

Centers Version

please visit <https://www.prenatal5fiscal.org/newmexico/nm-engagement> for link to online survey

2024 NM Cost of Care and Rate Survey

Introduction

Welcome! This survey is also available in Spanish. To select Spanish, please click on the drop-down menu at the top of the page.

¡Bienvenidos! Esta encuesta también está disponible en español. Para seleccionar la versión en español de la encuesta, haga clic en el menú en la parte superior de la página.

The New Mexico Early Childhood Education and Care Department (ECECD) will continue with an alternative methodology approach to inform state child care subsidy rates. New Mexico was the first state to move to this cost based alternative methodology in 2021. Part of this approach includes a survey, administered by Prenatal to Five Fiscal Strategies (P5FS), that will support the updating of New Mexico's cost estimation tool. The survey is for individuals, organizations, and programs that provide child care services to children from birth through twelve years in New Mexico. Because most of the survey questions ask about the costs incurred providing care to children, the best people to complete this survey are the following:

- An executive director, program director, or financial director of a child care center
- An executive director, program director, or financial director of a preschool program
- An owner of a family child care home
- A family member, friend, or neighbor who provides care to their relatives and/or other children but who is not licensed

For those who run a child care business, you may want to gather your expense statements and/or budget (if you have one) to help answer the questions (for example, it may be helpful to have your Schedule C IRS tax form nearby for reference). For those who are not licensed and provide care to family members, friends, and/or neighbors, we ask that you just do your best to estimate any costs you are asked to provide.

All other information will be kept completely confidential and only the P5FS team will be able to see your individual responses. Your data will be combined with data from other child care programs and only the combined data will be shared in summary form and cannot be linked back to you or your program.

The survey should take 15-20 minutes to complete if you have your financial information and child enrollment data nearby. The survey lets you save and continue your responses later by entering your email when requested. You will be sent a unique link back to your survey progress up to that point. If you have any questions about this survey or need any additional support, please do not hesitate to reach out to: newmexico@prenatal5fiscal.org or call (217) 469-5250 and someone from our team will return your call.

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Privacy Policy and Consent

Your individual responses will not be available to anyone other than the Prenatal to Five Fiscal Strategies (P5FS) study team. Only de-identified data that has been combined across respondents will be shared with anyone external to the P5FS study team. P5FS will not report any sample sizes that are less than 10 to support confidentiality. Your personally identifiable information will be stored in secure systems.

1) Please confirm the following:*

I have read the above information and I consent to having my information collected and stored.

Contact Information

2) From the list below, please select the option that best describes the type of child care you provide (please select one):*

- Licensed Family Home
- Licensed Group Home
- Child care center
- School-based PreK program
- School-age only child care center
- School-age only public-school program
- Early Head Start
- Head Start
- Registered Home

3) What is your primary role at this site?

- Business owner/ Family Child Care Provider
- Center Owner
- Executive Director
- Program Director/Site Director
- Assistant Director
- Finance/Accounting Staff
- Teacher
- Other - Write In: _____

As a reminder, the best people to complete this survey are:

- An executive director, program director, or financial director of a licensed child care center, out-of-school time/out-of-school recreation program.
- Licensed family child care home or group family child care home owner or provider.

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- A family member, friend, or neighbor who provides care to their relatives and/or other children but who is not a licensed child care home.

Demographic Information

5) Your name _____

6) Your phone number _____

7) Your Email Address * _____

8) Do you provide NM PreK?*

Yes

No

9) Do you provide NM Early PreK?*

Yes

No

10) Is your program enrolled in ECECD's FOCUS program?*

Yes

No

11) [if yes to #10] What star level is your program currently?*

2 Star

2+ Star

3 Star

4 Star

5 Star

12) Program/site name* _____

13) [if licensed] Program/site child care license number* _____

14) Program/site address and city* _____

15) Program/site zip code* _____

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16) In what county is this child care program/site? (if you are unsure, enter the address [here](#) and it will identify the county)*

- Bernalillo
- Catron
- Chaves
- Cibola
- Colfax
- Curry
- De Beca
- Dona Ana
- Eddy
- Grant
- Guadalupe
- Harding
- Hidalgo
- Lea
- Lincoln
- Los Alamos
- Luna
- McKinley
- Mora
- Otero
- Quay
- Rio Arriba
- Roosevelt
- San Juan
- San Miguel
- Sandoval
- Santa Fe
- Sierra
- Socorro
- Taos
- Torrance
- Union
- Valencia
- Not applicable

