# Community Services of Northeast Texas, Inc. Head Start Policy Council Meeting Tuesday, June 24, 2025 at 9:00 am Head Start Management Building 104 E. Houston Street Linden, Texas

#### **CALL TO ASSEMBLY**

Please rise.

Pledge of Allegiance (US) – I pledge allegiance to the flag of the United States of America and to the Republic for which it stands, one nation, under God, indivisible, with liberty and justice for all.

Pledge of Allegiance (TX) – Honor the Texas flag; I pledge allegiance to thee, Texas, one state under God, one and indivisible.

Community Action Promise - Community Action changes people's lives, embodies the spirit of hope, improves communities, and makes America a better place to live. We care about the entire community, and we are dedicated to Helping People Help themselves and each other.

**Our CSNT Mission –** CSNT applies all available strategies enabling Northeast Texas families to lead improved, empowered, and self-reliant lives.

Our Head Start Vision – To provide a system of education and encouragement which results in school-readiness for young children and their families.

#### Invocation

- 1. Call Meeting to Order
- 2. Recognize New Policy Council Members
- 3. Establishment of Quorum
- 4. Approval of Agenda
- 5. Approval of Minutes for May 20, 2025
- 6. Presentations

None

- 7. Reports
  - A. Financial Report

Shelley Mitchell

- 1. Head Start Financial Report June 2025
- 2. Early Head Start Report June 2025
- 3. Credit Usage Report June 2025
- 4. CACFP Financial Report June 2025
- **B.** Head Start Director Report

**Misty Van Hooser** 

- 1. Head Start/Early Head Start Report June 2025
- 2. Head Start/Early Head Start PIR June 2025
- C. Chief Executive Officer Report

**Michelle Morehead** 

#### Community Services of Northeast Texas, Inc.

#### **Head Start**

Policy Council Meeting
Tuesday, June 24, 2025 at 9:00 am
Head Start Management Building
104 E. Houston Street
Linden, Texas

- 8. Committee Reports
  - A. Appoint Committee Member(s)
- 9. Action Items
  - A. Discuss and/or Approve Disposition of Kitchen Equipment
    - A. Naples
    - **B. New Boston**
  - B. Discuss and/or Approve 2025-2026 Transportation Waiver
- 10. Discussion Items
  - A. Discuss May 23, 2023 Policy Council Meeting
- 11. Audience Comments
- 12. Executive Session
  - A. Personnel
    - 1. New hires and terminations

Discussion with respect to any matter specifically made confidential by law or regulation. Topics may include, but are not limited to: Approval of new hires, terminations, and employee matters of a confidential nature.

- 13. Required Action from Executive Session
- 14. Adiourn

#### Community Services of Northeast Texas, Inc. Head Start Policy Council Meeting Minutes Tuesday, May 6, 2025 at 9:00 am Head Start Management Building 124 N Main St Linden, Texas

			Sep-24	Oct-24	Dec-24	Jan-25	Feb-25	Mar-25	Apr-25	May -25
PC Attendance	Campus	Title	Ť							
•	eresa Thompsor	1	Х	Х	Х		Х	X		Х
Vice Chairpers			Х		Х			Х		
	Jasmine Collier		Х	Х	Х			V		V
Teresa Thompson	Morris County	Representative	Х	Х	Х		Х	Х		Х
Martavius Jones	Camp County	Representative		Х			Х			
Lauren English	Atlanta	Representative					Х			
VACANT	Atlanta	Alternate								
Heather Lundy	Bloomburg	Representative	Х		Х					
Makenzie Kidd	Bloomburg	Alternate								
T'yana Rider	D/LS	Representative		х	х		Х	Х		Х
Makahila Reeves	D/LS	Alternate								
Nellie McKelvy	Hughes Springs	Representative								
Jessica Benton (10/22/24)	Hughes Springs	Representative		х	х					
Sara Martinez	Hughes Springs	Alternate					X			
Skyler Searor (4/22/24)	Hughes Springs	Representative								X
Tamerra Jackson	Hughes Springs EHS	Representative								
Suzanne Taber	Hughes Springs EHS	Alternate								
Lauren Pace	Hughes Springs ISD	Representative			х					
Lindsey High	Hughes Springs ISD	Alternate								
Jasmine Collier	Naples	Representative	х	х	х					
Robyn Goins	Naples	Alternate								
Emily Capps	New Boston	Representative	Х		Х			Х		
Vacant	New Boston	Alternate								
Vacant	New Boston	Alternate								
Barbara Hill-Pipkens	Pittsburg	Representative						Х		Х
David Chustz	Pittsburg	Alternate								
Quaezsha Arnold	Texarkana	Representative			х					
VACANT	Texarkana	Alternate								

Others in attendance: CSNT Staff: Bernadette Harris, Bernard Yancey, Susan Horner, Shelley Mitchell, Misty Van Hooser

#### 1. Call to Order:

The meeting was called to order by Teresa Thompson, Policy Council Chairperson at 9:07 am, May 6, 2025, in the Head Start Management Building Conference Room.

#### 2. Recognize New Policy Council Members:

Skyler Searor – Hughes Springs Head Start

#### 3. Establishment of Quorum:

Quorum was established with the following Policy Council Members present: Teresa Thompson, Skyler Searor, Barbara Hill-Pipkins, T'yana Rider

#### 4. Approval of Agenda:

Members reviewed the agenda. T'yana Ryder moved to accept the agenda as presented with the amended changes to Action Item D. This motion was seconded by Barbara Pipkins. The motion was put to a vote with a majority of members voting in favor of by signaling aye. The motion carried.

Agenda Approved with following amendment:

- D: Discuss and/or Approve Head Start Continuation Grant #06CHA012952/02 changed to:
- D. Discuss and/or Approve Head Start Continuation Grand #06CH012925/02:
- 1. Grant Total \$6,003,329 (\$4,757,017, TTA \$45,638, NFS \$1,200,664, ICP \$588,272)-See Justification Document ISD Partnership
- 2. Grant Total \$6,003,329 (\$4,757,017, TTA \$45,638, NFS \$1,200,664, ICP \$593,998) See Justification Document (17) Head Start Preschool slots to (8) EHS slots
  - a. Discuss and/or Approve Change in Scope Amended Head Start Grant #06CH012925/PY01 converting (17) Head Start Preschool slots to (8) EHS Slots starting in August 1, 2025:

Head start Preschool Enrollment 465 to 448 Early Head Start Enrollment 16 to 24

#### 5. Approval of Minutes from March 25, 2025:

T'yana Ryder moved to accept the minutes of the Mar. 25, 2025 meeting as presented. The motion was seconded by Skyler Searor. The motion was put to a vote with a majority of members voting in favor of by signaling aye. The motion carried.

#### 6. Presentations:

NONE

#### 7. Reports:

#### A. Financial Report

Shelley Mitchell gave the financial report as presented.

#### **B.** Head Start Report

Bernadette Harris gave the Head Start Report as presented.

#### **C. Executive Directors Report**

Michelle Morehead, Chief Operating Officer, presented the Chief Executive Officer report.

#### 8. Committee Report:

#### **A. Appoint Committee Members**

#### 1. Executive Committee - Election of Vice Chair -

Vice Chairperson was opened for nominations. Skyler Searor was nominated for Vice Chairperson. The floor was asked three times if there were any nominations. There were no more nominations. Skyler Searor moved to cease nominations. This motion was seconded by T'yana Ryder. The motion was put to a vote with a majority of members voting in favor of by signaling aye.

#### 9. Action Items:

#### A. Discuss and/or Approve School Calendars for 2025-2026 School Year:

- 1. Atlanta
- 2. Bloomburg
- 3. Daingerfield
- 4. Hughes Springs
- 5. Pittsburg
- 6. Texarkana

#### 7. Hughes Springs Early Head Start

Misty Van Hooser reviewed the School Calendars for 2025-2026 School Year as presented. Barbara Pipkins moved to approve the School Calendars for 2025-2026 School Year items as presented. The motion was seconded by T'yana Ryder. The motion was put to a vote with a majority of members voting in favor by signaling aye. The motion carried.

#### B. Discuss and/or Approve Parent Handbook 2025-2026

Misty Van Hooser discussed and reviewed the 2025-2026 Parent Handbook. T'yana Ryder moved to approve the 2025-2026 Parent Handbook as presented. The motion was seconded by Skyler Searor. The motion was put to a vote with a majority of members voting in favor by signaling aye. The motion carried.

#### C. Discuss and/or Approve Strategic Planning Items:

#### 1. Strategic Plan including Program Goals for 2025-2026

Bernadette Harris discussed and reviewed the Strategic Plan including Program Goals for 2025-2026. Barbara Pipkins moved to approve the Strategic Plan including Program Goals for 2025-2026 as presented. The motion was seconded by T'yana Ryder. The motion was put to a vote with a majority of members voting in favor by signaling aye. The motion carried.

#### D. Discuss and/or Approve Head Start Continuation Grant #06CH012925/02:

- 1. Grant Total \$6,003,329 (\$4,757,017, TTA \$45,638, NFS \$1,200,664, ICP \$588,272)-See Justification Document ISD Partnership
- 2. Grant Total \$6,003,329 (\$4,757,017, TTA \$45,638, NFS \$1,200,664, ICP \$593,998) See Justification Document (17) Head Start Preschool (8) EHS slots
  - a. Discuss and/or Approve Change in Scope Amended Head Start Grant #06CH012925/PY01 converting (17) Head Start Preschool slots to (8) EHS Slots starting in August 1, 2025:

# Head start Preschool Enrollment 465 to 448 Early Head Start Enrollment 16 to 24

Preschool slots and convert these slots to (8) EHS slots.

Bernadette Harris discussed and reviewed Head Start Continuation Grant #06CH012925/02. Mrs. Harris explained both options:

Option 1 – The Agency would continue to serve 465 HS Preschool children and 16 EHS children in partnership with local school districts.

Option 2 – The Agency would serve 448 HS Preschool children and 24 Early Head Start children in partnership with local school districts (If option 2 is implemented, the Agency would ask that the Policy Council at this time approve for the Agency to submit an amended Grant #06CH012925/01 Application for change of scope to take (17) HS

T'yana Rider moved to approve both options 1 & 2 for the Head Start Continuation Grant #06CH012925/02 with the approval to submit an amended Grant Application for #06CH012925/01 for change of scope to take (17) HS Preschool slots and convert these slots to (8) EHS slots as presented if option 2 is implemented. The motion was seconded by Skyler Searor. The motion was put to a vote with a majority of members voting in favor by signaling aye. The motion carried.

#### 10. Discussion Items:

#### A. Discuss June and July Meeting

Bernadette Harris Discussed there will be no meeting unless necessary until August 2025. Reports will be emailed for June and July.

#### 11. Executive Session:

T'yana Ryder moved for Policy Council to go into Executive Session at 9:40 am. Barbara Pipkins seconded the motion.

Discuss new hires, terminations, transfers including the Approval of Head Start Director and employee matters of a confidential nature.

T'yana Ryder made a motion to come back into regular session at 9:45 am. Barbara Pipkins seconded the motion.

