a. Does this site currently serve children between birth and age five?
  - Yes
  - No
- b. Does this site currently have at least 3 children between birth and age five enrolled? Please do not count children related to the provider.
  - Yes
  - No
- c. Does this site currently operate at least four days per week for at least 128 days per year?
  - Yes
  - No
- d. Does this site have at least one classroom with children between birth and age five that operates for a minimum of 3 hours per day?
  - Yes
  - No

### **3. Assurance Agreement \***

*If you accept the Assurance agreement, please proceed with this form. If you decline the Assurance Agreement, please contact your Ready Region Lead or email [vqb5@doe.virginia.gov](mailto:vqb5@doe.virginia.gov).*

**Please review the information and then indicate your agreement below.**

Publicly-funded sites must complete three activities annually to meet the legislative requirement. Non-publicly-funded sites who opt-in to VQB5 must also complete these activities in order to receive a public quality profile.

1. All VQB5 participants are required to use LinkB5 to provide information about their sites, classrooms, teachers, and child enrollment through the completion of various profiles. This includes using LinkB5 to:
  - Complete site, site administrator, educator, and classroom profiles during annual registration, August 15 - October 1.

- Enter information about optional use of VDOE-approved curriculum for each classroom by October 1, with the option to update curriculum information by May 31.
  - Complete classroom lists by December 22 to better understand the impact of classroom experiences on child outcomes.
2. Every eligible classroom must complete two local CLASS® observations, one in the fall and one in the spring, with scores entered in LinkB5.
    - The fall local observation window occurs from August 15 to December 22
    - The spring local observation window occurs from January 20 to May 31
  3. In addition to the two local CLASS® observations coordinated by Ready Regions, all participating sites must participate in external CLASS® observations for each age level served between August 15 and May 31.

Publicly funded sites that do not complete the participation requirements will be out of compliance with the law and may have public funding terminated.

- Selecting '**Accept**' indicates that you agree to complete all VQB5 required activities.
- Selecting '**I would like more information before accepting**' indicates that you would like more information before accepting.
- All sites must Accept to these terms in order to continue the registration process. If you have questions about the participation requirements, please get in touch with your Ready Region or email [vqb5@doe.virginia.gov](mailto:vqb5@doe.virginia.gov)

- Accept**
- I would like more information before accepting**

#### 4. **Grant Regional Lead Access** \*

You can grant site access to your Regional Leads so they can assist your work. If you grant your Regional Lead(s) access, they will be able to:

- Edit the Site profile and Classroom profile(s), and enter CLASS® scores for the site's classrooms
- View (but not edit) Site Admin and Educator/Assistant profiles for this site

Note: If you grant your Regional Leads site access, you can revoke that access at any time in the future.

- Skip**
- Grant Access**

## **Site Administrator Profile**

*Includes Family Day Home Providers, Multi-Site Admin, and any additional Site Administrators*

1. **First Name \*** \_\_\_\_\_
2. Maiden Name (if applicable, include first middle and last name) \_\_\_\_\_
3. **Last Name \*** \_\_\_\_\_
4. **Work Email Address \*** \_\_\_\_\_  
*Please note that this is the email address used to log in to LinkB5.*
5. Literacy Email Address \_\_\_\_\_  
*The email address you use to log in to the Virginia Literacy Program website, if applicable.*
6. Additional Email Address \_\_\_\_\_
7. **Primary Phone Number \*** (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
*The preferred number is a cell phone. If you do not have a cell phone or do not want to share it, please enter the primary phone number at which you may be contacted.*
8. **Month and Day of Birth \*** \_\_\_\_ / \_\_\_\_
9. Multilingual? (select one)  
*Do you speak more than one language fluently?*
  - Yes
  - No
10. Gender (select one)
  - Male
  - Female
  - Non-Binary
11. Ethnicity (select one)
  - Hispanic or Latino
  - Not Hispanic or Latino
12. Race (select all that apply)
  - American Indian / Alaska Native
  - Asian
  - Black or African American
  - White
  - Native Hawaiian / Other Pacific Islander
13. **Type- Highest Degree / Credential \***
  - Less than High School
  - High School Diploma or GED

- Some College
- Child Development Associates
- Associates
- Bachelors
- Some Graduate
- Masters
- PhD
- EdD

14. Content - Highest Degree/Credential \_\_\_\_\_  
*The name of the content area in which you earned your highest degree/credential.*

15. Do you have a degree in early childhood?  
 ○ Yes  
 ○ No

16. **Years of Experience in Early Childhood\***  
*Please write the number of years of experience, if applicable.*  
 ○ Less than one year  
 ○ One or more year/s \_\_\_\_\_

17. **Years of Experience at Current Site\***  
*Please write the number of years of experience, if applicable.*  
 ○ Less than one year  
 ○ One or more year/s \_\_\_\_\_