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18) In what tribal territory is this program/site located?*

- Not applicable
- Acoma
- Cochiti
- Fort Sill Apache
- Isleta
- Jemez
- Jicarilla Apache
- Laguna
- Mescalero Apache
- Nambe
- Navajo Nation
- Ohkay Owingeh
- Pojoaque
- Sandia
- San Felipe
- San Ildefonso
- Santa Ana
- Santa Clara
- Santo Domingo
- Taos
- Tesu`que
- To'Hajiilee
- Zuni
- Zia

Capacity and Enrollment

20) [if licensed] What is the program's/site's licensed capacity for each of the following ?*

- _____ Infants (6 weeks - 23 months)
- _____ Toddlers (24 months-35 months)
- _____ Preschoolers (36 months-kindergarten entry)
- _____ School-age

22) How many children in each age group are currently enrolled?*

- _____ Infants (6 weeks - 23 months)
- _____ Toddlers (24 months-35 months)
- _____ Preschoolers (36 months-kindergarten entry)
- _____ School-age

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23) What is your desired enrollment in each age group?*

- _____ Infants (6 weeks - 23 months)
- _____ Toddlers (24 months-35 months)
- _____ Preschoolers (36 months-kindergarten entry)
- _____ School-age

25) On average, how many children are currently enrolled in **BEFORE AND AFTER SCHOOL** care?*

26) On average, how many children are currently enrolled in **NON-TRADITIONAL HOUR** care (before 7 a.m., after 6 p.m., or on weekends)?* _____

27) How many children with **SPECIAL NEEDS** are currently enrolled in your program/site?

- _____ #Children with IEP/IFSP
- _____ #Children with 504 plan
- _____ #Children with special needs but no IEP/IFSP/504 plan

29) [if provide NM PreK or Early PreK] How many children are currently enrolled in your program are served by the New Mexico's PreK/Early PreK grant?

- _____ 3- to 4- year-olds 1080
- _____ 3- to 4- year-olds 1380
- _____ 3- to 4- year-olds Basic
- _____ 4- to 5- year-olds 1080
- _____ 4- to 5- year-olds 1380
- _____ 4- to 5- year-olds Basic

Hours of Operation

38) What days of the week is your program/site open and caring for children?

	Open	Not Open
Monday		
Tuesday		
Wednesday		
Thursday		

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Friday		
Saturday		
Sunday		

39) What are your hours of operation?

	Open Time	Close Time
Monday		
Tuesday		
Wednesday		
Thursday		
Friday		
Saturday		
Sunday		

40) Do you offer **FULL-TIME** care?*

Yes

No

41) [if yes to #40] How many hours per week defines **FULL-TIME** care in your program/site?*

42) Do you offer **PART-TIME** care?*

Yes

No

43) [if yes to #42] How many hours per week defines **PART-TIME** care in your program/site?*

*required

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44) Do you offer **varied and flexible care** for families whose schedules change from week to week or day to day?*

Yes

No

45) Is there anything else you would like to share about the days and hours of operation?

Tuition Rates/Fees

46) As an alternative to answering questions about your rates, you may upload a standard tuition rate/fee schedule for this program/site by clicking on the "browse" link below or email to newmexico@prenatal5fiscal.org.

47) Did you upload or email the program/site's standard tuition rate/fee schedule?*

Yes

No

48) [if didn't upload, provides full time care, and serves infants] What is the **FULL-TIME** rate for **INFANTS (6 weeks to 23 months)**? (please enter the hourly, daily, weekly, OR monthly rate)*

Hourly Rate: ___\$_____per hour

Daily Rate: ___\$_____per day

Weekly Rate: ___\$_____per week

Monthly Rate: ___\$_____per month

Other Rate (please describe): _____

Not applicable: _____

49) [if didn't upload, provides full time care, and serves toddlers] What is the **FULL-TIME** rate for **TODDLERS (24 - 35 months)**? (please enter the hourly, daily, weekly, OR monthly rate)*

Hourly Rate: ___\$_____per hour

Daily Rate: ___\$_____per day

Weekly Rate: ___\$_____per week

Monthly Rate: ___\$_____per month

Other Rate (please describe): _____

Not applicable: _____

50) [if didn't upload, provides full time care, and serves preschoolers] What is the **FULL-TIME** rate for **PRESCHOOLERS (36 months to kindergarten entry)**? (please enter the hourly, daily, weekly, OR monthly rate)*

