

**Southern Union Conference Church Report**  
Form EC105-2018

**Dear Pastors and Church Secretaries:**

**Please read, complete, and return this form to your local Conference Office of Education by August 31. Thank you.**

Church Name: \_\_\_\_\_

Pastor's Name: \_\_\_\_\_

Contact Number: \_\_\_\_\_

Place an "X" beside the statement(s) that apply to your church.

*Please keep in mind that this form is asking for information regarding early childhood programs operating Monday-Friday only, and not Sabbath School programming.*

- 1. Our church has NO Monday-Friday program (school or child care) for children below Kindergarten (age 5).
- 2. Our church has a program for Pre-Kindergarten children only (age 4).  
Name of program: \_\_\_\_\_
- 3. Our church has a child care center for children between the ages of birth and six.  
Name of center: \_\_\_\_\_
- 4. Our church has a school / Our church is a constituent of a school that has a Pre-Kindergarten program for children four-years-of-age.  
Name of school: \_\_\_\_\_
- 5. Our church has an early childhood program not described above.  
Name of program: \_\_\_\_\_  
Briefly describe the program: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**PLEASE RETURN THIS FORM EVEN IF #1 IS YOUR ONLY SELECTION!**

The local conference and Southern Union Office of Early Childhood Education will need additional information on statements 2, 3, and 4. Please list below who we may contact to obtain such.

Contact Name: \_\_\_\_\_

Contact Number/s: \_\_\_\_\_

If there are any questions regarding this form or information requested, please, contact your local conference office of education as soon as possible. Thank you.