#### 12. Required Action from Executive Session:

A motion was made by T'yana Ryder to accept new hires, transfers including the Approval of the Head Start Director, and terminations as presented. The motion was seconded by Barbara Pipkins. There was no discussion of the matter. The motion was put to a vote with a majority of members voting in favor of by signaling aye. The motion carried.

#### 13. Adjourn:

A motion to adjourn was made by T'yana Rider at 9:50 am. The motion was seconded by Skyler Searor.

Minutes Submitted by: Misty Van Hooser

Minutes approved by:

# **CSNT Head Start Director's Report PY01/FY25**

#### June Report/May Data

# **How Are We Doing?**



#### HEAD START Preschool Attendance - May 2025

- √ 457 Actual Enrollment (Under/Over 8 Student(s)) Funded 465
- √ 7.4% Disability Students 10% Target
- √ 85% Average Daily Attendance



#### HEAD START Preschool NFS/ICP/Admin Expenses Rate

- √ \$873,470 NFS Collected \$1,133,347 NFS Needed
- √ \$139,329 Indirect Costs Collected
- √ 14% Admin Expense Rate



#### HEAD START Preschool CACFP Meals/Reimbursements

- √ \$8,116 Reimbursed This Month \$74,287 Reimbursed This Year
- ✓ 21 days of Service 2,838 Meals Served

#### Listen with Curosity Speak with Honesty Act with Integrity



#### **HEAD START Preschool Quality Assurance**

- √ 145 Files Reviewed/53 Classrooms Observed
- ✓ 0 Incomes Verified/0 Interviews/25 Community Contacts
- ✓ <u>Self-Assessment</u> 3 Findings/3 Corrections/0 Remaining
- ✓ <u>Annual Detailed Monitoring</u> 45 Findings/45 Corrections/0 Remaining

#### **ANNOUNCEMENTS:**

Campuses are closed for Summer - Repairs are being made as needed Preparing for new School Year

# Early Head Start Quality Assurance Report PY01/FY25

#### June Report/May Data

# **How Are We Doing?**



#### EARLY HEAD START Attendance - May 2025

- √ 16 Actual Enrollment (Under/Over 0 Student(s)) Funded 16
- √ 12.50% Disability Students 10% Target
- √ 67% Average Daily Attendance (Summer Attendance Drops)



#### EARLY HEAD START NFS/ICP/Admin Expenses Rate

- √ \$12,581 NFS Collected \$65,802 NFS Needed
- √ \$6,866 Indirect Costs Collected
- √ 8% Admin Expense Rate



#### Early Head Start CACFP Meals/Reimbursements

- √ \$1,815 Reimbursed This Month \$10,682 Reimbursed This Year
- ✓ 21 days of Service 642 Meals Served

#### Listen with Curosity Speak with Honesty Act with Integrity



#### EARLY HEAD START Quality Assurance

- ✓ 8 Files Reviewed/6 Classrooms Observed
- ✓ 0 Incomes Verified/4 Interviews/2 Community Contacts
- ✓ <u>Self-Assessment</u> 3 Findings/3 Corrections/0 Remaining
- ✓ <u>Annual Detailed Monitoring</u> 45 Findings/45 Corrections/0 Remaining

#### **ANNOUNCEMENTS:**

Campus is preparing to close for Summer Staff are preparing for new School Year



Grant Level Summary Report - 2 Programs

#### **GRANT INFORMATION**

#### **Agency Information**

Agency Name	Community Services Of Northeast Texas, Inc.		
	124 N Main St		
Agency Address	Linden TX 75563-5210		
Agency Phone Number	(903) 756 5596 - 218		
Agency Fax Number	(903) 756 7294		
Head Start Director Name	Ms. Misty VanHooser		
Head Start Director Email	Misty.VanHooser@csntexas.org	Misty.VanHooser@csntexas.org	
Agency Web Site Address	http://www.csntexas.org	http://www.csntexas.org	

#### **Program Type**

a. Head Start	1
b. Early Head Start	1
c. Migrant Head Start	0

#### **Agency Description**

a. Grantee that Directly Operates Program(s) and has no Delegates.	2
b. Grantee that Directly Operates Programs and Delegates Service Delivery.	0
c. Grantee that Maintains Central Office Staff Only and Operates no Program(s) Directly.	0
d. Delegate Agency.	0
e. Grantee that Delegates all of its Programs; It Operates no Programs Directly and Maintains no Central Office Staff.	0

#### **Number of Delegate Agencies**

a. Reported by the grant holder	0
b. Actual number of delegate reports marked as complete	0

#### **Agency Type**

a. Community Action Agency (CAA)	2
b. School System	0
c. Private/Public Non-Profit (Non-CAA) (e.g., church or non-profit hospitals)	0
d .Private/Public For-Profit (e.g., for-profit hospitals)	0
e. Government Agency (Non-CAA)	0
f. Tribal Government or Consortium (American Indian/Alaska Native)	0

#### **Agency Affiliation**

a. A secular or non-religious agency	2
b. A religiously affiliated agency or organization providing essentially secular services	0

#### A. PROGRAM INFORMATION

#### **FUNDED INFORMATION**

#### Funded enrollment by funding source

A.1 Funded Enrollment:	# of children / pregnant women
a. Head Start/Early Head Start Funded Enrollment, as identified on the NOA that captures the greatest part of the program year	481
b. Funded Enrollment from non-federal sources, i.e., state, local, private	0
c. Funded Enrollment from the MIECHV Grant Program using the Early Head Start home visiting model	0

#### Funded enrollment by program option

A.2 Center-based option	# of slots
<ul> <li>a. Number of slots equal to or greater than 1,020 annual hours for Head Start preschool children or 1,380 annual hours for Early Head Start infants and toddlers</li> </ul>	481
1. Of these, the number that are available for the full-working-day	0
2. Of these, the number that are available for the full-calendar-year	0
<ol><li>Of these, the number that are available for the full-working-day and full-calendar- year</li></ol>	0
<ul> <li>b. Number of slots with fewer than 1,020 annual hours for Head Start preschool children or 1,380 annual hours for Early Head Start infants and toddlers</li> </ul>	0
1. Of these, the number that are available for 3.5 hours per day for 128 days	0
2. Of these, the number that are available for a full working day	0
A.3 Home-based option	0
A.4 Family child care option	0
A.5 Locally designed option	0
	# of pregnant women slots
A.6 Pregnant women slots	0

#### Funded slots at child care partner

	# of slots
A.7 Total number of slots in the center-based or locally designed option	481
a. Of these, the total number of slots at a child care partner	0
A.8 Total funded enrollment at child care partners (includes center-based, locally designed, and family child care program options)	0

#### **CLASSES IN CENTER-BASED**

	# of classes
A.9 Total number of center-based classes operated	28
a. Of these, the number of double session classes	0

#### **CUMULATIVE ENROLLMENT**

#### **Children by Age**

A.10 Children by age:	# of children
a. Under 1 year	0
b. 1 year old	3
c. 2 years old	15
d. 3 years old	235
e. 4 years old	277
f. 5 years and older	1
g. Total cumulative enrollment of children	531

#### **Pregnant women**

	# of pregnant women
A.11 Cumulative enrollment of pregnant women	0

#### **Total cumulative enrollment**

	# of children / pregnant women
A.12 Total cumulative enrollment	531

#### Primary type of documentation used for determining eligibility

A.13 Report each enrollee only once by primary type of documentation used for determining eligibility:	# of children / pregnant women
a. Income at or below 100% of federal poverty line	216
b. Public assistance*	192
1. TANF documentation	1
2. SSI documentation	17
3. SNAP documentation	174
c. Foster care	15
d. Homeless	32
e. Eligibility based on other type of need, but not counted in A.13.a through d	45
f. Incomes between 100% and 130% of the federal poverty line, but not counted in A.13.a through e	31

#### **Prior enrollment**

A.15 Enrolled in Head Start or Early Head Start for:	# of children
a. The second year	163
b. Three or more years	11

#### **Transition and turnover**

	# of children
A.16 Total number of preschool children who left the program any time after classes or home visits began and did not re-enroll	68
<ul> <li>a. Of the preschool children who left the program during the program year, the number of preschool children who were enrolled less than 45 days</li> </ul>	11

	# of preschool children
A.17 Of the number of preschool children enrolled in Head Start at the end of the current enrollment year, the number projected to be entering kindergarten in the following school year	242

#### **Transition and turnover**

	# of children
A.18 Total number of infants and toddlers who left the program any time after classes or home visits began and did not re-enroll	0
<ul> <li>a. Of the infants and toddlers who left the program above, the number of infants and toddlers who were enrolled less than 45 days</li> </ul>	0
<ul> <li>b. Of the infants and toddlers who left the program during the program year, the number who aged out of Early Head Start</li> </ul>	0
<ol> <li>Of the infants and toddlers who aged out of Early Head Start, the number who entered a Head Start program</li> </ol>	0
Of the infants and toddlers who aged out of Early Head Start, the number who entered another early childhood program	0
3. Of the infants and toddlers who aged out of Early Head Start, the number who did not enter another early childhood program	0

	# of pregnant women
A.19 Total number of pregnant women who left the program after receiving Early Head Start services but before the birth of their infant, and did not re-enroll	0
A.20 Number of pregnant women receiving Early Head Start services at the time their infant was born	0
<ul> <li>a. Of the pregnant women enrolled when their infant was born, the number whose infant was subsequently enrolled in the program</li> </ul>	0
<ul> <li>b. Of the pregnant women enrolled when their infant was born, the number whose infant was not subsequently enrolled in the program</li> </ul>	0

#### **Attendance**

	# of children
A.22 The total number of children cumulatively enrolled in the center-based or family child care program option	531
a. Of these children, the number of children that were chronically absent	220
<ol> <li>Of the children chronically absent, the number that stayed enrolled until the end of enrollment</li> </ol>	155

#### **Child care subsidy**

	# of children
A.24 The number of enrolled children for whom the program and/or its partners received a child care subsidy during the program year	0

#### **Ethnicity and race**

A.25 Race and ethnicity	(1) Hispanic or Latino origin	(2) Non-Hispanic or Non-Latino origin
a. American Indian or Alaska Native	0	4
b. Asian	1	3
c. Black or African American	11	244
d. Native Hawaiian or other Pacific Islander	2	3
e. White	26	136
f. Bi-racial/Multi-racial	17	46
g. Other	36	2

	# of children /
	pregnant women
h. Unspecified ethnicity or race	0

#### Primary language of family at home

A.26 Primary language of family at home:	# of children
a. English	492
<ol> <li>Of these, the number of children acquiring/learning another language in addition to English</li> </ol>	18
b. Spanish	37
c. Native Central American, South American, and Mexican Languages	0
d. Caribbean Languages	0
e. Middle Eastern & South Asian Languages	0
f. East Asian Languages	2
g. Native North American/Alaska Native Languages	0
h. Pacific Island Languages	0
i. European & Slavic Languages	0
j. African Languages	0
k. American Sign Language	0
I. Other	0
m. Unspecified	0