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Hourly Rate: ___\$_____per hour

Daily Rate: ___\$_____per day

Weekly Rate: ___\$_____per week

Monthly Rate: ___\$_____per month

Other Rate (please describe): _____

Not applicable: _____

51) [if didn't upload, provides full time care, and serves school age] What is the **FULL-TIME** rate for **SCHOOL-AGE** children? (please enter the hourly, daily, weekly, OR monthly rate)*

Hourly Rate: ___\$_____per hour

Daily Rate: ___\$_____per day

Weekly Rate: ___\$_____per week

Monthly Rate: ___\$_____per month

Other Rate (please describe): _____

Not applicable: _____

52) [if didn't upload, provides part time care, and serves infants] What is the **PART-TIME** rate for **INFANTS** children (6 weeks - 23 months)? (please enter the hourly, daily, weekly, OR monthly rate)*

Hourly Rate: ___\$_____per hour

Daily Rate: ___\$_____per day

Weekly Rate: ___\$_____per week

Monthly Rate: ___\$_____per month

Other Rate (please describe): _____

Not applicable: _____

53) [if didn't upload, provides part time care, and serves toddlers] What is the **PART-TIME** rate for **TODDLERS** children (24 months-35 months)? (please enter the hourly, daily, weekly, OR monthly rate)*

Hourly Rate: ___\$_____per hour

Daily Rate: ___\$_____per day

Weekly Rate: ___\$_____per week

Monthly Rate: ___\$_____per month

Other Rate (please describe): _____

Not applicable: _____

54) [if didn't upload, provides part time care, and serves preschoolers] What is the **PART-TIME** rate for **preschool** children (36 months-kindergarten entry)? (please enter the hourly, daily, weekly, OR monthly rate)*

Hourly Rate: ___\$_____per hour

Daily Rate: ___\$_____per day

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Weekly Rate: ___\$_____per week

Monthly Rate: __\$_____per month

Other Rate (please describe):_____

Not applicable: _____

55) [if didn't upload, provides part time care, and serves school age] What is the **PART-TIME** rate for **school age** children? (please enter the hourly, daily, weekly, OR monthly rate)*

Hourly Rate: ___\$_____per hour

Daily Rate: ___\$_____per day

Weekly Rate: ___\$_____per week

Monthly Rate: __\$_____per month

Other Rate (please describe):_____

Not applicable: _____

56) Do you offer care during non-traditional hours (before 7 a.m., after 7 p.m., overnight, or on weekends)?

Yes

No

Not Applicable

57) [if yes to #56] Do you charge more for providing care during non-traditional hours (before 7 a.m., after 7 p.m., overnight, or on weekends)?

Yes

No

Not Applicable

58) [if yes to #57] How are rates determined for care during non-traditional hours (before 7 a.m., after 6 p.m., overnight or on weekends)?

Revenue

59) Which of the following sources of revenue does this program/site receive? (select all that apply)*

Private parent/family tuition

Additional fees beyond tuition (e.g., application fees, field trip fees, late fees)

Child Care Assistance Program

New Mexico PreK Grant

21st Century Grants

Head Start

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- Early Head Start
- USDA food program (Child and Adult Care Food Program (CACFP), School Nutrition Program)
- Fundraising
- Other - Write In: _____

60) Of those revenue sources selected, which is the LARGEST source of revenue for this program/site? (select one)?*

- Private parent/family tuition
- Additional fees beyond tuition (e.g., application fees, field trip fees, late fees)
- Child Care Assistance Program
- New Mexico PreK Grant
- 21st Century Grants
- Head Start
- Early Head Start
- USDA food program (Child and Adult Care Food Program (CACFP), School Nutrition Program)
- Fundraising
- Other - Write In: _____

Child Care Assistance Program

61) Do you participate in the Child Care Assistance Program?*

- Yes
- No

62) [if yes to #60] How many of the children you care for receive child care subsidy through the Child Care Subsidy Program?*

63) [if yes to #60] If the subsidy payments plus the parent co-pay are not enough to cover your tuition rate, do you charge parents the difference?*

- Yes
- No

64) What are the barriers or challenges, if any, to participating in the Child Care Subsidy Program? (select all that apply)*

- I do not have challenges or experience barriers with the program
- Reimbursement rates are too low
- Delays in receiving reimbursement
- Not enough families qualify/Not enough demand