18. **Position / Title (select as many as apply): \***

- Assistant Director / Principal
- Data Manager
- Data Specialist / Technician
- Director of Arts / Special Programs
- Director of Curriculum
- Director of Early Childhood
- Director of Title/Federal Programs
- Director / Coordinator of Family Engagement
- Director / Principal
- Education Specialist
- Instructional Coach
- Site Owner
- Special Education Director
- Other \_\_\_\_\_

19. Do you also work directly with children at your site? \*

- Yes
- No

20. During a typical week at your site, do you work as an educator/assistant in a birth-five setting, directly with children NOT yet in Kindergarten for at least 30 hours or more each week? \*

- Yes
- No

If you answered 'Yes' to Questions 19 and/or 20, complete the following:

a. Role \*

- Educator / Lead Educator
- Assistant

b. My Permanent Mailing Address

*The address where you will be sent important program correspondence*

Address line 1 \* \_\_\_\_\_

Address line 2 (apartment, suite, building, floor, etc.) \_\_\_\_\_

c. City \* \_\_\_\_\_

d. State \* \_\_\_\_\_

e. Zip Code \* \_\_\_\_\_

### Licenses, Endorsements, and/or Certificates Held

*If you are a licensed childcare provider through the Department of Social Services, enter this information on the Site Profile under DSS license. To find your teaching license number, please inquire at the Virginia Department of Education. Contact VDOE Staff at 1-800-292-3820 or [licensure@doe.virginia.gov](mailto:licensure@doe.virginia.gov).*

21. Virginia Teaching License?

*This information can be found on your paper license issued by the Commonwealth of Virginia.*

- Yes
- No

Only if 'Yes', complete the following:

Select a Virginia prefix (e.g., PGP, PPS) and enter the license number of 6-8 digits below:

a. Select License Prefix Below

- 11:** Vocational Evaluator License
- CP:** Collegiate Professional License
- CTE:** Career and Technical Education License
- IE:** International Educator License
- OYL:** One-Year License
- OYL (CS):** One-Year License – Career Switcher
- OYL (SPED):** One-Year License – Special Education
- PGP:** Postgraduate Professional License
- PPS:** Pupil Personnel Services License
- PRCS:** Provisional (Career Switcher) License
- PROV (AW):** Provisional License (Annual T&I Waiver)

- PROV (VET):** Provisional Veteran License
- PROV:** Provisional License
- PROVDOC:** Provisional License (VDOC only)
- PRSE:** Provisional (Special Education) License
- SM:** School Manager License
- TP:** Technical Professional License
- TPDOC:** Technical Professional License (VDOC only)

b. License Number \_\_\_\_\_  
*Virginia License number must be 6-8 digits*

**22. Endorsements**

*Additional teaching endorsements added to your license. **Look up your endorsements here:***  
<https://doe.virginia.gov/teaching/licensure/>

- a. Early Childhood Education (Yes / No)  
*Examples include Early childhood for 3- and 4-year-old children*  
 Date Earned \_\_\_/\_\_\_/\_\_\_
- b. Early Childhood Special Education (Yes/No)  
 Date Earned \_\_\_/\_\_\_/\_\_\_
- c. Elementary Education (Yes / No)  
*Endorsements in elementary education, even if they also include early childhood. Examples include the following: Early / primary education preK-3, Elementary education preK-6 and preK-12, special education-general education K-6 or K-12, mathematics specialist for elementary education, school counselor preK-12*  
 Date Earned \_\_\_/\_\_\_/\_\_\_
- d. Administration and Supervision (Yes / No)  
 Date Earned \_\_\_/\_\_\_/\_\_\_
- e. Other Endorsement Name: \_\_\_\_\_  
 Date Earned \_\_\_/\_\_\_/\_\_\_

**23. Additional Licenses**

*Any other professional licenses held related to education, including out of state teaching licenses.*

- a. Additional License Name: \_\_\_\_\_  
 Additional License Number: \_\_\_\_\_  
 Date Earned \_\_\_/\_\_\_/\_\_\_

24. Additional Certificates

*Additional credentials or certificates you have received. Examples include the following: Child Development Associate (CDA), Applied Behavioral Analysis Certificate, American Montessori Society Credential, CPR/First Aid*

- a. Certificate Name: \_\_\_\_\_  
Certificate Number: \_\_\_\_\_  
Date Earned \_\_/\_\_/\_\_\_\_

**Professional Development (past 12 months)**

25. Have you ever received any **CLASS**<sup>®</sup> overview and introduction training?

- Yes
- No

26. Have you been trained in **CLASS**<sup>®</sup> as an observer in the past 12 months?

- Yes
- No

27. Have you participated in coaching services in the past 12 months?

*Instructional coaching is individualized support (e.g. direct feedback, instruction, tools) provided to an educator with the intention of supporting professional growth and improved teaching quality.*

- Yes
- No

28. Have you participated in a Professional Learning Community (**PLC**) and/or Community of Practice (**CoP**)?

*A PLC or CoP is a group of teaching professionals who regularly collaborate by reflecting, analyzing, and sharing practices in order to improve teaching skills.*

- Yes
- No



## Site Profile

If you are a Primary Site Administrator at more than one site, you will need to fill this form out for each of your sites.