#### **Dual language learners**

	# of children
A.27 Total number of Dual Language Learners	57

#### **Transportation**

A.28 Number of children for whom transportation is provided to and from classes		# of children
	A.28 Number of children for whom transportation is provided to and from classes	158

#### **B. PROGRAM STAFF & QUALIFICATIONS**

#### **TOTAL STAFF**

#### Staff by type

	(1) # of Head Start or Early Head Start staff	(2) # of contracted staff
B.1. Total number of staff members, regardless of the funding source for their salary or number of hours worked - Head Start/Early Head Start Staff	94	21
a. Of the total staff, the number who are current or former     Head Start parents - Head Start/Early Head Start Staff	38	3

#### **TOTAL VOLUNTEERS**

#### **Volunteers by type**

	# of volunteers
B.2 Number of persons providing any volunteer services to the program during the program year	349
a. Of these, the number who are current or former Head Start or Early Head Start parents	330

#### **EDUCATION AND CHILD DEVELOPMENT STAFF**

#### **Preschool classroom and assistant teachers (HS and Migrant programs)**

	(1) # of classroom teachers	(2) # of assistant teachers
B.3 Total number of preschool education and child development staff by position	26	27
Of the number of preschool education and child development staff by number with the following:	position, the	
<ul> <li>a. Of the number of preschool education and child development staff by position, the number with the following: An advanced degree in: • early childhood education or • any field and coursework equivalent to a major relating to early childhood education, with experience teaching preschool- age children</li> </ul>	3	0
b. Of the number of preschool education and child development staff by position, the number with the following: A baccalaureate degree in one of the following: • early childhood education • any field and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children or • any field and is part of the Teach for America program and passed a rigorous early childhood content exam	23	2
c. Of the number of preschool education and child development staff by position, the number with the following: An associate degree in: • early childhood education or • a field related to early childhood education and coursework equivalent to a major relating to early childhood education with experience teaching preschool-age children	0	2
d. Of the number of preschool education and child development staff by position, the number with the following: A Child Development Associate (CDA) credential or state- awarded certification, credential, or licensure that meets or exceeds CDA requirements	0	17
Of these, a CDA credential or state-awarded certification, credential, or licensure that meets or exceeds CDA requirements and that is appropriate to the option in which they are working	0	7
e. Of the number of preschool education and child development staff by position, the number with the following: None of the qualifications listed in B.3.a through B.3.d	0	6

#### Preschool classroom teachers program enrollment

	# of classroom teachers
B.4 Total number of preschool classroom teachers that do not meet qualifications listed in B.3.a or B.3.b	0
a. Of these preschool classroom teachers, the number enrolled in a degree program that would meet the qualifications described in B.3.a or B.3.b	0

#### Preschool classroom assistant teachers program enrollment

	# of assistant teachers
B.5 Total number of preschool assistant teachers that do not have any qualifications listed in B.3.a through B.3.d	6

	# of assistant teachers
<ul> <li>a. Of these preschool assistant teachers, the number enrolled in a degree, certification, credential, or licensure program that would meet one of the qualifications listed in B.3.a through B.3.d.</li> </ul>	6

#### Infant and toddler classroom teachers (EHS and Migrant programs)

	# of classroom teachers
B.6 Total number of infant and toddler classroom teachers	4
Of the number of infant and toddler classroom teachers, the number with the following:	
<ol> <li>Early childhood education with a focus on infant and toddler development or</li> <li>Any field and coursework equivalent to a major relating to early childhood education, with experience teaching infants and/or toddlers</li> </ol>	0
<ol> <li>Early childhood education with a focus on infant and toddler development or</li> <li>Any field and coursework equivalent to a majorrelating to early childhood education with experience teaching infants and/or toddlers.</li> </ol>	0
<ol> <li>Early childhood education with a focus on infant and toddler development or</li> <li>A field related to early childhood education and and and and a major relating to early childhood education with experience teaching infants and/or toddlers</li> </ol>	2
<ul> <li>d. A Child Development Associate (CDA)credential or state-awarded certification, credential, or licensure that meets or exceeds CDArequirements</li> </ul>	2
<ol> <li>Of these, a CDA credential or state-awarded certification, credential, or licensure that meets or exceeds CDA requirements and that is appropriate to the option in which they are working</li> </ol>	2
e. None of the qualifications listed in B.6.a through B.6.d	0

	# of classroom teachers	
B.7 Total number of infant and toddler classroom teachers that do not have any qualifications listedin B.6.a through B.6.d	0	
<ul> <li>a. Of these infant and toddler classroom teachers, the number enrolled in a degree, certification, credential, or licensure program that would meet one of the qualifications listed in B.6.a through B.6.d.</li> </ul>	0	

#### Home visitors and family child care provider staff qualifications

	# of home visitors
B.8 Total number of home visitors	0
<ul> <li>a. Of these, the number of home visitors that have a home-based CDA credential or comparable credential, or equivalent coursework as part of an associate's, baccalaureate, or advanced degree</li> </ul>	0
Of these, the number of home visitors that hold a baccalaureate or advanced degree	0
<ul> <li>b. Of these, the number of home visitors that do not meet one of the qualifications described in B.8.a.</li> </ul>	0
<ol> <li>Of the home visitors in B.8.b, the number enrolled in a degree or credential program that would meet a qualification described in B.8.a.</li> </ol>	0

	# of family child care providers
B.9 Total number of family child care providers	0
<ul> <li>a. Of these, the number of family child care providers that have a Family Child Care CDA credential or state equivalent, or an associate, baccalaureate, or advanced degree in child development or early childhood education</li> </ul>	0
<ol> <li>Of these, the number of family child care providers that hold a baccalaureate or advanced degree in child development or early childhood education</li> </ol>	0
<ul> <li>b. Of these, the number of family child care providers that do not meet one of the qualifications described in B.9.a.</li> </ul>	0
<ol> <li>Of the family child care providers in B.9.b, the number enrolled in a degree or credential program that would meet a qualification described in B.9.a.</li> </ol>	0

	# of child development specialists
B.10 Total number of child development specialists that support family child care providers	0
<ul> <li>a. Of these, the number of child development specialists that have a baccalaureate degree in child development, early childhood education, or a related field</li> </ul>	0
<ul> <li>b. Of these, the number of child development specialists that do not meet one of the qualifications described in B.10.a.</li> </ul>	0
1. Of the child development specialists in B.10.b, the number enrolled in a degree or credential program that would meet a qualification described in B.10.a.	0

#### **Ethnicity and race**

B.13 Race and Ethnicity # of non-supervisory education and child development staff	(1) Hispanic or Latino origin	(2) Non-Hispanic or Non-Latino origin
a. American Indian or Alaska Native	0	1
b. Asian	0	0
c. Black or African American	0	35
d. Native Hawaiian or other Pacific Islander	0	0
e. White	2	17
f. Biracial/Multi-racial	0	1
g. Other	1	0

	# of non- supervisory education and child development staff
h. Unspecified ethnicity or race	0

#### Language

	# of non- supervisory education and child development staff
B.14 The number who are proficient in a language(s) other than English.	2
a. Of these, the number who are proficient in more than one language other than English	0
B.15 Language groups in which staff are proficient:	# of non- supervisory education and child development staff
a. Spanish	2
b. Native Central American, South American, and Mexican Languages	0
c. Caribbean Languages	0
d. Middle Eastern and South Asian Languages	0
e. East Asian Languages	0
f. Native North American/Alaska Native Languages	0
g. Pacific Island Languages	0
h. European and Slavic Languages	0
i. African Languages	0
j. American Sign Language	0
k. Other	0
I. Unspecified	0

#### **STAFF TURNOVER**

#### All staff turnover

	(1) # of Head Start or Early Head Start staff	(2) # of contracted staff
B.16 Total number of staff who left during the program year (including turnover that occurred while the program was not in session, e.g., summer months)	11	10
a. Of these, the number who were replaced	10	10

#### **Education and child development staff turnover**

	# of staff
B.17 The number of classroom teachers, preschool assistant teachers, family child care providers, and home visitors who left during the program year (including turnover that occurred while classes and home visits were not in session, e.g., during summer months)	21
a. Of these, the number who were replaced	20
b. Of these, the number who left while classes and home visits were in session	10
c. Of these, the number that were classroom teachers who left the program	5
B.18 Of the number of education and child development staff that left, the number that left for the following primary reason:	# of staff
a. Higher compensation	3
1. Of these, the number that moved to state pre-k or other early childhood program	3
b. Retirement or relocation	11
c. Involuntary separation	0
d. Other (e.g., change in job field, reason not provided)	3

	# of staff
B.19 Number of vacancies during the program year that remained unfilled for a period of 3 months or longer	0

#### **C. CHILD & FAMILY SERVICES**

#### **HEALTH SERVICES**

#### Health insurance - children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.1 Number of all children with health insurance	486	477
a. Of these, the number enrolled in Medicaid and/or CHIP	414	407
<ul> <li>b. Of these, the number enrolled in state-only funded insurance (e.g., medically indigent insurance), private insurance, or other health insurance</li> </ul>	72	70
C.2 Number of children with no health insurance	45	54

#### **Health insurance - pregnant women**

	(1) # of pregnant women at enrollment	(2) # of pregnant women at end of enrollment
C.3 Number of pregnant women with at least one type of health insurance	0	0
a. Of these, the number enrolled in Medicaid	0	0
<ul> <li>b. Of these, the number enrolled in state-only funded insurance (e.g., medically indigent insurance), private insurance, or other health insurance</li> </ul>	0	0
C.4 Number of pregnant women with no health insurance	0	0

#### Medical

#### Accessible health care - children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.5 Number of children with an ongoing source of continuous, accessible health care provided by a health care professional that maintains the child's ongoing health record and is not primarily a source of emergency or urgent care	460	450
<ul> <li>a. Of these, the number of children that have accessible health care through a federally qualified Health Center, Indian Health Service, Tribal and/or Urban Indian Health Program facility</li> </ul>	5	5

#### Accessible health care - pregnant women

	(1) # of pregnant women at enrollment	(2) # of pregnant women at end of enrollment
C.6 Number of pregnant women with an ongoing source of continuous, accessible health care provided by a health care professional that maintains their ongoing health record and is not primarily a source of emergency or urgent care	0	0

#### **Medical services - children**

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.7 Number of children who are up-to-date on a schedule of age- appropriate preventive and primary health care, according to the relevant state's EPSDT schedule for well child care	42	431
		# of children
C.8 Number of children diagnosed with any chronic condition by a health care professional, regardless of when the condition was first diagnosed		33
<ul> <li>a. Of these, the number who received medical treatment for the health condition</li> </ul>	ir diagnosed chronic	30

b. Specify the primary reason that children with any chronic condition diagnosed by a health care professional did not receive medical treatment:	# of children
No medical treatment needed	2
2. No health insurance	0
3. Parents did not keep/make appointment	0
4. Children left the program before their appointment date	0
5. Appointment is scheduled for future date	1
6. Other	0

