

	Community Education 1500 Highway 36 West Roseville, MN 55113-4266	COMMUNITY EDUCATION ANNUAL REPORT	ED-00226-26
			DUE: 11/01

GENERAL INFORMATION AND INSTRUCTIONS: Under the statutory authority of M.S. Section 124D.18, Minnesota Rules, part 3530.6200 require an annual report to the Minnesota Department of Education (MDE) from each school district having a community education levy. Please note that all information requested in this report relates to the period of July 1 to June 30 of the previous fiscal year. Return the completed report to Dan Smith at the above address by **November 1** and retain a copy for your files.

IDENTIFICATION INFORMATION		
School District Name Pelican Rapids Public School		Reporting year: 2012 - 2013
District Number 548		School District Type 1
Community Education Director or Designee name Jacob Richter		File Folder Number 4 2 1 2 0 4
Community Education Office Address 310 South Broadway		
City Pelican Rapids	State MN	Zip Code 56572 -
E-Mail jrichter@pelicanrapids.k12.mn.us	Telephone Number (218) 863 - 5910	Fax Number (218) 863 - 5915
Name of Person Completing This Report Jacob Richter		Title Community Education Director

GENERAL PROGRAM INFORMATION	
25	% of Director's time devoted to Community Education
No	Do you share community education director services with, or purchase director services from, another district? If so, district number.
75%	Estimated % of General Community Education aid/levy allocated to youth programs.
	If the district utilizes the Extended Day Levy/Aid indicate the unduplicated count of the number of children served.
	Dates of Community Education Advisory Council meetings during the reporting year (minimum four):
	9-4-12 9-24-12 10-16-12 11-20-12 12-4-12 3-12-13 4-9-13
Chair of the Community Education Advisory Council	
Name Julie Gamble	Telephone Number (218) 329 - 5910

District Name
Pelican Rapids Public Schools

District Number
548

STATEMENT OF ASSURANCES

By submitting this Annual Report, I affirm the following.

General:

- The district utilizes an appropriately licensed community education director unless the district population is less than 2000 or approval has been granted by the Minnesota Board of School Administrators (M.S. 124D.19, Subd. 3)
- The district utilizes a community education advisory council with representation from various service organizations, churches, public and nonpublic schools, local government, public and private nonprofit agencies, parents, youth, park, recreation or forestry services and other appropriate groups (M.S. 124D.19, Subd. 2)
- The community education advisory council meets at least four times each year (M.R. 3530.5900)
- The community education advisory council has adopted a policy to reduce and eliminate program duplication within the district (M.S. 124D.19, Subd. 5)

Youth Service:

- If youth service revenue is received by the district, the district has implemented a youth service plan and youth service program (M.S. 124D.20, Subd. 4)
- A district's youth service projects utilize community sponsors (M.S. 124D.19, Subd. 10(d))

Youth After School Enrichment:

- If youth after-school enrichment revenue is received by the district, activities support development of social, mental, physical and creative abilities of school-age youth; the district provides structured activities during high-risk times; and the district promotes youth leadership development and improved academic performance (M.S. 124D.19, Subd. 12)

School-Age Care:

- If the district operates a school-age care program, it includes: adult supervised programs while school is not in session; parental involvement in program design and direction; partnership with the district's K-12 programs and other public, private or nonprofit entities; opportunities for trained secondary school pupils to work with younger children; and access to school facilities including the gymnasium, sports equipment, computer labs, and media centers when not otherwise in use (M.S. 124D.19, Subd. 11(b))
- School-age care revenue is maintained in a separate account within the community services fund (M.S. 124D.19, Subd. 11(d))

Adults With Disabilities:

- If the district receives Adults With Disabilities revenue, it has received approval from MDE for its Adults With Disabilities program, adults with disabilities have been involved in program design and development, an assessment of the needs of adults with disabilities has been conducted, and programs are operated in cooperation with community organizations (M.S. 124D.19, Subd. 8)

Adult Enrichment:

- The direct activity costs (direct activity costs include the cost of the instructor, materials and transportation) of the district's Adult Enrichment program are not subsidized by the General Community Education aid or levy.

I have read the Statement of Assurances and am in compliance

Yes (X) No ()

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PROGRAM SERVICE AND PARTICIPANTS

INSTRUCTIONS: Provide community education participant data in this section. Do not include participant data for Adult Basic Education, School Readiness, Preschool Screening or Early Childhood Family Education (that data is collected in other state reports). Enter data as whole numbers only. If comments are necessary, they should be entered on page 4.

	SERVICE	NUMBER OF PARTICIPANTS BY GROUP					
		AGE 0-5	GRADE K-5	GRADE 6-8	GRADE 9-12	AGE 19-54	AGE 55+
Pre-K	Academic						
	Childcare						
	Enrichment						
	Health/Safety						
	Recreation						
	Service						
	Sports						
Youth	Academic						
	Childcare						
	Enrichment						
	Health/Safety						
	Recreation	16	156	38	21	60	8
	Service						
	Sports						
Adult	Academic						
	Enrichment					12	15
	Health/Safety					16	19
	Recreation					65	17
	Service						
	Sports					52	4
	Adults With Disabilities	Academic					
Enrichment							
Health/Safety							
Recreation							
Service							
Sports							
Community		Community Concerns					20
Community		NUMBER OF GROUPS (Do not include regular school activities)			PARTICIPANTS		
	Facility Use	20			2500		

COMMUNITY EDUCATION ANNUAL REPORT

District Name
Pelican Rapids Public Schools

District Number
548

Comments:

SIGNATURES

I hereby certify that all of the information contained in this report is true and accurate to the best of my knowledge and belief.

Signature - Advisory Council Chairperson

Date

Signature - Community Education Director



10-16-13
Date

Signature - District Superintendent / Responsible Authority

Date