### Site Information

1. **Site Name \*** \_\_\_\_\_
2. Public Facing Site Name \_\_\_\_\_  
*If the site name for the public VQB5 Quality Profile website should differ from your LinkB5 site name, please indicate the desired name here.*
3. **Site Address line 1 \*** \_\_\_\_\_  
Site Address line 2 \_\_\_\_\_
4. **City \*** \_\_\_\_\_
5. **State \*** \_\_\_\_\_
6. **Zip Code \*** \_\_\_\_\_
7. **Phone \*** (\_\_\_\_) \_\_\_\_ - \_\_\_\_\_
8. **Site Contact Email \*** \_\_\_\_\_  
*The email address used specifically for the site, if different than the administrator email address.*
9. **Does your site have a website? \***
  - Yes
  - NoIf you answered yes: Website Address \_\_\_\_\_
10. **Is the Site Address the same as the Site Mailing Address? \***
  - Yes
  - NoOnly if 'No',
  - a. **Mailing Address line 1 \*** \_\_\_\_\_  
Mailing Address line 2 \_\_\_\_\_
  - b. **City \*** \_\_\_\_\_
  - c. **State \*** \_\_\_\_\_
  - d. **Zip Code \*** \_\_\_\_\_

### Site Type Information

Please contact [linkb5support@virginia.edu](mailto:linkb5support@virginia.edu) if you need to change your Site Type.

- A Public School is a site that is funded and run by the state of Virginia's Department of Education.

- Centers are child day programs offered to two or more children in a facility that is not the residence of the provider or any of the children in care.  
A Family Day Home is an early childhood care and education site that serves 12 or fewer children in the home of the provider/owner. We recognize that "Family Childcare" may be the preferred language.

**11. Site Type \***

- Public School
  - i. If Public School, provide name: \_\_\_\_\_
- Center
  - i. If Center, provide name: \_\_\_\_\_
- Family Day Home
- Unknown

**Days of the Week In Session \***

Enter the time your site starts serving children and the time your site ends serving children for each day in session.

- Sunday**
  - Start time \_\_\_:\_\_\_ AM/PM
  - End time \_\_\_:\_\_\_ AM/PM
- Monday**
  - Start time \_\_\_:\_\_\_ AM/PM
  - End time \_\_\_:\_\_\_ AM/PM
- Tuesday**
  - Start time \_\_\_:\_\_\_ AM/PM
  - End time \_\_\_:\_\_\_ AM/PM
- Wednesday**
  - Start time \_\_\_:\_\_\_ AM/PM
  - End time \_\_\_:\_\_\_ AM/PM
- Thursday**
  - Start time \_\_\_:\_\_\_ AM/PM
  - End time \_\_\_:\_\_\_ AM/PM
- Friday**
  - Start time \_\_\_:\_\_\_ AM/PM
  - End time \_\_\_:\_\_\_ AM/PM
- Saturday**
  - Start time \_\_\_:\_\_\_ AM/PM
  - End time \_\_\_:\_\_\_ AM/PM

**12. For what calendar period does this site serve children ages birth to five years? \***

This can include regular school closures for holidays and breaks (Select one):

- School Year Only
- Year Around
- Other \_\_\_\_\_

## Site Care Options Information

### 13. Site Care Options\*

- Drop-in
- Overnight
- Extended hours
- After school
- None of these

### 14. Transportation available for children ages birth to five years?

- Yes
- No

### 15. Do you have children on a waitlist at your site?

- Yes
- No

## Site Funding Information

### 16. Does your site receive any of the following public funding? (Select all that apply) \*

*Please see the notes below before making your choice:*

- **Virginia Preschool Initiative (VPI):** State funds distributed to schools and community-based organizations, as well as required local matching funds, to provide quality preschool programs for at-risk four-year-old children.
- **Early Childhood Special Education (ECSE/IDEA):** Federal and state funding for Early Childhood Special Education (IDEA Part B) and Early Intervention (IDEA Part C) for children from birth to 5-years-old who qualify according to state and federal requirements for eligibility.
- **Title 1:** Federal funding that provides supplemental funds to school districts in order to assist schools with the highest student concentrations of poverty to meet school educational goals.
- **Head Start:** Federal funding provided from a local Head Start grantee to programs to support qualifying 3–5-year-old children.
- **Early Head Start:** Federal funding provided from a local Early Head Start grantee to programs to support qualifying infants and toddlers under the age 3 and pregnant women.
- **Child Care Subsidy Program (VA CCSP):** State (CCSP) or local funds that provide financial assistance to eligible families to help pay for the cost of child care.
- **Local Child Care Assistance:** Local child care assistance, such as Fairfax’s Child Care Assistance and Referral (CCAR) program
- **Child Care Access Means Parents in School (CCAMPIS):** This program supports the participation of low-income parents in postsecondary education through the provision of campus-based child care services.
- **VECF Mixed Delivery Grant:** Provides public (state and federal) funding for slots in private, community-based settings such as child care centers for 3- and 4-year-olds who meet VPI eligibility criteria.
- **DOD Fee Assistance Program (Off-base):** Federal funding that provides child care fee assistance to military families.