C.9 Number of children diagnosed by a health care professional with the following chronic condition, regardless of when the condition was first diagnosed:	# of children
a. Autism spectrum disorder (ASD)	0
b. Attention deficit hyperactivity disorder (ADHD)	0
c. Asthma	3
d. Seizures	1
e. Life-threatening allergies (e.g., food allergies, bee stings, and medication allergies that may result in systemic anaphylaxis)	0
f. Hearing Problems	29
g. Vision Problems	0
h. Blood lead level test with elevated lead levels >5 g/dL	0
i. Diabetes	0

#### Body Mass Index (BMI) - children (HS and Migrant programs)

C.10 Number of children who are in the following weight categories according to the 2022 CDC BMI-for-age growth charts	# of children at enrollment
a. Underweight (BMI less than 5th percentile for child's age and sex)	67
b. Healthy weight (at or above 5th percentile and below 85th percentile for child's age and sex)	281
c. Overweight (BMI at or above 85th percentile and below 95th percentile for child's age and sex)	66
d. Obese (BMI at or above 95th percentile for child's age and sex)	91

#### **Immunization services - children**

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.11 Number of children who have been determined by a health care professional to be up-to-date on all immunizations appropriate for their age	492	496
C.12 Number of children who have been determined by a health care professional to have received all immunizations possible at this time, but who have not received all immunizations appropriate for their age	17	13
C.13 Number of children who meet their state's guidelines for an exemption from immunizations	11	12

#### Medical and wellbeing services – pregnant women (EHS programs)

C.14 Indicate the number of pregnant women who received the following services while enrolled in EHS:	# of pregnant women
a. Prenatal health care	0
b. Postpartum health care	0
c. Scheduled a newborn visit within two weeks after the infant's birth	0
d. A professional oral health assessment, examination, and/or treatment	0
e. Mental health interventions and follow up	0
f. Education on fetal development	0
g. Education on the benefits of breastfeeding	0
h. Education on the importance of nutrition	0
i. Education on infant care and safe sleep practices	0
j. Education on the risks of alcohol, drugs, and/or smoking	0
k. Facilitating access to substance abuse treatment (i.e., alcohol, drugs, and/or smoking)	0

#### Prenatal health - pregnant women (EHS programs)

C.15 Trimester of pregnancy in which the pregnant women served were enrolled:	# of pregnant women
a. 1st trimester (0-3 months)	0
b. 2nd trimester (3-6 months)	0
c. 3rd trimester (6-9 months)	0
C.16 Of the total served, the number whose pregnancies were identified as medically high risk by a physician or health care provider	0

#### Newborn visit - pregnant women (EHS programs)

	# of pregnant women
C.17 Indicate the number of pregnant women that received a newborn visit	
a. Within two weeks after the infant's birth	0
b. Between two to six weeks after the infant's birth	0
c. After six weeks following the infant's birth	0

#### **ORAL HEALTH**

#### Accessible dental care - children

	(1) # of children at enrollment	(2) # of children at end of enrollment
C.18. Number of children with continuous, accessible oral care provided by an oral health care professional which includes access to oral health preventive care and oral treatment - at enrollment	429	428

	# of children
C.19 Number of children who received oral health preventive care during the program year	422
C.20 Number of all children who have completed a professional oral examination during the program year	422
<ul> <li>a. Of these, the number of children diagnosed as needing oral treatment during the program year</li> </ul>	15
<ol> <li>Of these, the number of children who received oral treatment during the program year</li> </ol>	14
b. Specify the primary reason that children who needed oral treatment did not receive it:	# of children
Health insurance doesn't cover oral treatment	0
2. No oral care available in local area	0
3. Medicaid not accepted by dentist	0
4. Dentists in the area do not treat 3- to 5-year-old children	0
5. Dentists in the area do not treat children below age 3	0
6. Parents did not keep/make appointment	0
7. Children left the program before their appointment date	0
8. Appointment is scheduled for future date	0
9. No transportation	0
10. Other	1

#### **Mental health consultation**

	# of staff
C.21 Total number of classroom teachers, home visitors, and family child care providers	30
<ul> <li>a. Indicate the number of classroom teachers, home visitors, and family child care providers who received assistance from a mental health consultant through observation and consultation</li> </ul>	30

#### **DISABILITIES SERVICES**

#### **IDEA** eligibility determination

	# of children
C.22 The total number of children referred for an evaluation to determine eligibility under the Individuals with Disabilities Education Act (IDEA) during the program year	50
a. Of these, the number who received an evaluation to determine IDEA eligibility	41
<ol> <li>Of the children that received an evaluation, the number that were diagnosed with a disability under IDEA</li> </ol>	18
<ol><li>Of the children that received an evaluation, the number that were not diagnosed with a disability under IDEA</li></ol>	23
<ol> <li>Of these children, the number for which the program is still providing or facilitating individualized services and supports such as an individual learning plan or supports described under Section 504 of the Rehabilitation Act.</li> </ol>	0

	# of children
b. Of these, the number who did not receive an evaluation to determine IDEA eligibility	9
C.23 Specify the primary reason that children referred for an evaluation to determine IDEA eligibility did not receive it:	# of children
a. The responsible agency assigned child to Response to Intervention (RTI)	3
b. Parent(s) refused evaluation	0
c. Evaluation is pending and not yet completed by responsible agency	5
d. Other	1

#### **Preschool disabilities services (HS and Migrant programs)**

	# of children
C.24 Number of children enrolled in the program who had an Individualized Education Program (IEP), at any time during the program year, indicating they were determined eligible by the LEA to receive special education and related services under the IDEA	33
<ul> <li>a. Of these, the number who were determined eligible to receive special education and related services:</li> </ul>	# of children
1. Prior to this program year	14
2. During this program year	19
b. Of these, the number who have not received special education and related services	0

#### Infant and toddler Part C early intervention services (EHS and Migrant programs)

	# of children
C.25 Number of children enrolled in the program who had an Individualized Family Service Plan (IFSP), at any time during the program year, indicating they were determined eligible by the Part C Agency to receive early intervention services under the IDEA	2
<ul> <li>a. Of these, the number who were determined eligible to receive early intervention services:</li> </ul>	# of children
1. Prior to this program year	0
2. During this enrollment year	2
b. Of these, the number who have not received early intervention services under IDEA	0

#### **Preschool primary disabilities (HS and Migrant programs)**

C.26 Diagnosed primary disability:	(1) # of children determined to have this disability	(2) # of children receiving special services
<ul> <li>a. Health impairment (i.e., meeting IDEA definition of "other health impairment")</li> </ul>	1	1
b. Emotional disturbance	0	0
c. Speech or language impairments	20	20
d. Intellectual disabilities	0	0
e. Hearing impairment, including deafness	0	0
f. Orthopedic impairment	0	0
g. Visual impairment, including blindness	0	0
h. Specific learning disability	0	0
i. Autism	7	7
j. Traumatic brain injury	0	0
k. Non-categorical/developmental delay	4	4
I. Multiple disabilities (excluding deaf-blind)	1	1
m. Deaf-blind	0	0

#### **EDUCATION AND DEVELOPMENT TOOLS/APPROACHES**

#### **Screening**

	# of children
C.27 Number of all newly enrolled children since last year's PIR was reported	369
C.28 Number of all newly enrolled children who completed required screenings within 45 days for developmental, sensory, and behavioral concerns since last year's PIR was reported	247
<ul> <li>a. Of these, the number identified as needing follow-up assessment or formal evaluation to determine if the child has a disability</li> </ul>	26

#### **FAMILY AND COMMUNITY PARTNERSHIPS**

#### **Number of families**

	# of families at enrollment
C.34 Total number of families:	489
a. Of these, the number of two-parent families	172
b. Of these, the number of single-parent families	317

C.35 Of the total number of families, the number in which the parent/guardian figures are best described as:	# of families at enrollment
a. Parent(s) (e.g., biological, adoptive, stepparents)	469
<ol> <li>Of these, the number of families with a mother only (biological, adoptive, stepmother)</li> </ol>	306
<ol><li>Of these, the number of families with a father only (biological, adoptive, stepfather)</li></ol>	17
b. Grandparents	12
c. Relative(s) other than grandparents	2
d. Foster parent(s) not including relatives	5
e. Other	1

#### Parent/guardian education

C.36 Of the total number of families, the highest level of education obtained by the child's parent(s) / guardian(s):	# of families at enrollment
a. An advanced degree or baccalaureate degree	104
b. An associate degree, vocational school, or some college	58
c. A high school graduate or GED	260
d. Less than high school graduate	67

#### **Employment, Job Training, and School**

C.37 Total number of families in which:	# of families at enrollment
a. At least one parent/guardian is employed, in job training, or in school at enrollment	332
1. Of these families, the number in which one or more parent/guardian is employed	327
<ol> <li>Of these families, the number in which one or more parent/guardian is in job training (e.g., job training program, professional certificate, apprenticeship, or occupational license)</li> </ol>	65
3. Of these families, the number in which one or more parent/guardian is in school (e.g., GED, associate degree, baccalaureate, or advanced degree)	65
b. Neither/No parent/guardian is employed, in job training, or in school at enrollment (e.g., unemployed, retired, or disabled)	157

C.38 Total number of families in which:	# of families at end of enrollment
<ul> <li>a. At least one parent/guardian is employed, in job training, or in school at end of enrollment</li> </ul>	219
<ol> <li>Of these families, the number of families that were also counted in C.37.a (as having been employed, in job training, or in school at enrollment)</li> </ol>	209
<ol><li>Of these families, the number of families that were also counted in C.37.b (as having not been employed, in job training, or in school at enrollment)</li></ol>	10
b. Neither/No parent/guardian is employed, in job training, or in school at end of enrollment (e.g., unemployed, retired, or disabled)	106
1. Of these families, the number of families that were also counted in C.37.a	4
2. Of these families, the number of families that were also counted in C.37.b	102

C.39 Total number of families in which:	# of families at enrollment
a. At least one parent/guardian is a member of the United States military on active duty	6
b. At least one parent/guardian is a veteran of the United States military	10

#### Federal or other assistance

	(1) # of families at enrollment	(2) # of families at end of enrollment
C.40. Total number of families receiving any cash benefits or other services under the Federal Temporary Assistance to Needy Families (TANF) Program	6	6
C.41. Total number of families receiving Supplemental Security Income (SSI)	31	31
C.42. Total number of families receiving services under the Special Supplemental Nutrition Program for Women, Infants, and Children (WIC)	123	111
C.43. Total number of families receiving benefits under the Supplemental Nutrition Assistance Program (SNAP), formerly referred to as Food Stamps	228	225

#### Family services

C.44 The number of families that received the following program service to promote family outcomes:	# of families
<ul> <li>a. Emergency/crisis intervention (e.g., meeting immediate needs for food, clothing, or shelter)</li> </ul>	14
b. Housing assistance (e.g., subsidies, utilities, repairs)	5
c. Asset building services (e.g., financial education, debt counseling)	89
d. Mental health services	11
e. Substance misuse prevention	2
f. Substance misuse treatment	0
g. English as a Second Language (ESL) training	14
h. Assistance in enrolling into an education or job training program	22
i. Research-based parenting curriculum	344
<ul> <li>j. Involvement in discussing their child's screening and assessment results and their child's progress</li> </ul>	418
k. Supporting transitions between programs (i.e., EHS to HS, HS to kindergarten)	419
I. Education on preventive medical and oral health	413
m. Education on health and developmental consequences of tobacco product use	199
n. Education on nutrition	420
o. Education on postpartum care (e.g., breastfeeding support)	4
p. Education on relationship/marriage	12
q. Assistance to families of incarcerated individuals	2
C.45 Of these, the number of families who were counted in at least one of the services listed above	426

