Child Development Division
California Department of Education

CD 4000
March 2012

Program Self-Evaluation Annual Report

Contractor's Legal Name **PALO VERDE COMMUNITY COLLEGE DISTRICT**			
Vendor Number **7351**		☐ **Cal-SAFE** **CDS Code**	
Contract and Age	☒ **CSPP - Preschool** ☐ **CCTR – (Infant/Toddler)** ☐ **CCTR – (School Age)** ☐ **Education Network (Infant/Toddler)** ☐ **Education Network (Preschool)** ☐ **CHAN** ☐ **CMIG - (Infant/Toddler)** ☐ **CMIG - (Preschool)**		
Date Program Self-Evaluation Completed	5/10/2012		
Number of Classrooms	2	**Number of Family Child Care Homes**	0

Describe the Program Self-Evaluation Process (Note: This area expands as necessary.)
This report was completed with the participation of the program parents, College Administrator Mr. William Smith, staff of the Palo Verde College Child Development program and Program Supervisor Maria Kehl. All parents had the opportunity to do a survey for the Child Development program and the major issue they had was the involvement and interaction of other parents in the program. Parents are given the opportunity to participate during monthly parent meetings, open house and field trips. During open house, Parents had the opportunity to select a new parent committee for this fiscal year, which consist of President, Vice President, Treasurer, and secretary. Parent also receive monthly newsletters (in English and Spanish) to make them aware of the program curriculum and how they could help at home to achieve educational goals for their children.
College Administrator, Mr. William Smith visits the program on daily basis and is aware of all current information about the program.
From the DRDP summary of findings we learned that children need to continue working on the development of math and language. To complete these tasks, teachers have included more math and language art activities on their lessons, math and language games, new books and music and Program supervisor has purchased new materials to help achieve these goals.
This self-evaluation estimated date of completion for the areas of improvement stated on the surveys and summary of findings should be June 30, 2012.

A copy of the Program Self-Evaluation will be/has been presented to the Governing Board.		**Date**
A copy of the Program Self-Evaluation will be/has been presented to teaching/program staff.		**Date**
A copy of the Program Self-Evaluation will be/has been presented to parents.		**Date**
Statement of Completion **I certify that a Program Self-Evaluation was completed.**	**Signature** **Name, Title, and Phone Number**	**Date**

Fiscal Year 2011–12 Program Self-Evaluation Forms

All Forms Due:
Friday, June 1, 2012, 5 p.m.

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