- **DOD On-base child care:** Federal funding that provides child care fee assistance to military families.
- (CCAMPIS)** Child Care Access Means Parents in School
- (VA CCSP)** Child Care Subsidy Program
- DOD (Off-base)** Fee Assistance Program
- DOD On-base** Child Care
- (ECSE or IDEA)** Early Childhood Special Education
- Early Head Start**
- Head Start**
- Local Child Care Assistance**  
*Local child care assistance, such as Fairfax’s Child Care Assistance and Referral (CCAR) program*
- Military Child Care Free Assistance (MCCYN – off base)**
- Title 1**
- VECF** Mixed Delivery Grant
- (VPI)** Virginia Preschool Initiative
- Other federal childcare assistance
- None of these

**Site Rates**

Please indicate the WEEKLY rates your program charges. Do not include late fees or discounts for multiple children. If you do not have rates for an age group, please leave blank.

**17. Weekly rates charged per child for full-day care (5 or more hours daily): \***

- Infants (birth up to 16 months) \$ \_\_\_\_\_
- Toddlers (16 up to 24 months) \$ \_\_\_\_\_
- Preschoolers (24 months up to eligibility for Kindergarten entry) \$ \_\_\_\_\_
- School-age (summer/school closures) \$ \_\_\_\_\_

**18. Do you offer a weekly rate for part-time care (less than 5 hours daily) ? \***

- Yes
  - i.* Infants (birth up to 16 months) \$ \_\_\_\_\_
  - ii.* Toddlers (16 up to 24 months) \$ \_\_\_\_\_
  - iii.* Preschoolers (24 months up to eligibility for Kindergarten entry) \$ \_\_\_\_\_
  - iv.* School-age (summer/school closures) \$ \_\_\_\_\_
- No

**19. Do you offer weekend care? \***

- Yes
- No

**20. Do you offer extended hours? Extended hours are any time before 7am or after 6pm. \***

- Yes
- No

**21. Does your site charge families a registration fee? \***

- Yes, my site charges a registration fee
  - i. **Registration fee** \*: \$ \_\_\_\_\_
  - ii. **How often does your site charge families a registration fee?** \*
    - 1. Annual registration fee
    - 2. One-time registration fee
    - 3. I'm not sure
- No, my site does not charge a registration fee
- I'm not sure

### Site Compensation Information

*A snapshot of what compensation and benefits for your educators and assistants look like today.*

### Pay Range and Benefits by Role

*Why is this information important? Understanding educator pay is important for statewide efforts to improve quality and access for young children and their families. This is for informational purposes only.*

22. What is the minimum/maximum pay (hourly wage) for Educators/Lead Educators at this site?

- \$ \_\_\_\_\_ (Min hourly wage) - \$ \_\_\_\_\_ (Max hourly wage)

23. On average, what do you pay Educators/Lead Educators? Your best estimate is fine.

- \$ \_\_\_\_\_ (Average hourly wage)

24. Educator/Lead Educator Benefits and Additional Compensation (select all that apply)

- Medical
- Dental
- Signing Bonus
- Overtime
- Vision
- Retirement
- Yearly Bonus
- Retention Bonus
- Professional Development Reimbursement
- Paid Vacation Time
- Paid Sick Time
- Maternity / Family Leave
- Free / Reduced-Price Child Care
- None of these

25. What is the minimum / maximum pay (hourly wage) for Assistants at this site?

- \$ \_\_\_\_\_ (Min hourly wage) - \$ \_\_\_\_\_ (Max hourly wage)

26. On average, what do you pay Assistants? Your best estimate is fine.

- \$ \_\_\_\_\_ (Average hourly wage)

27. Assistant Benefits and Additional Compensation (select all that apply)

- Medical
- Dental
- Signing Bonus
- Overtime
- Vision
- Retirement
- Yearly Bonus
- Retention Bonus
- Professional Development Reimbursement
- Paid Vacation Time
- Paid Sick Time
- Maternity / Family Leave
- Free / Reduced-Price Child Care
- None of these

**Site Accreditation Information**

Please verify associated accreditation information in this section.

