

ETHNIC POPULATION OF YOUR SITE

PROGRAM NAME: _____

LIAISON: _____

DATE: _____

Please give the total **NUMBER** (NOT %) of students served by RIF of Northern Virginia _____. (NOTE: This number must be the same as the number of students shown on your Program Information Sheet.)

NUMBER of children that are:

1. American Indian/Eskimo _____

2. Asian _____

3. African American _____

4. Hispanic _____

5. Caucasian _____

6. Other _____ i.e. Arab/Indian (Please specify)

***The total number of children in Categories 1 – 6 above **must** equal the total number of children in the Program.

LANGUAGES SPOKEN AT YOUR SITE

Please indicate the **NUMBER** of children that speak the following as their first language. The total # of languages spoken must equal the total number of children in your Program. (NOTE: This section **must** be completed.)

English _____

Italian _____

Russian _____

Spanish _____

Korean _____

Polish _____

Chinese _____

German _____

Vietnamese _____

French _____

Arabic _____

Other _____

(Please Specify)

RETURN THIS FORM TO YOUR AREA CHAIR BY **NOVEMBER 1ST**.