This forgivable loan opportunity is provided by the Preschool Development Grant funded by the KS Children's Cabinet to increase the number of high-quality infant and toddler slots (children under 30 months of age) offered in Ottawa Kansas. Priority points will be given to applicants offering to increase care for infants or increase the number of hours services are provided during non-traditional hours (before 7:00 am, after 6:00 pm, and weekends). Funding awards can be made to persons in the process of opening a licensed child care program, or to currently licensed programs expanding care for more infants and toddlers.

Please complete the *Application below, and the W-9 form (attached)*. Maximum request is \$4,000 for a Family Child Care or Group Family Child Care business. Maximum request is \$10,000 for a Child Care Center.

Timeline:

- Funds will be disbursed within 14 days of approval of the application by the committee.
- Funds must be spent and receipts submitted within 60 days of the grant award.
- The grantee will notify Child Care Aware of Eastern Kansas when the license is awarded and care begins.
- The loan will be forgiven if the provider offers licensed care for at least six months. If the program does not obtain licensing and provide care for at least six months, the grantee is responsible for repaying the loan to Child Care Aware of Eastern Kansas.

Ineligible Expenses:

- Equipment that confines and restricts infants' movements such as swings, infant seats, exersaucers, etc.
- Permanent physical structures (i.e. playground installations)
- Items that have been recalled, discontinued, back-ordered (out of stock) or contain choking hazards.
- Line items for indirect costs (i.e. insurance, accounting, some utilities)
- Real estate
- Building upgrades and improvements (i.e. installing fencing, renovation)
- Food and beverage
- Storage equipment
- Vehicle purchase and maintenance costs
- Supplanting
- Family scholarships and subsidies

Allowable Expenses (MUST be infant/toddler appropriate):

• Items are intended and appropriate for infants and/or toddlers (should not be listed in retail description as intended for pre-school age children.)

- Eligible items would include things like cribs, high chairs, health and safety items needed for licensing, toys, and books.
- Licensing fees

Name:

• Technology for running the business, such as a computer or printer, recordkeeping system.

Note: In some cases, expenses may be deemed eligible if noted for accessibility for children with special health care needs.

For assistance with completing this application and verifying purchases are eligible, please contact Deb Danielson, Child Care Health Consultant, at deb@east.ks.childcareaware.org or 785-224-6479. Email the completed application to: deb@east.ks.childcareaware.org

Please Provide the Following Information:

Address:					
Childcare Facility/Home					
Name:					
KDHE License Number (if					
applicable):					
Phone Number:					
Email address:					
Are you currently enrolled with DCF to provide care for families receiving child care subsidy assistance, or have you submitted the application for this purpose?					
What are your hours of operation?					
How much money are you requesting? (remember to include tax and shipping costs) \$					

Please list the number of children you currently have enrolled by age group.

Under 18 months	
18 – 30 months	

Please list the number of open slots you plan to fill by age group.

Under 18 months	
18 – 30 months	

Please provide an itemized list of what you are needing to purchase, the cost for each specific item, and a link to the item description.

Item	Cost	Item link

Explain in detail how these items available, and/or expand care duweekends). You may attach additionally a series of the series	uring non-t	radition	al hours (before 7:00 a			=
Each application will be reviewed	a by comm	iittee usi	ng the following rubri	J.		
Indicator	Possible Points	Score		Reviewed		
Infant/Toddler slots added	40					
Non-traditional hours	10					
DCF Enrollment	10					
Itemized list, links and	40					
description complete						
CCHC Coach signature			Date			
Applicant Signature			Date			