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- Don't know enough about the program
- Program is confusing
- Communication from the state and/or state partners is poor
- Don't have the time
- Don't have the resources
- Issues receiving co-pays from parents/families
- Issues administering co-pays to parents/families
- Need more information about how to enroll in the program
- Paperwork is too difficult
- Other - Write In

Staffing and Wages

65) Which of the following is closest to the average hourly wage/salary before taxes for a **full-time teacher**?*

- \$12 to \$13/hour (\$24,960 to \$27,040 annually)
- \$13 to \$14/hour (\$27,040 to \$29,120 annually)
- \$14 to \$15/hour (\$29,120 to \$31,200 annually)
- \$15 to \$16/hour (\$31,200 to \$33,280 annually)
- \$16 to \$17/hour (\$33,280 to \$35,360 annually)
- \$17 to \$18/hour (\$35,360 to \$37,440 annually)
- \$18 to \$19/hour (\$37,440 to \$39,520 annually)
- \$19 to \$20/hour (\$39,520 to \$41,600 annually)
- \$20 to \$21/hour (\$41,600 to \$43,680 annually)
- \$21 to \$22/hour (\$43,680 to \$45,760 annually)
- \$22 to \$23/hour (\$45,760 to \$47,840 annually)
- \$23 to \$24/hour (\$47,840 to \$49,920 annually)
- \$24 to \$25/hour (\$49,920 to \$52,000 annually)
- More than \$25/hour (\$52,000 and above)
- Not applicable

66) [if provide NM Prek and/or NM Early Prek] Do you pay a different salary for a **preschool teacher**?

- Yes
- No

67) [if yes to #66] Which of the following is closest to the average hourly wage/salary before taxes for a **full-time preschool teacher**?*

- \$12 to \$13/hour (\$24,960 to \$27,040 annually)
- \$13 to \$14/hour (\$27,040 to \$29,120 annually)
- \$14 to \$15/hour (\$29,120 to \$31,200 annually)

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- \$15 to \$16/hour (\$31,200 to \$33,280 annually)
- \$16 to \$17/hour (\$33,280 to \$35,360 annually)
- \$17 to \$18/hour (\$35,360 to \$37,440 annually)
- \$18 to \$19/hour (\$37,440 to \$39,520 annually)
- \$19 to \$20/hour (\$39,520 to \$41,600 annually)
- \$20 to \$21/hour (\$41,600 to \$43,680 annually)
- \$21 to \$22/hour (\$43,680 to \$45,760 annually)
- \$22 to \$23/hour (\$45,760 to \$47,840 annually)
- \$23 to \$24/hour (\$47,840 to \$49,920 annually)
- \$24 to \$25/hour (\$49,920 to \$52,000 annually)
- More than \$25/hour (\$52,000 and above)
- Not applicable

68) Which of the following is closest to the average hourly wage/salary before taxes for a **full-time assistant teacher**?*

- \$12 to \$13/hour (\$24,960 to \$27,040 annually)
- \$13 to \$14/hour (\$27,040 to \$29,120 annually)
- \$14 to \$15/hour (\$29,120 to \$31,200 annually)
- \$15 to \$16/hour (\$31,200 to \$33,280 annually)
- \$16 to \$17/hour (\$33,280 to \$35,360 annually)
- \$17 to \$18/hour (\$35,360 to \$37,440 annually)
- \$18 to \$19/hour (\$37,440 to \$39,520 annually)
- \$19 to \$20/hour (\$39,520 to \$41,600 annually)
- \$20 to \$21/hour (\$41,600 to \$43,680 annually)
- \$21 to \$22/hour (\$43,680 to \$45,760 annually)
- \$22 to \$23/hour (\$45,760 to \$47,840 annually)
- \$23 to \$24/hour (\$47,840 to \$49,920 annually)
- \$24 to \$25/hour (\$49,920 to \$52,000 annually)
- More than \$25/hour (\$52,000 and above)
- Not applicable

69) [if provide NM Prek and/or NM Early Prek] Do you pay a different salary for an **assistant teacher in a preschool classroom**?*

- Yes
- No

70) [if yes to #69] Which of the following is closest to the average hourly wage/salary before taxes for a **full-time assistant teacher in a preschool classroom**?*

- \$12 to \$13/hour (\$24,960 to \$27,040 annually)
- \$13 to \$14/hour (\$27,040 to \$29,120 annually)
- \$14 to \$15/hour (\$29,120 to \$31,200 annually)
- \$15 to \$16/hour (\$31,200 to \$33,280 annually)