28. **DSS License Type \***

- CCE** - Religious Exempt Child Day Center
- CCS** - Short Term Child Day Center
- CDC** - Child Day Center
- CNS** - Certified Pre-School
- FDH** - Family Day Home
- FDS** - Family Day System
- FEXP** - Filing Exempt
- LGA** - Local Government Approved Child Day Center
- LOH** - Local Ordinance Home
- NS-LOH** - Non-Subsidy Local Ordinance Home
- SAH** - System Approved Home
- UFD** - Unlicensed/Unregulated Family Day Home
- VR** - Voluntary Registered Family Day Home

29. **DSS License Date Issued\*** \_\_\_ / \_\_\_ / \_\_\_\_\_

30. DSS License Status (such as "two-year license") \_\_\_\_\_

31. **DSS License Number \*** \_\_\_\_\_

32. **DSS Subsidy Vendor? \***

- Yes
- No

Only if 'Yes', **DSS Subsidy Vendor Number \*** \_\_\_\_\_

33. Other Site-Level Accreditation or Rating (*Including Virginia State Accreditation*)

- Yes

- No

Only if 'Yes':

Accreditation Name \_\_\_\_\_

Date Earned \_\_\_ / \_\_\_ / \_\_\_\_\_

Rating Level (if applicable) \_\_\_\_\_

License Number \_\_\_\_\_

### Site Leadership

*Additional administrative supports at your site. Choose the label that most closely describes the responsibilities of other leaders at your site.*

34. Which of the following roles exist at your site? (Select all that apply)

- None of these
- Assistant Director or Principal
- Director of Early Childhood
- Special Education Director
- Site Owner
- Director of Curriculum
- Instructional Coach
- Director / Principal

### Site Description

*Tell us more about your site. What other information would you like to provide and share about your site?*

35. Please add what you would like families to know about your site:

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## **Classroom Profile(s)**

Complete the 'Classroom Profile' section for **each** classroom with children from birth through 5 years of age at your site(s).

### **Classroom Information**

1. **Classroom Name** \* \_\_\_\_\_

2. **Is this classroom operating on a full-time schedule?** \*

*Full-time refers to a classroom that operates at least four days per week for at least 128 days per year, with classes that operate for a minimum of 3.5 hours per day .*

- Full-time
- Part-time

3. **Names of Educators/ Assistants**\*

*Please write the names of one or more adults for this classroom. You must associate at least one educator or assistant with this classroom before you submit the profile.*

- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_
- \_\_\_\_\_

4. Languages of Instruction (select all that apply)

- American Sign Language
- Amharic
- Arabic
- Mandarin Chinese
- Dari
- English
- Farsi
- French
- German
- Greek
- Italian
- Korean
- Latin
- Portuguese
- Russian
- Spanish
- Turkish
- Urdu
- Vietnamese

5. Are the classroom days and hours the same as the site's?

- Yes
- No

6. Number of adults always in the classroom? \_\_\_\_\_
7. Classroom is located in a module/trailer/mobile building?
- Yes
  - No
8. Do you have adults who join the classroom on a weekly basis (in addition to educators and assistants always in the classroom)?
- Yes
  - No
9. **Revenue Sources? \*** (Select all that apply)  
*Please see the notes below before making your choice:*
- **Child Care Subsidy:** State (**CCSP**) or local funds that provide financial assistance to eligible families to help pay for the cost of child care.
  - **Early Head Start:** Federal funding provided from a local Early Head Start grantee to programs to support qualifying infants and toddlers under the age 3 and pregnant women.
  - **ECSE/IDEA:** Federal and state funding for Early Childhood Special Education (IDEA Part B) and Early Intervention (IDEA Part C) for children from birth to 5-years-old who qualify according to state and federal requirements for eligibility.
  - **Head Start:** Federal funding provided from a local Head Start grantee to programs to support qualifying 3–5-year-old children.
  - **Military child subsidy:** Federal funding that provides child care fee assistance to military families.
  - **Other local funding:** Non-state, non-federal funds not described in other categories above.
  - **Private pay:** Funds that are paid by the parent or care-taker out of their personal income or assets.
  - **Scholarship:** Funds from private, religious, independent, or community sources that provide financial assistance to cover the cost of program attendance.
  - **Title 1:** Federal funding that provides supplemental funds to school districts in order to assist schools with the highest student concentrations of poverty to meet school educational goals.
  - **VPI:** State funds distributed to schools and community-based organizations, as well as required local matching funds, to provide quality preschool programs for at-risk four-year-old children.
- (CCAMPIS) Child Care Access Means Parents in School**
  - (VA CCSP) Child Care Subsidy Program**
  - DOD On-base Child Care**
  - (ECSE or IDEA) Early Childhood Special Education**
  - Early Head Start**
  - Head Start**
  - Local Child Care Assistance**  
*Local child care assistance, such as Fairfax’s Child Care Assistance and Referral (CCAR) program*
  - Military Child Care Fee Assistance (MCCYN-off base)**
  - Military Child Subsidy**
  - Other federal childcare assistance**