#### **Father engagement**

C.46 Number of fathers/father figures who were engaged in the following activities during this program year:	# of father/ father figures
a. Family assessment	152
b. Family goal setting	156
<ul> <li>c. Involvement in child's Head Start child development experiences (e.g., home visits, parent-teacher conferences, etc.)</li> </ul>	164
d. Head Start program governance, such as participation in the Policy Council or policy committees	26
e. Parenting education workshops	33

#### **Homelessness services**

C.47 Total number of families experiencing homelessness that were served during the enrollment year	# of families
C.48 Total number of children experiencing homelessness that were served during the enrollment year	# of children
C.49 Total number of families experiencing homelessness that acquired housing during the enrollment year	# of families

#### Foster care and child welfare

	# of children
C.50 Total number of enrolled children who were in foster care at any point during the program year	20
C.51 Total number of enrolled children who were referred to Head Start/Early Head Start services by a child welfare agency	6

#### D. GRANT LEVEL QUESTIONS

#### **INTENSIVE COACHING**

	# of education and child development staff
D.1 The number of education and child development staff (i.e., teachers, preschool assistant teachers, home visitors, family child care providers) that received intensive coaching	13

	# of coaches
D.2 The number of individuals that provided intensive coaching, whether by staff,	2
consultants, or through partnership	_

#### **MANAGEMENT STAFF SALARIES**

D.3 Management staff:	(3) Number of Management Staff in this Position
a. Executive Director	1
b. Head Start and/or Early Head Start Director	1
c. Education Manager/Coordinator	3
d. Health Services Manager/Coordinator	1
e. Family & Community Partnerships Manager/Coordinator	1
f. Disability Services Manager/Coordinator	1
g. Fiscal Officer	1

#### **EDUCATION MANAGEMENT STAFF QUALIFICATIONS**

	# of education managers/coordinators
D.4 Total number of education managers/coordinators	3
a. Of these, the number of education manager/coordinators with a baccalaureate or advanced degree in early childhood education or a baccalaureate or advanced degree and equivalent coursework in early childhood education with early education teaching experience	3
<ul> <li>b. Of these, the number of education manager/coordinators that do not meet one of the qualifications in D.4.a</li> </ul>	0
Of the education manager/coordinators in D.4.b, the number enrolled in a program that would meet a qualification described in D.4.a	0

#### **FAMILY SERVICES STAFF QUALIFICATIONS**

	# of family services staff
D.5 Total number of family services staff:	17
<ul> <li>a. Of these, the number that have a credential, certification, associate, baccalaureate, or advanced degree in social work, human services, family services, counseling, or a related field</li> </ul>	17
b. Of these, the number that do not meet one of the qualifications described in D.5.a	0
<ol> <li>Of the family services staff in D.5.b, the number enrolled in a degree or credential program that would meet a qualification described in D.5.a.</li> </ol>	0
2. Of the family services staff in D.5.b, the number hired before November 7, 2016	0

#### FORMAL AGREEMENTS FOR COLLABORATION

	# of partners or agencies
D.6 Total number of child care partners in which a formal agreement was in effect	0
D.7 Total number of LEAs in the service area	23
<ul> <li>a. Of these, the total number of LEAs in which a formal agreement was in effect to coordinate services for children with disabilities</li> </ul>	8
<ul> <li>b. Of these, the total number of LEAs in which a formal agreement was in effect to coordinate transition services</li> </ul>	8
D.8 Total number of Part C agencies in the service area	5
<ul> <li>a. Of these, the total number of Part C agencies in which a formal agreement was in effect to coordinate services for children with disabilities</li> </ul>	5



#### Office of Head Start - Early Head Start Services Snapshot

Community Services Of Northeast Texas, Inc. (2024-2025)

Date	
	6/6/2025

#### **Funded Enrollment**

Number of enrollment slots the program is funded to serve.

	# of funded enrollment slots	% of funded enrollment slots
Total Funded Enrollment	16	100.00%

#### **Funded Enrollment by Program Option**

	# of funded enrollment slots	% of funded enrollment slots
Center-based	16	100.00%
Home-based	0	0%
Family Child Care	0	0%
Locally Designed	0	0%

#### **Detail - Center-based Funded Enrollment**

	# of center- based funded enrollment slots	% of center-based funded enrollment slots		
Number of slots equal to or greater than 1,020 annual hours for Head Start preschool children or 1,380 annual hours for Early Head Start infants and toddlers	16	100.00%		
Of these, the number that are available for the full- working-day and full-calendar-year	0			
Number of slots with fewer than 1,020 annual hours for Head Start preschool children or 1,380 annual hours for Early Head Start infants and toddlers	0	0%		
Of these, the number that are available for 3.5 hours per day for 128 days	0			
Of these, the number that are available for a full working day	0			

#### **Total Cummulative Enrollment**

	# of participants	% of participants
Total Cumulative Enrollment	16	100.00%

#### **Participants by Age**

	# of participants	% of participants
Under 1 Year Old	0	0.00%
1 Year Old	3	18.75%
2 Years Old	13	81.25%
3 Years Old	0	0.00%
Pregnant Women	0	0.00%

#### **Homelessness Services**

	# of children	% of children
Total number of children experiencing homelessness that were served during the enrollment year	2	12.50%

#### **Foster Care**

	# of children	% of children
Total number of enrolled children who were in foster care at any point in the program year	2	12.50%

#### **Prior Enrollment of Children**

	# of children	% of children
The second year	7	43.75%
Three or more years	0	0.00%

#### **Ethnicity And Race**

	# of Hispanic or Latino Origin participants	% of Hispanic or Latino Origin participants	# of Non- Hispanic or Non-Latino Origin participants	% of Non- Hispanic or Non-Latino Origin participants
American Indian or Alaska Native	0	0.00%	0	0.00%
Asian	0	0.00%	0	0.00%
Black or African American	0	0.00%	10	62.50%
Native Hawaiian or Pacific Islander	0	0.00%	0	0.00%
White	2	12.50%	3	18.75%
Biracial or Multi-Racial	0	0.00%	0	0.00%
Other Race	1	6.25%	0	0.00%
Unspecified Race	0	0.00%	0	0.00%

**Primary Language of Parents at Home** 

	# of children	% of children
English	14	87.50%
Of these, the number of children acquiring/learning another language in addition to English	0	0.00%
Spanish	2	12.50%
Central American, South American, or Mexican Languages	0	0.00%
Caribbean Languages	0	0.00%
Middle Eastern or South Asian Languages	0	0.00%
East Asian Languages	0	0.00%
Native North American or Alaska Native Languages	0	0.00%
Pacific Island Languages	0	0.00%
European or Slavic Languages	0	0.00%
African Languages	0	0.00%
American Sign Language	0	0.00%
Other Languages	0	0.00%
Unspecified Languages	0	0.00%

#### **Health Services**

Services to All Children at Beginning of Enrollment Year Compared to End of Enrollment Year (based on Cumulative Enrollment)	# at Beginning of Enrollment Year	% at Beginning of Enrollment Year	# at End of Enrollment Year	% at End of Enrollment Year
Children with health insurance	16	100.00%	15	93.75%
Children with accessible health care	16	100.00%	16	100.00%
Children with up-to-date immunizations or all possible immunizations to date, or exempt	16	100.00%	16	100.00%
Children with accessible dental care	16	100.00%	16	100.00%

#### **Disabilities Services**

	# of children	% of children
Children with an Individualized Family Service Plan (IFSP), indicating they were determined eligible to receive early intervention services	1	6.25%

#### **Family Services**

	# of families	% of families
Total Number of Families	16	100.00%

	# of families	% of families
Families Who Received at Least One Family Service	7	43.75%

#### **Specific Services**

	# of families	% of families
Emergency or Crisis Intervention	0	0.00%
Housing Assistance	0	0.00%
Asset Building Services	0	0.00%
Mental Health Services	0	0.00%
Substance Misuse Prevention	0	0.00%
Substance Misuse Treatment	0	0.00%
English as a Second Language (ESL) Training	1	6.25%
Assistance in enrolling into an education or job training program	0	0.00%
Research-based parenting curriculum	7	43.75%
Involvement in discussing their child's screening and assessment results and their child's progress	7	43.75%
Supporting transitions between programs	7	43.75%
Education on preventive medical and oral health	7	43.75%
Education on health and developmental consequences of tobacco product use	0	0.00%
Education on nutrition	7	43.75%
Education on postpartum care	0	0.00%
Education on relationship/marriage	0	0.00%
Assistance to families of incarcerated individuals	0	0.00%



#### Office of Head Start - Head Start Services Snapshot

Community Services Of Northeast Texas, Inc. (2024-2025)

Date	
	6/6/2025

#### **Funded Enrollment**

Number of enrollment slots the program is funded to serve.

	# of funded enrollment slots	% of funded enrollment slots
Total Funded Enrollment	465	100.00%

**Funded Enrollment by Program Option** 

i dilaca Elifonnich by i regiani epilon		
	# of funded enrollment slots	% of funded enrollment slots
Center-based	465	100.00%
Home-based	0	0%
Family Child Care	0	0%
Locally Designed	0	0%

#### **Detail - Center-based Funded Enrollment**

	# of center- based funded enrollment slots	% of center-based funded enrollment slots
Number of slots equal to or greater than 1,020 annual hours for Head Start preschool children or 1,380 annual hours for Early Head Start infants and toddlers	455	97.85%
Of these, the number that are available for the full- working-day and full-calendar-year	0	
Number of slots with fewer than 1,020 annual hours for Head Start preschool children or 1,380 annual hours for Early Head Start infants and toddlers	0	0%
Of these, the number that are available for 3.5 hours per day for 128 days	0	
Of these, the number that are available for a full working day	0	

#### **Total Cummulative Enrollment**

	# of % of participants over participants Funded Enrollment	
Total Cumulative Enrollment	515	10.75%

#### **Participants by Age**

	# of participants	% of participants
1 Year Old	0	0.00%
2 Years Old	2	0.39%
3 Years Old	235	45.63%
4 Years Old	277	53.79%
5 Years Old	1	0.19%

#### **Homelessness Services**

	# of children	% of children	
Total number of children experiencing homelessness that were served during the enrollment year	27	5.24	4%

#### **Foster Care**

	# of children	% of children
Total number of enrolled children who were in foster care at any point in the program year	18	3.50%