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- () \$16 to \$17/hour (\$33,280 to \$35,360 annually)
- () \$17 to \$18/hour (\$35,360 to \$37,440 annually)
- () \$18 to \$19/hour (\$37,440 to \$39,520 annually)
- () \$19 to \$20/hour (\$39,520 to \$41,600 annually)
- () \$20 to \$21/hour (\$41,600 to \$43,680 annually)
- () \$21 to \$22/hour (\$43,680 to \$45,760 annually)
- () \$22 to \$23/hour (\$45,760 to \$47,840 annually)
- () \$23 to \$24/hour (\$47,840 to \$49,920 annually)
- () \$24 to \$25/hour (\$49,920 to \$52,000 annually)
- () More than \$25/hour (\$52,000 and above)
- () Not applicable

71) Which of the following is closest to the average hourly wage/salary before taxes for a **full-time teaching aide**?*

- () \$12 to \$13/hour (\$24,960 to \$27,040 annually)
- () \$13 to \$14/hour (\$27,040 to \$29,120 annually)
- () \$14 to \$15/hour (\$29,120 to \$31,200 annually)
- () \$15 to \$16/hour (\$31,200 to \$33,280 annually)
- () \$16 to \$17/hour (\$33,280 to \$35,360 annually)
- () \$17 to \$18/hour (\$35,360 to \$37,440 annually)
- () \$18 to \$19/hour (\$37,440 to \$39,520 annually)
- () \$19 to \$20/hour (\$39,520 to \$41,600 annually)
- () \$20 to \$21/hour (\$41,600 to \$43,680 annually)
- () \$21 to \$22/hour (\$43,680 to \$45,760 annually)
- () \$22 to \$23/hour (\$45,760 to \$47,840 annually)
- () \$23 to \$24/hour (\$47,840 to \$49,920 annually)
- () \$24 to \$25/hour (\$49,920 to \$52,000 annually)
- () More than \$25/hour (\$52,000 and above)
- () Not applicable

72) Which of the following non-teaching positions are budgeted for at this program/site?

(please check all that apply). *Note: We recognize that programs have different job titles but please do your best to match your roles to those listed.**

- Executive Director
- Program Director
- Assistant Director
- Education Coordinator/Curriculum Coordinator
- Eligibility Coordinator
- Nurse/Health Consultant
- Instructional Coach
- Parent Outreach Coordinator
- Family Engagement Specialist

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- Office manager
- Administrative Assistant
- Kitchen Staff
- Transportation Staff
- Financial Manager/Bookkeeper
- Janitor/Maintenance Worker
- Other - Write In: _____

73) How many full-time equivalent (FTE) non-teaching positions are budgeted for at this program/site? (click [here](#) for more information about how to calculate the total FTE) *

Benefits

86) Which of the following benefits are offered to employees at this program/site (please select all that apply)?*

- Health insurance
- Dental insurance
- Vision insurance
- Retirement
- Life insurance
- Long-term care insurance
- Paid sick days
- Paid vacation days
- Paid federal/state holidays
- Paid professional development days
- Employee Assistance Program (EAP) services
- Stipend for training or coursework
- Other - Write In: _____
- None of the above

87) [if sick days selected in #86] What is the average number of paid sick days an employee receives each year?*

88) [if vacation days selected in #86] What is the average number of paid vacation days an employee receives each year?*

89) [if PD days selected in #86] What is the average number of paid professional development days offered to an employee each year?*

*required

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95) Is there anything else you would like to share about compensation and benefits?

Non-Personnel Expenses

96) Please estimate the approximate **MONTHLY** amount for the following major expenses at this site. *

	Monthly Amount
Rent/lease/mortgage	\$ per month
Supplies and materials	\$ per month
Equipment	\$ per month
Food	\$ per month
Utilities	\$ per month
Transportation	\$ per month
Liability Insurance	\$ per month

Special Populations

100) Do you provide care for children and families experiencing any of the following circumstances? (Please select all that apply)*

- Children learning more than one language
- Children requiring extra behavioral support (for example, children who have challenges managing their emotions/behavior beyond what is typical for their age or children with unusually limited communication or social skills)
- Children with particular needs related to delays, disabilities, or medical conditions
- Children involved in child welfare system or at risk of abuse or neglect
- Children who are experiencing homelessness/or are unhoused (those who lack a fixed, regular, and adequate nighttime residence, including children sharing housing due to loss of

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housing, living in motels or campgrounds, living in emergency or transitional shelters, or living in places unfit for human habitation such as cars, public spaces, or abandoned buildings)