- Other Local Funding**  
*Non-state, non-federal funds not described in other categories*
- Private Pay**
- Scholarship**  
*Funds from private, religious, independent, or community sources that provide financial assistance to cover the cost of program attendance.*
- Title 1**
- VECF Mixed Delivery Grant**
- Virginia Preschool Initiative (VPI)**
- None of these**

### **Classroom Composition Snapshot**

*Children enrolled in the classroom at the end of September.*

**10. What age band does this classroom typically serve? \***

*If mixed age, select the option that best reflects this classroom's targeted age group.*

- Infant** (0-15 mo.) Classroom
- Toddler** (16-35 mo.) Classroom
- Preschool** Classroom

At the end of September, the following outlines this classroom's composition:

**11. Total Number of Children in the Classroom \*:** \_\_\_\_\_

**12. Total Number of Children by Age Band \***

*Enter '0' when there are no children in that age band.*

- Infants (0-15 mo.) \_\_\_\_\_
- Toddlers (16-35 mo.) \_\_\_\_\_
- 3-Year-Olds \_\_\_\_\_
- 4-Year-Olds \_\_\_\_\_
- 5-Year-Olds \_\_\_\_\_
- 6-Year-Olds \_\_\_\_\_

**13. Total Vacant Slots \*** \_\_\_\_\_

**14. Full-time Rates by Week \* \$** \_\_\_\_\_

**15. Sliding Scale Available? \***

- Yes
- No

**16. Total number of children with IEP? \*** \_\_\_\_\_

**17. Total number of children with IFSP?** \_\_\_\_\_

**18. Total number of children that speak a language other than English at home? \*** \_\_\_\_\_

## Curricula or Learning Framework Information

### 19. Is there a VDOE-approved curriculum or learning framework used? \*

- Yes
- No

Only if 'No', Are you interested in learning more about VDOE's free curriculum option for publicly funded programs? \*

- Yes
- No

Only if 'Yes' (Select all that apply) \*

*\*Please note, this list continues on the next page, and will be revised on a regular basis. Please refer to this [VDOE link](https://www.doe.virginia.gov/home/showpublisheddocument/45243/638346839208170000) to see the most up-to-date list of approved curriculum (or copy-paste this URL <https://www.doe.virginia.gov/home/showpublisheddocument/45243/638346839208170000>).*

- ABC Jesus Loves Me
- Ascend Curriculum (Toddlers, Twos, Threes, Fours, PreK)
- Beyond Cribs and Rattles Comprehensive Program, 2<sup>nd</sup> Edition
- Big Day for PreK
- Blueprint
- Brain-Based Learning by Blue Ribbon Results
- Callahan Education
- Childtime Empowered Child
- Connect4Learning
- Core Knowledge Preschool Sequence
- The Creative Curriculum for Family Child Care, 3<sup>rd</sup> Edition
- The Creative Curriculum for Infants, Toddlers & Twos, 3<sup>rd</sup> Edition
- The Creative Curriculum for Preschool, 6<sup>th</sup> Edition
- Creative Learning (TeeSpot)
- Curiosity Corner, 2<sup>nd</sup> Edition
- Early Learning Matters
- Exceed Preschool Curriculum (4 year old)
- Experience Early Learning/Mother Goose Time
- Fairfax County Public Schools Pre-K Curriculum
- Frog Street Infant
- Frog Street Pre-K
- Frog Street Threes
- Frog Street Toddler
- Funnydaffer
- Funshine Express
- The Gee Whiz Curriculum for Family Child Care
- Get Set for School (Learning Without Tears)
- HighReach Learning
- HighScope Infant-Toddler Curriculum
- HighScope Preschool Curriculum
- The InvestiGator Club Family Childcare Program
- The InvestiGator Club Just for Threes

- The InvestiGator Club Little InvestiGators (Infants and Toddlers)
- The InvestiGator Club PreKindergarten Learning System
- Kiddie Academy Life Essentials
- KinderCare (Infant and Toddler; PreK)
- LaPetite Academy Early Innovators
- Learn As We Grow (Early Preschool)
- Learn Every Day: The Program for Infants, Toddlers & Twos, 2<sup>nd</sup> Edition
- Learn Every Day” The Program for preschool, 2<sup>nd</sup> Edition
- Learn From The Start (Infant, Toddlers, Twos)
- Learning Beyond Paper (Infant, Toddler, PreK)
- Learning Experience Academic Program (LEAP)
- Montessori Birth through Five Curriculum: VA Montessori Assoc.
- Opening the World of Learning (OWL)
- PLAYWORKS
- PreK On My Way
- Robert E. Simon Jr., Children’s Center Inc.
- Seedlings
- STREAMin<sup>3</sup>
- Three Cheers for Pre-K
- Tools of the Mind
- Venture Program (Primrose Balanced Learning)
- Virginia Beach Pre-K Curriculum
- Wonder of Learning (Goddard School)
- Wonder Program (Primrose Balanced Learning)
- World at their Fingertips (Bright Horizons)
- World of Wonders

20. Do you conduct regular assessments of children's growth and development?

- Yes
- No

Only if ‘Yes’, How frequently?