#### **Prior Enrollment of Children**

	# of children	% of children
The second year	156	30.29%
Three or more years	11	2.14%

**Ethnicity And Race** 

	# of Hispanic or Latino Origin participants	% of Hispanic or Latino Origin participants	# of Non- Hispanic or Non-Latino Origin participants	% of Non- Hispanic or Non-Latino Origin participants
American Indian or Alaska Native	0	0.00%	4	0.78%
Asian	1	0.19%	3	0.58%
Black or African American	11	2.14%	234	45.44%
Native Hawaiian or Pacific Islander	0	0.00%	0	0.00%
White	26	5.05%	136	26.41%
Biracial or Multi-Racial	16	3.11%	46	8.93%
Other Race	36	6.99%	2	0.39%
Unspecified Race	0	0.00%	0	0.00%

Primary Language of Parents at Home

	# of children	% of children
English	478	92.82%
Of these, the number of children acquiring/learning another language in addition to English	18	
Spanish	35	6.80%
Central American, South American, or Mexican Languages	0	0.00%
Caribbean Languages	0	0.00%
Middle Eastern or South Asian Languages	0	0.00%
East Asian Languages	2	0.39%
Native North American or Alaska Native Languages	0	0.00%
Pacific Island Languages	0	0.00%
European or Slavic Languages	0	0.00%
African Languages	0	0.00%
American Sign Language	0	0.00%
Other Languages	0	0.00%
Unspecified Languages	0	0.00%

#### **Health Services**

Services to All Children at Beginning of Enrollment Year Compared to End of Enrollment Year (based on Cumulative Enrollment)	# at Beginning of Enrollment Year	% at Beginning of Enrollment Year	# at End of Enrollment Year	% at End of Enrollment Year
Children with health insurance	470	91.26%	462	89.71%
Children with accessible health care	444	86.21%	434	84.27%
Children with up-to-date immunizations or all possible immunizations to date, or exempt	477	92.62%	480	93.20%
Children with accessible dental care	413	80.19%	412	80.00%

#### **Disabilities Services**

	# of children	% of children
Children with an Individualized Education Program (IEP),		
indicating they were determined eligible to receive special education and related services	33	7.10%

**Family Services** 

	# of families	% of families
Total Number of Families	473	100.00%

	# of families	% of families
Families Who Received at Least One Family Service	419	88.58%

**Specific Services** 

	# of families	% of families
Emergency or Crisis Intervention	14	2.96%
Housing Assistance	5	1.06%
Asset Building Services	89	18.82%
Mental Health Services	11	2.33%
Substance Misuse Prevention	2	0.42%
Substance Misuse Treatment	0	0.00%
English as a Second Language (ESL) Training	13	2.75%
Assistance in enrolling into an education or job training program	22	4.65%
Research-based parenting curriculum	337	71.25%
Involvement in discussing their child's screening and assessment results and their child's progress	411	86.89%
Supporting transitions between programs	412	87.10%
Education on preventive medical and oral health	406	85.84%
Education on health and developmental consequences of tobacco product use	199	42.07%
Education on nutrition	413	87.32%
Education on postpartum care	4	0.85%
Education on relationship/marriage	12	2.54%
Assistance to families of incarcerated individuals	2	0.42%

### **Head Start**

#### Financial Report for the month of June 2025

Needed

\$1,133,347.00

This month

\$143,105.77

(May 2025 Expenditures)

(May 2025 Expenditures	S)						
					Monthly	YTD	
Funding Source	Amount Funded	<b>Expenditures</b>	Total To Date	<b>Balance</b>	<u>Budget</u>	<u>Budget</u>	(Over)/Under
12 month program endin	ng 11-30-2025						
Personnel	\$2,277,370.00	\$160,097.25	\$1,013,941.37	\$1,263,428.63	\$189,780.83	\$1,138,685.00	\$124,743.63
Fringe Benefits	\$659,071.00	\$41,437.42	\$247,497.50	\$411,573.50	\$54,922.58	\$329,535.50	\$82,038.00
Travel (4120)	\$10,000.00	\$174.49	\$3,834.52	\$6,165.48	\$833.33	\$5,000.00	\$1,165.48
Equipment	\$10,000.00	\$0.00	\$6,299.00	\$3,701.00	\$833.33	\$5,000.00	(\$1,299.00)
Supplies	\$209,369.00	\$33,665.72	\$81,506.45	\$127,862.55	\$17,447.42	\$104,684.50	\$23,178.05
Contractual	\$291,066.00	\$0.00	\$0.00	\$291,066.00	\$24,255.50	\$145,533.00	\$145,533.00
Facilities / Construction	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other (4120)	\$30,381.00	\$2,630.42	\$5,838.19	\$24,542.81	\$2,531.75	\$15,190.50	\$9,352.31
Indirect Cost	\$396,943.00	\$30,046.96	\$139,328.62	\$257,614.38	\$33,078.58	\$198,471.50	\$59,142.88
Other (4122)	\$608,806.00	\$110,961.51	\$432,550.23	\$176,255.77	\$50,733.83	\$304,403.00	(\$128,147.23)
Total	\$4,493,006.00	\$379,013.77	\$1,930,795.88	\$2,562,210.12	\$374,417.17	\$2,246,503.00	\$315,707.12
Т&ТА	\$40,381.00	\$2,804.91	\$9,672.71	\$30,708.29	\$3,365.08	\$20,190.50	\$10,517.79
Total							
USDA Reimbursements	through April 2025						\$66,170.82
Estimated USDA Reimb	oursement for May 2	2025				77 <u>.</u>	\$8,116.42
				Resulting (over)/unc	der with USDA	_	\$389,994.36
* Total Over/Under withou	t USDA				Further Analys	sis	
					Number of chil	dren	465
Accruals:				\$4.00	Number of clas	srooms	26
Actual year end payroll a	accrual \$95,000.00						
					Monthly	YTD	
	Amount Funded	<b>Expenditures</b>	Total To Date		<u>Budget</u>	Budget	(Over)/Under
Per Classroom	\$172,807.92	\$14,577.45	\$74,261.38		\$14,400.66	\$86,403.96	\$12,142.58
Per Child	\$9,662.38	\$815.08	\$4,152.25		\$805.20	\$4,831.19	\$678.94
IN-KIND (Non-Federal S	Share)						
Trans (11011-1 edelar)	Situit )						

Total

\$873,469.61

Still need

\$259,877.39

# **Early Head Start**

#### Financial Report for the month of June 2025

(May 2025 Expenditures)

(Way 2023 Expenditure	3)						
Funding Source  12 month program endin	Amount Funded	<u>Expenditures</u>	Total To Date	<u>Balance</u>	Monthly <u>Budget</u>	YTD <u>Budget</u>	(Over)/Under
12 month program chair	18 11 30 2023						
Personnel	\$147,373.00	\$8,872.13	\$60,667.58	\$86,705.42	\$12,281.08	\$73,686.50	\$13,018.92
Fringe Benefits	\$42,650.00	\$1,167.53	\$7,075.85	\$35,574.15	\$3,554.17	\$21,325.00	\$14,249.15
Travel (4120)	\$2,190.00	\$5.40	\$794.44	\$1,395.56	\$182.50	\$1,095.00	\$300.56
Equipment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Supplies	\$17,650.00	\$1,258.89	\$3,461.39	\$14,188.61	\$1,470.83	\$8,825.00	\$5,363.61
Contractual	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Facilities / Construction	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Other (4120)	\$3,067.00	\$60.00	\$556.23	\$2,510.77	\$255.58	\$1,533.50	\$977.27
Indirect Cost	\$23,737.00	\$1,449.09	\$6,866.16	\$16,870.84	\$1,978.08	\$11,868.50	\$5,002.34
Other (4122)	\$27,344.00	\$3,910.72	\$13,346.03	\$13,997.97	\$2,278.67	\$13,672.00	\$325.97
Total	\$264,011.00	\$16,723.76	\$92,767.68	\$171,243.32	\$22,000.92	\$132,005.50	\$39,237.82
Т&ТА	\$5,257.00	\$65.40	\$1,350.67	\$3,906.33	\$438.08	\$2,628.50	\$1,277.83
Total							. ,
USDA Reimbursements	through April 2025						\$8,867.27
Estimated USDA Reiml	bursement for May 2	2025					\$1,814.58
				Resulting (over)/und	er with USDA	_	\$49,919.67
* Total Over/Under withou	at USDA				Further Analys	ris	
					Number of child		16
Accruals:					Number of class		2
Actual year end payroll a	accrual \$6000.00				rumber of class	31001113	2
					Monthly	YTD	
	Amount Funded	<b>Expenditures</b>	Total To Date		<b>Budget</b>	<b>Budget</b>	(Over)/Under
Per Classroom	\$132,005.50	\$8,361.88	\$46,383.84		\$11,000.46	\$66,002.75	\$19,618.91
Per Child	\$16,500.69	\$1,045.24	\$5,797.98		\$1,375.06	\$8,250.34	\$2,452.36

IN-KIND (Non-Federal Share)			
Needed	This month	Total	Still need
\$67,317.0	0 \$1,963.25	\$12,581.28	\$54,735.72

### **HEAD START and EARLY HEAD START NUTRITION PROGRAM**

June 2025 Financial Report For the month of May 2025

### **CACFP**

	<u>Expenditures</u>	<u>Total To Date</u>
Operating Labor	\$ 5,647.53	52,237.13
Administrative Labor	1,533.70	10,627.83
Food	12,085.80	93,749.94
Supplies & Equipment	4,830.54	23,475.11
Purchased Services	-	0.00
Financial Costs	-	0.00
Media Costs	-	0.00
Operating Org Cost	1,330.20	3,662.27
Other	_	371.25
Total	\$ 25,427.77	\$ 184,123.53

**TDHS REVENUE** 

9,931.00

120,164.37

(Income Starts October 2024)

#### Community Services of Northeast Texas, Inc.

Credit Usage Report

#### Board Report -June 2025

#### Sam's Club

Purchases for May 2025		3.47
Payment due by May 28, 2025	Pd on 05/20/2025	(3.47)
Balance		-

#### American Express

Purchases for April 2025		0 517 55
Fulchases for April 2025		8,517.55
Payment due byN/A	Pd on 05/08/2025	(8,517.55)
Balance		

#### Texana Bank Line of Credit

Program Highest May 2025 Balance Current balance Exp pay off date

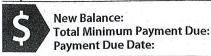




PACENTA

Visit us at SamsClubCredit.com/businesscard or Call 1-800-203-5764

#### **Payment Information**



\$3.47 \$3.47 05/28/2025

\$230.00

- 230.00

+3.47

\$3.47

Payments must be received by 5pm ET on 05/28/2025 if mailed, or by 11:59pm ET on 05/28/2025 for online and phone payments.

MEMBER SERVICE: For Account Information log on to SamsClubCredit.com/businesscard. This account is registered. See your online Administrator to get a User ID & Password. Or call toll-free 1-800-203-5764

To make a payment, please visit us online or mail your payment using the coupon below. Payments are also accepted at your local CheckFreePay\* or MoneyGram locations\*. \* Fees may apply.

