

Good Life. Great Mission.

# Nebraska Business & Child Care Partnership Expansion Application Guide

This guide has been created to assist you with having the required information and documentation before you begin the application process. We also strongly recommend that you read the program frequently asked questions (FAQs) before you begin. These include a list of allowable and non-allowable expenses as well as many more details that will help you be prepared.

While the application can be completed on a mobile device, it will be easier to do so on a computer or tablet. Supported file types that can be uploaded follow: PDF, JPG, BMP, or PNG.

In order to apply, you will need to create an account in Submit.com. To do this, you will need to provide the following:

- Your full name
- An email address we can use to contact you about your application and eligibility determination.

PLEASE NOTE: To be eligible to apply for this program, you must be the owner of a Nebraska-licensed child care program that will use the grant funding to increase your license capacity. Your program must be currently open and operating, and in good standing with the state.

# APPLICATION SECTION 1: General Applicant Information (to be completed by the owner)

- Your full name
- Your home address
- Your valid driver's license or government issued ID
- Your consent to the state of Nebraska conducting a background check in your name. (For applicants who have resided outside of Nebraska during the last five years, a criminal history check from the local law enforcement and/or state patrol in all state(s) resided in will be requested prior to funds being awarded.)
- Verification that you are a U.S. citizen or qualified alien under the Federal Immigration and Nationality Act
- Your work and personal phone numbers
- Your race, ethnicity, and gender information (optional)
- Your UEI (Unique Entity ID). If you do not have a UEI number, visit: <u>https://sam.gov/content/entity-registration to obtain one prior to applying</u>
- The legal business name of your program, as shown on your tax return
- Your child care program's name (if different than the legal business name)

- Your child care program's current physical address, and mailing address if different from the physical address. If you are you moving to a new location due to expansion, you must provide new location address.
- If the new property is rented/leased (You will need to provide a copy of your current rent or lease agreement and a landlord approval letter that supports business operations for a child care program)
- Your taxpayer identification number, which is either your Employer Identification Number (EIN) or your Social Security Number (SSN)
- Your Child Care Program license number. You can find your facility's license number here: <a href="https://dhhs.ne.gov/licensure/Documents/ChildCareRoster.pdf">https://dhhs.ne.gov/licensure/Documents/ChildCareRoster.pdf</a>. If you are applying as a start-up and do not yet have a child care license, you may still apply.
- Your Business Tax Classification (e.g., Individual, Sole Proprietor, Corporation, Partnership, Limited Liability Company, Non-Profit)

# **APPLICATION SECTION 2: Program Information**

- Whether or not your program is currently open and actively watching children
- The type of program you currently operate (Family Child Care Home I, Family Child Care Home II, Child Care Center, School Aged Child Care Center, Afterschool Program, Summer-Only Program)
- The months, days, and hours of operation for your program
- Your current license capacity
- Total number of children currently enrolled in your program
- The number of infants, toddlers, preschoolers, and/or school age children currently enrolled
- The number of children currently on your program's waitlist
- Date you plan to be licensed at your new capacity
- Whether you currently accept any child care subsidy, and if not, if you are willing to
- Whether or not your program is bilingual
- A brief description of your program and how it currently meets children's individual needs
- A brief description of the children's daily routine and activities for each age group; how these activities are age appropriate; and, how each age group benefits physically, emotionally, socially, and intellectually. (You should include how you incorporate <u>Nebraska's Early Learning Guidelines</u> in your program.)
- A brief description of your program's staff recruitment and retention efforts including the number staff and anticipated training courses.
- Whether or not you are currently registered with the Nebraska Child Care Referral Network. To register, visit <u>https://www.nechildcarereferral.org/register</u>

# **APPLICATION SECTION 3: Project Information**

- A brief description of your proposed project, project goals, and anticipated outcomes
- The number of additional slots your project will add for infants, toddlers, preschoolers, and/or school age children
- A brief description of how your project will help to increase the availability and quality of affordable child care. Include a description of local barriers and how

you plan to implement innovative strategies to meet the need. Describe the plan for project sustainability.

- A brief description of any additional benefits offered by your project
- A brief description of the community or geographic region your program serves; how many home and center-based child care programs there are in the area; and if they have excess capacity and/or a waiting list.
- A brief description of any key partners, roles, responsibilities and how they will contribute to the success of the project. If partners include employers, you should be ready to identify them.
- Whether or not you currently have any community partnerships
- Two letters of community support on official letterhead, signed, and dated within 30 days of submitting your application. These should be from community agencies and/or representatives and should demonstrate the need for additional child care in your community.

#### **APPLICATION SECTION 4: Budget Narrative**

- Other grant funding sources, if applicable (Receipt of previous funding will not impact your program's eligibility for this grant)
- A brief description of all funding sources and amounts, if applicable
- Total grant funds requested. Estimate the funds requested in each of the following categories for **expenses incurred through July 31, 2023.** 
  - Minor renovations and repairs
  - Staff wages and benefits
  - Equipment
  - Health and safety
  - Program supplies
  - Rent or mortgage payments
  - Insurance and utilities
  - Professional fees
  - Vehicle (Programs with license capacity of 13+ are eligible to request funds to purchase a vehicle with a minimum capacity of 8 passengers. Providers may request 20% of the vehicle cost to be used toward the vehicle purchase. You will need to provide a copy of your auto insurance policy showing coverage for the transportation of children within 30 days of vehicle purchase.)
- A brief description of all funding requests by category and a single price quote or bid for items over \$1,000 for minor renovations, equipment, and vehicles is required.

#### **APPLICATION SECTION 5: Financial Information**

- Name of your bank or credit union
- Routing and account numbers
- Primary name on the account (as it appears on a check)
- An image of a voided check or deposit slip (If you do not have either of these, contact your financial institution. The address on your check does not need to be current, but your name, routing number, and account number must be current.)

## **APPLICATION SECTION 6: Business Plan Information**

• A profit and loss worksheet to give DHHS a comprehensive understanding of your business plan. This will demonstrate 12 months of projected expenses and income. (See the following page.)

#### EXPENSES

What	Expense Amount
Director's Salary (\$/year)	
Assistant Director Salary (\$/year)	
Head Teacher Salary (\$/year)	
Teacher Salary (\$/year)	
Aid Salary (\$/year)	
Other Staff Salary (\$/year)	
Advertising	
Mileage	
Insurance	
Training	
Transportation Insurance	
Food	
Legal and Professional Fees	
Interest on Bonds	
Educational Supplies	
Enrichment Activities	
Cleaning Supplies	
Repairs and Maintenance	
Retirement Program	
License Fees and Permits	
Mortgage	
Utilities	
Rent	
Real Estate Taxes	
Quarterly Taxes	
Petty Cash	
Other	
Professional Organizations	
TOTAL EXPENSES	

# INCOME

Infant Fees (\$/year)	
Toddler Fees (\$/year)	
Preschool Fees (\$/year)	
School Age Fees (\$/year)	
Part-Time/Drop In (\$/year)	
TOTAL FEES	
Child Care Subsidy	
Grants	
Loans	
USDA Food Program	
TOTAL INCOME	

## DISCOUNTS FOR ADDITIONAL CHILDREN

1 <sup>st</sup> Child	
2 <sup>nd</sup> Child	
3 <sup>rd</sup> Child	
TOTAL DISCOUNTS	
TOTAL PROFIT/LOSS	