- Once a year
- Twice a year
- Three or more times a year

Only if ‘Yes’ (Select all Growth Assessments that apply)

- Assessment, Evaluation, and Programming System for Infants and Children (**AEPS**)
- Ages and Stages Questionnaire (**ASQ**)
- Brigance Inventory of Early Development**
- Teaching Strategies GOLD assessment (**TSG**)
- Phonological Awareness Literacy Screening (**PALS**)
- Progress Reports**
- HighScope’s Child Observation Record (**COR**)
- Locally Derived**
- Virginia Kindergarten Readiness Program (**VKRP**)
- Other \_\_\_\_\_

## **Classroom List(s)**

Please see the notes below:

- Complete the 'Classroom Lists' section for EACH CLASSROOM WITH CHILDREN FROM BIRTH THROUGH 5 YEARS OF AGE AT YOUR SITE!
- A State Testing Identifier (STI) is a unique 10-digit number (beginning with 101 or 102) assigned to public school children in Virginia. Not every publicly-funded child currently has an STI.

1. **Classroom Name \*** \_\_\_\_\_

2. Enter student information for each publicly funded student ages birth to five in this classroom.

- a. **First Name \*** \_\_\_\_\_
- b. **Middle Name** \_\_\_\_\_
- c. **Last Name \*** \_\_\_\_\_
- d. **Date of Birth \*** \_\_\_ / \_\_\_ / \_\_\_\_\_
- e. **Gender \***
- Male
  - Female
  - Non-binary
- f. **State Testing Identifier (STI)** \_\_\_\_\_

- a. **First Name \*** \_\_\_\_\_
- b. **Middle Name** \_\_\_\_\_
- c. **Last Name \*** \_\_\_\_\_
- d. **Date of Birth \*** \_\_\_ / \_\_\_ / \_\_\_\_\_
- e. **Gender \***
- Male
  - Female
  - Non-binary
- f. **State Testing Identifier (STI)** \_\_\_\_\_

- a. **First Name \*** \_\_\_\_\_
- b. **Middle Name** \_\_\_\_\_
- c. **Last Name \*** \_\_\_\_\_
- d. **Date of Birth \*** \_\_\_ / \_\_\_ / \_\_\_\_\_
- e. **Gender \***
- Male
  - Female
  - Non-binary
- f. **State Testing Identifier (STI)** \_\_\_\_\_

## **Educator Profile**

### **Educator / Assistant Information**

1. **Role (select one) \***
  - Educator / Lead Educator
  - Assistant
  
2. **First Name \*** \_\_\_\_\_
  
3. Maiden Name (if applicable include first middle and last name) \_\_\_\_\_
  
4. **Last Name \*** \_\_\_\_\_
  
5. **Work Email Address \*** \_\_\_\_\_  
*Please note, this is the email address used to log in to LinkB5.*
  
6. Literacy Email Address \_\_\_\_\_  
*The email address you use to log in to the Literacy website (if applicable)*
  
7. Additional Email Address \_\_\_\_\_
  
8. **Primary Phone Number \*** (\_\_\_\_) \_\_\_\_ - \_\_\_\_  
*The preferred number is a cell phone. If you do not have a cell phone or do not want to share it, please enter the primary phone number at which you may be contacted.*
  
9. **Month and Day of Birth \*** \_\_\_\_ / \_\_\_\_
  
10. Multilingual? (select one)  
*Do you speak more than one language fluently?*
  - Yes
  - No
  
11. Gender (select one)
  - Male
  - Female
  - Non-Binary
  
12. Ethnicity (select one)
  - Hispanic or Latino
  - Not Hispanic or Latino
  
13. Race (select all that apply)
  - American Indian / Alaska Native
  - Asian
  - Black or African American
  - White
  - Native Hawaiian / Other Pacific Islander

**14. Type- Highest Degree / Credential \***

- Less than High School
- High School Diploma or GED
- Some College
- Child Development Associates
- Associates
- Bachelors
- Some Graduate
- Masters
- PhD
- EdD

**15. Content area of Highest Degree/Credential \_\_\_\_\_**

*The name of the content area in which you earned your highest degree/credential.*

**16. Do you have a degree in early childhood?**

- Yes
- No

**17. Years of Experience in Early Childhood \***

*Please write the number of years of experience, if applicable.*

- Less than one year
- One or more year/s: \_\_\_\_\_

**18. Years of Experience at Current Site \***

*Please write the number of years of experience, if applicable.*

- Less than one year
- One or more year/s: \_\_\_\_\_

**19. During a typical week at your site, do you work as an Educator/Assistant in a birth-five classroom setting, directly with children NOT yet in Kindergarten, for at least 30 hours or more each week? \***