#### RECEIVED

MAY 1 3 2025

BY:

EL

#### **Account Summary**

Previous Balance as of 04/09/2025
Payments
Interest Charges
New Balance as of 05/08/2025
30 Day Billing Cycle from 04/09/2025 to 05/08/2025

Credit Limit Available Credit \$3,400 \$3,396

## Skip the checkout line with Scan & Go<sup>™</sup> shopping!

**Download the Sam's Club app.** Then select the Scan & Go™ feature.



**Shop and scan.** Scan item barcodes as you go.



Pay with your Sam's Club Business Credit Card.

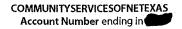


**Head to the door.**Show your digital receipt and go.

<sup>\*</sup>Subject to credit approval.

Synchrony Bank does not provide, endorse or guarantee any Sam's Club services or policies.







DAG SAGE

Visit us at SamsClubCredit.com/businesscard or Call 1-800-203-5764



Don't miss a single new product, just scan the GR code of go to SamsGlub com/New Items



(u) - Variable Pate

#### **Transaction Detail**

Date	Reference #	Description	Amount
Paymen	ts		-\$230.00
04/29	P9280003R00ZTVDNB	PAYMENT - THANK YOU	-\$230.00
Total Fe	es Charged This Period		\$0.00
Total Int	erest Charged This Period		\$3.47
05/08	*INTEREST CHARGE*	PURCHASES \$3.47	\$3.47

#### Interest Charge Calculation

Your Annual Percentage Rate (APR) is the annual interest rate on your account.	(v) = variable hate
	terest Balance harge Method
Purchases N/A 27.15% (v) \$155.57	-\$3,47 2D

#### **Cardholder News and Information**

If you are charged interest, the charge will never be less than the minimum interest charge disclosed in your terms and conditions. If you incurred interest less than this amount (please see above in the Interest Charge Calculation section) we will increase this charge to this amount.

NOTICE: We may convert your payment into an electronic debit. See back of page one for details, Billing Rights and other important information.

#### **Member News and Information**

Interested in changing your due date for your Sam's Club \* credit card account? Call the Credit Customer Service phone number, located on your billing statement and on the back of your Sam's Club\* credit card, to determine eligibility and discuss available options.

Go green and support the environment with paperless statements! All you have to do is visit SamsClubCredit.com/businesscard to sign up. Register today to start receiving your statements online.

ٻ

Use blue or black ink, detach & mail with your check.

Account Number	
New Balance	\$3.47
Total Minimum Payment Due	\$3.47
Payment Due Date	05/28/2025

Amount Enclosed

VIEW AND PAY YOUR BILL ONLINE! SamsClubCredit.com/businesscard

No other correspondence please. Print new address or email changes on back.

COMMUNITYSERVICESOFNETEXAS MICHELLE MOREHEAD PO BOX 427 LINDEN TX 75563-0427 19480 Q202 նդՍՈֆբիմիդկիլը)իրինոնվենիկիրիիոնովիկնել

Make SAM'S CLUB/SYNCHRONY BANK Payment P.O. BOX 669825 to: DALLAS, TX 75266-0782

դոնակը[[Այդլեիիննակ]]իլիաինի[ըսիաննիակներ





#### **Corporate Purchasing Cardmember Report**

#### Sign-up For Online Statements

www.americanexpress.com/gopaperless

Prepared For MICHELLE MOREHEAD CSNT INC Account Number.

Closing Date 04/29/25

Page 1 of 3

Bal	lan	C
Da	al	L

Do Not Pay

Previous Balance \$	New Charges \$	Other Debits \$	Payments \$	Other Credits \$	Due \$	
1,958.48	6,976.41	0.00	1,958.48	184.55	0,791.00	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

Do not staple or use paper clips **Payment Coupon** 

Account Number

Enter 15 digit account number on all payments.

MICHELLE MOREHEAD CSNT INC 304 E HOUSTON ST LINDEN TX 75563-5600

See reverse side for instructions on how to update your address, phone number, or email.



Payments: The American Express® Corporate Purchasing Card statement is payable in full by your Company upon receipt. Payments received after 5:00pm may not be credited until the next day. Payments must be made in US currency, with a single draft or check drawn on a US bank and payable in US dollars or with a single negotiable instrument payable in US dollars and clearable through the US banking system, or through an electronic payment method clearable through the US banking system. The Account number must be included on or with all payments. If payment does not conform to these requirements, crediting may be delayed and additional Charges may be imposed. If we accept payment made in a foreign currency, we will choose a conversion rate that is acceptable to us to convert remittance into US currency, unless a particular rate is required by law. Please do not send post-dated checks. They will be deposited upon receipt. Our acceptance of any payment marked with a restrictive legend will not operate as an accord and satisfaction without our express prior written approval.

Authorization for Electronic Debit: We will process checks electronically, at first presentment and any representments, by transmitting the amount of the check, routing number, account number and check serial number to the financial institution, unless the check is not processable electronically or a less costly process is available. By submitting a check for payment, Company authorizes us to initiate an electronic debit from its bank or asset account. When we process a check electronically, payment may be debited to the bank or asset account as soon as the same day we receive the check, and that cancelled check will not be received with that bank or asset account statement. If we cannot collect the funds electronically we may issue a draft against the bank or asset account for the amount of the check. If you currently send in an individual payment for expenses on the Corporate Purchasing Card, please note that you are eligible to pay your bill online.

**Authorization for Electronic Payments:** By using Pay By Computer, Pay By Phone or any other electronic payment service of ours, you will be authorizing us to initiate an electronic debit to the financial account you specify in the amount you request. Payments received after 5:00pm may not be credited until the next day.

Transactions Made in Foreign Currencies: If you incur a Charge in a foreign currency, it will be converted into US dollars on the date it is processed by us or our agents. Unless a particular rate is required by applicable law, we will choose a conversion rate that is acceptable to us for that date. Currently the conversion rate that we use for a Charge in a foreign currency is no greater than (a) the highest official conversion rate published by a government agency, or (b) the highest interbank conversion rate identified by us from customary banking sources, on the conversion date or the prior business day, in each instance increased by 2.5%. This conversion rate may differ from rates in effect on the date of your Charge. Charges converted by establishments (such as airlines) will be billed at the rates such establishments use.

In Case of Errors or Questions About Your Bill: If you think your bill is incorrect, or if you need more information about a transaction on your bill, please call 1-800-492-4920 or the number on the back of your Card. You can also write us on a separate sheet of paper at the Customer Service address noted to the right. If you have a dispute concerning goods and services purchased with the Corporate Purchasing Card, you should contact the merchant directly. If you are unable to obtain resolution, please contact us at 1-800-492-4920.

When Contacting Us Regarding Errors or Questions: We must hear from your no later than 60 days after we send you the first bill on which the error or problem appeared. When contacting us, please give us the following information: 1. Your name and account number; 2. The dollar amount of the suspected error; 3. Describe why you believe there is an error. If you need more information, describe the item you are unsure about.

Note: Your corporation, firm or organization may have its own policy or customized program, which takes precedence over any provision stated above.



Manage your Card account online at: americanexpress.com/ checkyourbill



For all further inquiries, please call the number on the back of your Card

If your Card has been lost or stolen, please call 1-800-492-4920.

International Collect: 1-336-393-1111

Hearing Impaired Services: Dial Relay 711 and 1-800-492-4920

Large Print and Braille Statements: 1-800-492-4920



Customer Service P.O. Box 53611 Phoenix, AZ 85072-3611

#### Change of Address, phone number, email

- Online at www.americanexpress.com/updatecontactinfo
- Via Mobile device
- Voice automated: call the number on the back of your card
- For Name, Company Name, and Foreign Address or Phone changes, please call Customer Care

Please do not add any written communication or address change on this stub.

04/11/25

04/29/25

VENICE PIZZA HOUSE LINDEN REF# 852841451019 903-756-3031 ROC NUMBER 8528414510198000

**Total for MICHELLE MOREHEAD** 

WAL-MART SUPERCENTER CORPUS CHRISTI TX

REF# 511900742668 DISCOUNT STORE 04/29/25

85284145101

51190074266

New Charges/Other Debits

Payments/Other Credits

99.50

181.19

6,976.41

-2,143.03

Activity	Date reflects either transaction or posting date		
Card Nun	nber XXXX-XXXX	Reference Code	Amount \$
04/09/25	CORPORATE REMITTANCE RECEIVED 04/09	05409000000	-1,958.48
04/23/25	CHICK-FIL-A 04667 00 MARSHALL TX REF# 000147088 9032022222 04/22/25	00014708800	406.25
04/19/25	HILTON HOTELS ANATOL DALLAS TX FOL# 3565170 HILTON HOTELS 04/19/25 ARRIVAL DATE DEPARTURE DATE 04/15/25 04/18/25 00 ROC NUMBER 3565170	55500121200	665.10
04/19/25	HILTON HOTELS ANATOL DALLAS TX FOL# 3565167 HILTON HOTELS 04/19/25 ARRIVAL DATE DEPARTURE DATE 04/15/25 04/18/25 00 ROC NUMBER 3565167	55500153700	665.10
04/11/25	LOWES.COM 0907 NORTH WILKESBORO NC INV # 704 28659 04/10/25 STORE # 0907 PHONE # 800-445-6937 DATE: 2025-04-10 PO # INVOICE # 70498 TAX: 0.00 TOTAL: 4113.97 ROC NUMBER INV # 70498 R		4,113.97
04/17/25	OMNI CORPUS CHRISTI CORP CHRISTI TX FOL# 15030491 OMNI HOTELS 04/17/25 ARRIVAL DATE DEPARTURE DATE 04/16/25 04/16/25 00 ROC NUMBER 15030491	60325624300	-184.55 Credit
04/27/25	CLDTKN ONE STEP GPS, LLC. SAN FERNANDO REF# CH_3RIJB5GHM +18186592031 04/26/25	С	195.30
04/12/25	RED RIVER WRECKER SE TEXARKANA TX REF# 730117651019 DAVIDAKIN@REDRI 04/11/25	73011765101	650.00





#### **Corporate Purchasing Cardmember Report**

#### Sign-up For Online Statements

www.americanexpress.com/gopaperless

Prepared For BERNARD YANCEY CSNT INC Account Number

Closing Date 04/29/25

Page 1 of 3

					Balance	Do Not Pay
Previous Balan	e \$ New Charges	\$ Other Debits \$	Payments \$	Other Credits \$	Due \$	
2,471.7	1,725.69	0.00	2,471.73	0.00	1,725.09	For important information regarding your account refer to page 2.

For your records only - do not pay.

For assistance or questions about your account, contact us at www.americanexpress.com/checkyourbill or call Customer Service at 1-800-492-4920.

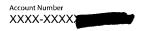
Do not staple or use paper clips **Payment Coupon** 

Account Number

Enter 15 digit account number on all payments.

BERNARD YANCEY CSNT INC POB 427 LINDEN TX 75563

See reverse side for instructions on how to update your address, phone number, or email.