[] Families who need care during non-traditional hours (before 7:00 AM, after 6:00 PM, on weekends, or who have schedules that vary from week to week or day to day)

[] Families who are undocumented

[] None of the above

101) [if children learning more than one language selected in #100] What additional costs, if any, do you incur when caring for **children learning more than one language**? (please describe)*

102) [if children requiring extra behavior support selected in #100] What additional costs, if any, do you incur when caring for children requiring extra behavior support? (please describe)*

103) [if children with delays, disabilities, or medical conditions selected in #100] What additional costs, if any, do you incur when caring for children with particular needs related to delays, disabilities, or medical conditions? (please describe)*

104) [if children in child welfare system selected in #100] What additional costs, if any, do you incur when caring for children involved in child welfare system or at risk of abuse or neglect? (please describe)*

105) [if children experiencing homelessness selected in #100] What additional costs, if any, do you incur when caring for children experiencing homelessness/who are unhoused? (please describe)*

106) [if families needing care during non-traditional hours selected in #100] What additional costs, if any, do you incur when caring for families who need care during non-traditional hours? (please describe)*

107) [if families needing care during non-traditional hours selected in #100] What additional costs, if any, do you incur when caring for families who are undocumented? (please describe)*

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Additional Questions (optional)

108) Please fill in the ANNUAL AMOUNT (can be approximate) that you spent between July 2022 and June 2023 for the following expense categories. If an expense does not apply to you, please leave it blank.

- _____ Telephone/Internet
- _____ Insurance (other than liability)
- _____ Legal/Professional Fees (HR, accounting, other)
- _____ Audit
- _____ Fees/Permits
- _____ Fundraising Expenses
- _____ Professional Association/memberships
- _____ Marketing/Advertising
- _____ Administration Fee
- _____ Building maintenance/Repairs/Renovations
- _____ Cleaning/Janitorial
- _____ Laundry Service
- _____ Tuition assistance/scholarships
- _____ Family/Parent Engagement Activities
- _____ Field Trip/Events
- _____ Professional Consultants (nurse, mental health, program, all)
- _____ Temp Personnel/Substitutes
- _____ Training/Professional Development expenses
- _____ Gross Receipts Tax (GRT)

Thank you

Thank you for taking the time to complete this survey. Your responses will help set state child care reimbursement rates that are based on the cost of the care you provide. There are additional opportunities to provide input into this process, including online group discussions or “input sessions”. If you would like to learn more about the project or sign up for one of these input sessions, please visit www.prenatal5fiscal.org/newmexico.

109) Equitable participation in this survey is important for capturing the full range of provider experiences. If you’re willing, please consider sharing information about how you identify so we can know where there are gaps in our data collection efforts.

What is your race or ethnicity? Please select as many categories as apply.

[] American Indian or Alaska Native

*required

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- Asian
- Black/African American
- Latino/a/Hispanic
- Middle Eastern/North African (MENA)
- Native Hawaiian/Pacific Islander
- White
- Decline to state
- Other - Write In: _____

110) Do you have a tribal affiliation? (please check all that apply)

- Not applicable
- Fort Sill Apache
- Jicarilla Apache
- Mescalero Apache
- Navajo Nation
- Acoma
- Cochiti
- Isleta
- Jemez
- Laguna
- Nambe
- Ohkay Owingeh
- Picuris
- Pojoaque
- Sandia
- San Felipe
- San Ildefonso
- Santa Ana
- Santa Clara
- Santo Domingo
- Taos
- Tesuque
- Zuni
- Zia
- Other - Write In: _____

111) What languages do you speak fluently? (please select all that apply)

- English
- Farsi
- Keres
- Navajo
- Spanish

*required

Centers Version

please visit <https://www.prenatal5fiscal.org/newmexico/nm-engagement> for link to online survey

Tewa

Tiwa

Towa

Vietnamese

Zuni

Other - Write In: _____

Thank You!

Thank you for participating in this important survey, your response has been received! If you would like to learn more about ECECD's Cost of Child Care work, we invite you to visit the Prenatal to Five Fiscal Strategies website (www.prenatal5fiscal.org/newmexico) where you can also sign up for an input session.

ECECD is also gathering input from providers on the redesign of the FOCUS, New Mexico's tiered quality rating and improvement system. We encourage you to complete that survey by visiting: <https://survey.alchemer.com/s3/7751924/2024-NM-AM-survey>.
