

[SPACE RESERVED FOR DISTRICT LETTERHEAD]

**Massachusetts School Building Authority  
School District Educational Profile Questionnaire**

Date \_\_\_\_\_

Name of School District \_\_\_\_\_

District Contact (Name, Title) \_\_\_\_\_

As part of the District's invitation into the Eligibility Period, the MSBA is seeking the following information to further inform our understanding of the School District's facilities, teaching methodology, grade configurations and program offerings. If the below information is available in documents previously provided to the MSBA, please indicate in which document and on which page this information may be found.

**SECTION ONE: Facilities**

A. Please confirm the following MSBA 2010 Needs Survey information for all public schools in the District using a "Y" for accurate and "N" for not accurate:

District	School Name	Type	Year Founded	Last Reno.	GSF	Y/N
Belmont	Belmont High School	HS	1970		257,120	
Belmont	Daniel Butler Elementary School	ES	1900	1979	37,568	
Belmont	Mary Lee Burbank Elementary School	ES	1931	1989	50,300	
Belmont	Roger Wellington Elementary School	ES	1938	2012	90,350	
Belmont	Winn Brook Elementary School	ES	1934	1989	63,463	
Belmont	Winthrop L. Chenery Middle School	MS	1997		182,000	

Using the space below, provide additional information for any inaccurate or incomplete Needs Survey data.

[Type text here...]

B. Using the chart below, list Charter Schools (Commonwealth, Innovative, or Horace Mann) and private schools located in the District.

Name of School	Type of School	Year Established	Grades Served	Current Enrollment

A. **For elementary and middle schools only** In the chart below, provide information about the current grade configuration for each public school facility adding or editing cells and rows as appropriate. Check the boxes provided to indicate program offerings at each facility. Next to the check, please indicate the number of hours and days the program is offered.

Name of School, Grades Served	Science Classes	Art (Performing and Visual Art)	Music	Physical Education (Adaptive PE)	Library Classes	Extended Day Care	Lunch Seatings
Daniel Butler ES, K-5							
Mary Lee Burbank ES, K-4							
Roger Wellington ES, K-4							
Winn Brook ES, PK-4							
Winthrop L. Chenery MS, 5-8							

**For high schools only** Attach to this questionnaire current program/scheduling information (core, non-core, enrichment and vocational).

B. Does the District belong to a Collaborative? Yes  No

Does the District host a Collaborative? Yes  No

If yes, please provide the name of the Collaborative \_\_\_\_\_

Does the District provide Pre-Kindergarten? Yes  No

Is Kindergarten fee based? Yes  No

If yes, please provide the fee structure \_\_\_\_\_

Does the District provide transportation? Yes  No

If yes, please provide the name of the provider(s) (District or vendor) \_\_\_\_\_

C. Using the space below, provide information about the Priority Statement of Interest School’s teaching methodology (i.e. self-contained classroom, team teaching, departmental, or cluster). Include class-size policy and if applicable, scheduling particulars.

[Type text here...]

D. In the chart below, use “Y” or “N” to indicate if the listed technology offerings are available adding cells and rows as appropriate:

School	Desktop Computers	Laptop Computers	Tablets	Smart Board/ Smart Projectors	Printers	WiFi WAN/LAN
Belmont HS						
Daniel Butler ES						
Mary Lee Burbank ES						
Roger Wellington ES						
Winn Brook ES						
Winthrop L. Chenery MS						

Using the space below, provide additional information for any of the aforementioned offerings marked with a “Y”.

[Type text here...]

**SECTION THREE: Proposed Program, Grade Configuration, Teaching Methodology for the Priority Statement of Interest School**

A. Using the chart below indicate proposed changes to the information as provided in Section Two adding or editing cells and rows as appropriate.

Name of School, Grades Served	Science Classes	Art (Performing and Visual Art)	Music	Physical Education (Adaptive PE)	Library Classes	Extended Day Care	Lunch Seatings
Belmont High School, 9-12							

B. Is the District considering joining a Collaborative? Yes  No   
 If yes, please provide the name of the Collaborative \_\_\_\_\_

Is the District considering hosting a Collaborative? Yes  No

Is the District considering offering Pre-Kindergarten? Yes  No

Is the District considering a Kindergarten fee? Yes  No

If yes, please provide the proposed fee structure \_\_\_\_\_

Is the District considering providing transportation? Yes  No

If yes, please provide the name of the proposed provider \_\_\_\_\_

C. In the space below expand upon proposed changes to current grade configurations, districting, teaching methodology, programs, transportation, fees and technology. Indicate if any school facilities would be vacated, down-sized or re-organized. Indicate if changes to current staffing would result (increase/decrease).

[Type text here...]

D. Using the space below, indicate any proposed changes to current technology offerings (e.g. "One to One" technology, WiFi hotspots, laptop carts, etc.).

[Type text here...]

HIGH SCHOOL

A. Complete current information in the table provided below adding or editing cells and rows as appropriate:

<u>ROOM TYPE</u>	<u>No. of Rooms</u>	<u>Comments</u>
<b><i>CORE ACADEMIC SPACES</i></b>		
<i>Math</i>		
<i>Science</i>		
<i>Science Labs</i>		
<i>Social Studies</i>		
<i>English</i>		
<i>Foreign Language</i>		
<b><i>SPECIAL EDUCATION</i></b>		
<b><i>ART &amp; MUSIC</i></b>		
<b><i>HEALTH &amp; PHYSICAL EDUCATION</i></b>		
<i>Gymnasium</i>		
<b><i>MEDIA CENTER</i></b>		
<b><i>DINING &amp; FOOD SERVICE</i></b>		
<b><i>MEDICAL SUITE</i></b>		
<i>Nurses' Office</i>		
<b><i>ADMINISTRATION &amp; GUIDANCE</i></b>		

B. If not offered within the District's Priority Statement of Interest school, indicate in the space provided below where the District's collaborative, special education, art, music, health/physical education, media center, dining/food service and technology spaces are offered.

[Type text here...]

**SECTION FIVE: Safety and Security Statement**

Has the District formulated a school specific Multi-Hazard Evacuation Plan (Section 363 of the FY 02 State Budget) for each school under the superintendent's supervision?

Yes  No

What was the date of the last review with local public safety and law enforcement officials?

Date: \_\_\_\_\_

**SECTION SIX: Attachments**

Please attach to this completed questionnaire any Executive Reports or Conclusions of reports or studies that relate to accreditation, an assessment of facility conditions and/or findings as issued by the Department of Elementary and Secondary Education (DESE). Below, please list the documents attached (as applicable).

Documents attached:

[List here...]

Should you have any questions about this questionnaire, please contact Project Coordinator Diane Sullivan at:

Massachusetts School Building Authority  
617-720-4466  
[www.massschoolbuildings.org](http://www.massschoolbuildings.org)