Payments: The American Express® Corporate Purchasing Card statement is payable in full by your Company upon receipt. Payments received after 5:00pm may not be credited until the next day. Payments must be made in US currency, with a single draft or check drawn on a US bank and payable in US dollars or with a single negotiable instrument payable in US dollars and clearable through the US banking system, or through an electronic payment method clearable through the US banking system. The Account number must be included on or with all payments. If payment does not conform to these requirements, crediting may be delayed and additional Charges may be imposed. If we accept payment made in a foreign currency, we will choose a conversion rate that is acceptable to us to convert remittance into US currency, unless a particular rate is required by law. Please do not send post-dated checks. They will be deposited upon receipt. Our acceptance of any payment marked with a restrictive legend will not operate as an accord and satisfaction without our express prior written approval.

Authorization for Electronic Debit: We will process checks electronically, at first presentment and any representments, by transmitting the amount of the check, routing number, account number and check serial number to the financial institution, unless the check is not processable electronically or a less costly process is available. By submitting a check for payment, Company authorizes us to initiate an electronic debit from its bank or asset account. When we process a check electronically, payment may be debited to the bank or asset account as soon as the same day we receive the check, and that cancelled check will not be received with that bank or asset account statement. If we cannot collect the funds electronically we may issue a draft against the bank or asset account for the amount of the check. If you currently send in an individual payment for expenses on the Corporate Purchasing Card, please note that you are eligible to pay your bill online.

**Authorization for Electronic Payments:** By using Pay By Computer, Pay By Phone or any other electronic payment service of ours, you will be authorizing us to initiate an electronic debit to the financial account you specify in the amount you request. Payments received after 5:00pm may not be credited until the next day.

Transactions Made in Foreign Currencies: If you incur a Charge in a foreign currency, it will be converted into US dollars on the date it is processed by us or our agents. Unless a particular rate is required by applicable law, we will choose a conversion rate that is acceptable to us for that date. Currently the conversion rate that we use for a Charge in a foreign currency is no greater than (a) the highest official conversion rate published by a government agency, or (b) the highest interbank conversion rate identified by us from customary banking sources, on the conversion date or the prior business day, in each instance increased by 2.5%. This conversion rate may differ from rates in effect on the date of your Charge. Charges converted by establishments (such as airlines) will be billed at the rates such establishments use.

In Case of Errors or Questions About Your Bill: If you think your bill is incorrect, or if you need more information about a transaction on your bill, please call 1-800-492-4920 or the number on the back of your Card. You can also write us on a separate sheet of paper at the Customer Service address noted to the right. If you have a dispute concerning goods and services purchased with the Corporate Purchasing Card, you should contact the merchant directly. If you are unable to obtain resolution, please contact us at 1-800-492-4920.

When Contacting Us Regarding Errors or Questions: We must hear from your no later than 60 days after we send you the first bill on which the error or problem appeared. When contacting us, please give us the following information: 1. Your name and account number; 2. The dollar amount of the suspected error; 3. Describe why you believe there is an error. If you need more information, describe the item you are unsure about.

Note: Your corporation, firm or organization may have its own policy or customized program, which takes precedence over any provision stated above.



Manage your Card account online at: americanexpress.com/ checkyourbill



For all further inquiries, please call the number on the back of your Card.

If your Card has been lost or stolen, please call 1-800-492-4920.

International Collect: 1-336-393-1111

Hearing Impaired Services: Dial Relay 711 and 1-800-492-4920

Large Print and Braille Statements: 1-800-492-4920



Customer Service P.O. Box 53611 Phoenix, AZ 85072-3611

#### Change of Address, phone number, email

- Online at www.americanexpress.com/updatecontactinfo
- Via Mobile device
- Voice automated: call the number on the back of your card
- For Name, Company Name, and Foreign Address or Phone changes, please call Customer Care

Please do not add any written communication or address change on this stub.

1,725.69

-2,471.73

**Total for BERNARD YANCEY** 

New Charges/Other Debits Payments/Other Credits

Activity	Date reflects either transaction or posting date					
Card Nu	Card Number XXXX-XXXXX Reference Code Amount \$					
04/09/25	CORPORATE REMITTANCE RECEIVED 04/09	05409000000	-2,471.73			
04/10/25	BLS*IFAX LONDON REF# 000384639331 COMPUTER STORE 04/10/25	00038463933	1,140.30			
04/09/25	GOTOCOM*GOTOMYPC GOTO.COM MA REF# 43829064R92E ONLINE SVCS 04/09/25		70.50			
04/11/25	Sheraton New Orleans New Orleans LA FOL# 5247998 SHERATON 04/11/25 ARRIVAL DATE DEPARTURE DATE 04/07/25 04/10/25 00 ROC NUMBER 5247998	52479980000	179.89			
04/04/25	STARLINK INTERNET STARLINK.COM CA REF# wJSEC215jWfT 3106828100 04/03/25		120.00			
04/12/25	TECHSOUP 000000001 SAN FRANCISCO CA REF# 4ea272ab-62 4156339300 04/11/25 REFER TO RECEIPT ROC NUMBER 4ea272ab-62		20.00			
04/15/25	TECHSOUP 000000001 SAN FRANCISCO CA REF# aa87cf03-4e 4156339300 04/14/25 REFER TO RECEIPT ROC NUMBER aa87cf03-4e		70.00			
04/12/25	WIPFLI LLP WIPFLI LL MADISON WI REF# 321739251019 CIVIC & SOCIAL 04/10/25	32173925101	125.00			

# CSNT Head Start Kitchen Appliances - Disposition Data

Location #'s of Kitchen Appliance(s) for Disposition	Description of Appliances(s) for Disposition	Disposition Process for Appliances(s)	Estimated Depreciated Value of Appliance(s)	Budget Line- Item for Estimated Monetary Gain	Total Estimated Monetary Gain from Disposition
Naples Head Start Kitchen #910	2010* Side-by-Side Refrigerator Tag#609	Selling to the Williams Chapel Church	\$500	Raw Food	\$500
Naples Head Start Kitchen #910	2014* Prep Table	Dispose of Item – Depreciated to \$0	\$0	NA	\$0
Naples Head Start Kitchen #910	2014* Portable Dishwasher	Dispose of Item – Depreciated to \$0	\$0	NA	\$0
Naples Head Start Kitchen #910	2024 Stove	Left in building as part of the lease agreement/a stove was in the building when leased	\$0	NA	\$0
Naples Head Start Kitchen #910	2018 Freezer	Moving to Pittsburg Head Start location			
					Total Monetary Gain \$500

<sup>\*</sup>These dates are estimates

Location #'s of Kitchen Appliance(s) for Disposition	Description of Appliances(s) for Disposition	Disposition Process for Appliances(s)	Estimated Depreciated Value of Appliance(s)	Budget Line- Item for Estimated Monetary Gain	Total Estimated Monetary Gain from Disposition
New Boston Head Start Kitchen #918	2012* Refrigerator 2019 Freezer 2025 Dishwasher 2024 Stove	Left in building as per the lease agreement with the landlord	NA	NA	NA
New Boston Kitchen #918	2014* Prep Table	Move to Pittsburg Head Start Kitchen	\$0	NA	\$0
New Boston Kitchen #918	2020 Small Freezer	Move to Pittsburg Head Start Kitchen	\$0	NA	\$0
New Boston Kitchen #918	2019 Microwave	Move to Pittsburg Head Start Kitchen	\$0	NA	\$0
					Total Monetary Gain \$0

<sup>\*</sup>These dates are estimates

# HEAD START 45 CFR SUBPART F 1303.70-75 TRANSPORTATION WAIVER REQUEST DATA COLLECTION FORM

Grant Number <u>06CH012925</u>				
School Year: <u>2025-2026</u>				
Legal Name of Grantee Community Services of Northeast Te	exas, Inc.			
Name, Title and Signature of Authorized Official Requesting	Waiver			
Bernadette Harris, Quality Assurance Specialist				
Phone Number (903) 756-5596 Ext. 211				
Fax Number (903) 756-3254				
Email Address <u>berny.harris@csntexas.org</u>				
1. Number of Children Served				
Head Start 465 Early He	ead Start <u>16</u>			
2. Number of Children Provided Transportation Services:				
Head Start 145 Early He	ead Start <u>0</u>			
a. Using Grantee Owned or Leased Vehicles	_0			
b. Through Grantee Contracted Transportation Service	es <u>0</u>			
c. Through District Partnership at No Cost to Grantee	145			
3. Estimated Number of Children Who Will be Covered by W	Vaiver:			
Head Start Early He	ead Start0			
4. Requesting Waiver Of:				
X Child safety restraint systems requirement (45	CFR 1303.71(d) 1303.72(e))			
X Bus monitor requirement (45CFR 1303.72(c))				

5. Waiver Request Applies to the Following:

X	Grantee	Delegate(s)	(please	list)
		 	(1	~-,

6. Grantee's Justification for Requesting a Waiver (attach no more than 5 pages).

Please explain fully as each request will be considered separately and waivers will not receive automatic approval.

If requesting waivers of both 45 CFR 1303.71(d), child safety restraint systems requirement, and 45 CFR 1303.72(e), bus monitor requirement, you must provide justification for each requirement.

Community Services of Northeast Texas, Inc. has entered into partnerships with eight of our local Independent School Districts. One of the benefits of these partnerships is the ability of the school districts to transport children to and from the school campuses where they receive Head Start services. Currently, the State of Texas does not require the use of age and weight appropriate safety restraints and/or bus monitors on school buses.

Granting a waiver in these areas will the Head Start Program to provide a beneficial service to the families served in partnership with the school districts as well as reducing the cost on the program to provide safe, reliable transportation to the children served.

The waiver that Community Service of Northeast Texas, Inc. is requesting is for children who are enrolled at Head Start locations where there is a partnership with the local ISD. The children the waiver would cover will be transported on multiple bus routes at the various ISD locations and while we have an idea of how many children might be transported at each campus, we will not know the route# or number of children on that route until school is in session. I would also note that this number can fluctuate during the school year as our enrollment changes due to children dropping out or entering the program and their individual needs being met.

In the matter of the local school systems outfitting their buses with age appropriate child restraint systems, none have chosen to do this at this time. This is not a requirement in the State of Texas for public school transportation. We provide our school district partners with a copy of the wavier.

The ISD locations and the estimated number of children the wavier would cover are as follows;

School District and Location	Estimated # of Children	Estimated number of buses and
	Transported	routes
Atlanta ISD	59 children approximately needing	15 bus routes with 4 or less
Atlanta, TX	transportation	children on each bus
Bloomburg ISD	11 children approximately needing	6 bus routes with 2 or less children
Bloomburg, TX	transportation	on each bus
Daingerfield/Lone Star ISD	17 children approximately needing	12 bus routes with 2 or less
Daingerfield, TX	transportation	children on each bus
Hughes Springs ISD	12 children approximately needing	17 bus routes with 1 or less
Hughes Springs, TX	transportation	children on each bus
Pittsburg ISD	59 children approximately needing	15 bus routes with 4 or less
Pittsburg, TX	transportation	children on each bus
Texarkana ISD	95 children approximately needing	12 bus routes with 8 or less
Texarkana, TX	transportation	children on each bus

In the event that the local ISD may provide transportation services for field trips to and from the campus, this wavier would also cover these trips.