

Participant's Role	Participant's Location		Facility ID, if ECE	Program Progress		Notes (Optional)
Participant's Role	Zip Code	County	Facility ID	Has this Participant made Progress towards Completion of the Program during this FY?	Has the Participant Completed the Program during this FY?	Optional Notes
participants_role.partici	participant_location.zip	participant_location.co	facility_id_ece_prof.fac	program_progress.has	program_progress.has	notes.optional_notes
The role of the providers participating in the training.	Zip code of the participant's home address.	Data Entry Type: Drop Down, All NC Counties Indicate county of residence of participant.	DCDEE Facility ID using system lookup	Data Entry Type: Drop Down, Yes No	Data Entry Type: Drop Down, Yes No	Data Entry Type: Text.