Heartland
GRANT SOLUTIONS

Staffing Information Sheet

Instructions: Complete the staffing grid first listing the personnel who will be working in EHS-CC Partnership Funded Classrooms. After classroom staff are listed please provide the name of program Directors/Managers/Assistant Directors

Site Name:__________________________________(please complete per site)

Staff Name	CDA (Yes/No)	AA/BA Degree	Class Name / Number	# of EHS-CC Funded Children / Total # Children (i.e., 5/8)	Role: (Teacher, Assistant, Aide, Director, other)	Daily Hours in Classroom: From: To:(i.e. 8:30-12:30, 2:30-4:30)	Total Daily Hours in Classroom : (i.e. 6)	Total Daily Hours on site (i.e. 8)