- Yes
- No

**20. Are you paid by the public school system or another entity located in the public school? \***

*For Public School employees only*

- Yes
- No

**21. My Permanent Mailing Address**

*The address where you will be sent important program correspondence.*

**Address line 1 \*** \_\_\_\_\_

Address line 2 \_\_\_\_\_

**City \*** \_\_\_\_\_

**State \*** \_\_\_\_\_

**Zip Code \*** \_\_\_\_\_



## Licenses, Endorsements, and/or Certificates Held

Please confirm or update this additional information. If you are a licensed childcare provider through the Department of Social Services, enter this information on the Site Profile under DSS license. **To find your teaching license number, please inquire at the Virginia Department of Education. Contact VDOE Staff at 1-800-292-3820 or [licensure@doe.virginia.gov](mailto:licensure@doe.virginia.gov).**

### 22. Virginia Teaching License?

*This information can be found on your paper license issued by the Commonwealth of Virginia.*

- Yes
- No

Only if 'Yes', complete the following:

Select a Virginia prefix (e.g., PGP, PPS) and enter the license number of 6-8 digits below:

#### a. Select License Prefix Below

- 11:** Vocational Evaluator License
- CP:** Collegiate Professional License
- CTE:** Career and Technical Education License
- IE:** International Educator License
- OYL:** One-Year License
- OYL (CS):** One-Year License – Career Switcher
- OYL (SPED):** One-Year License – Special Education
- PGP:** Postgraduate Professional License
- PPS:** Pupil Personnel Services License
- PRCS:** Provisional (Career Switcher) License
- PROV (AW):** Provisional License (Annual T&I Waiver)
- PROV (VET):** Provisional Veteran License
- PROV:** Provisional License
- PROVDOC:** Provisional License (VDOC only)
- PRSE:** Provisional (Special Education) License
- SM:** School Manager License
- TP:** Technical Professional License
- TPDOC:** Technical Professional License (VDOC only)

b. License Number \_\_\_\_\_

### 23. Endorsements

*Additional teaching endorsements added to your license. Look up your endorsements here:*

<https://doe.virginia.gov/teaching/licensure/>

#### a. Early Childhood Education (Yes / No)

*Examples include Early childhood for 3- and 4-year-old children,*

Date Earned \_\_/\_\_/\_\_\_\_

#### b. Early Childhood Special Education (Yes / No)

Date Earned \_\_/\_\_/\_\_\_\_

- c. Elementary Education (Yes / No)  
*Endorsements in elementary education, even if they also include early childhood. Examples include: Early/primary education preK-3, Elementary education preK-6 and preK-12, special education-general education K-6 or K-12, mathematics specialist for elementary education, school counselor preK-12.*

Date Earned \_\_/\_\_/\_\_

- d. Administration and Supervision (Yes / No)

Date Earned \_\_/\_\_/\_\_

- e. Other Endorsement Name: \_\_\_\_\_

Date Earned \_\_/\_\_/\_\_

24. Additional Licenses

*Any other professional licenses held related to education, including out of state teaching licenses.*

- a. Additional License Name: \_\_\_\_\_

i. Additional License Number: \_\_\_\_\_

ii. Date Earned \_\_/\_\_/\_\_

25. Additional Certificates

*Additional credentials or certificates you have received. Examples include: Child Development Associate (CDA), Applied Behavioral Analysis Certificate, American Montessori Society Credential, CPR/First Aid.*

- a. Certificate Name: \_\_\_\_\_

i. Certificate Number: \_\_\_\_\_

ii. Date Earned \_\_/\_\_/\_\_

**Compensation**

*Why is this information important? Understanding educator pay is important for statewide efforts to improve quality and access for young children and their families. This is for informational purposes only.*

26. Please tell us about your compensation per hour.

- \$ \_\_\_\_\_ (hourly wage)

**Professional Development (past 12 months)**

*\*Please confirm or update your professional development information.*

27. Have you participated in coaching services in the past 12 months?

*Instructional coaching is individualized support (e.g. direct feedback, instruction, tools) provided to an educator with the intention of supporting professional growth and improved teaching quality.*

- Yes
- No

28. Have you participated in a Professional Learning Community (**PLC**) and/or Community of Practice (**CoP**) in the past 12 months?

*A PLC or CoP is a group of teaching professionals who regularly collaborate by reflecting, analyzing, and sharing practices in order to improve teaching skills.*

- Yes
- No

29. Have you ever received any **CLASS**<sup>®</sup> overview and introduction training?

- Yes
- No

### **Classroom Assignments**

Please confirm or update your classroom assignments.

30. What are the names of your classroom(s)?

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**Please send completed profiles to:**

LinkB5  
University of Virginia  
School of Education and Human Development  
PO Box 800784  
Charlottesville, VA 22904