

Nebraska Business & Child Care Partnership Startup Application Guide

This guide is intended to ensure you have 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. This includes 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.

Thank you for your interest in this grant program. In order to apply, you will need to create an account in Submit.com. To do so 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: Any individual, business, group, community-based organization, or school (public or private) starting a child care program in Nebraska who can demonstrate a need for more child care programs in their area and pass a background check is eligible to apply for this program.

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: https://sam.gov/content/entity-registration to obtain one prior to applying
- 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 physical address, and mailing address if different from the physical address

- Whether your facility is at a property that is owned or 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 Business Tax Classification (e.g., Individual, Sole Proprietor, Corporation, Partnership, Limited Liability Company, Non-Profit)

APPLICATION SECTION 2: Program Information

- The type of program you plan to operate (Family Child Care Home I, Family Child Care Home II, Child Care Center, School Aged Child Care Center, Afterschool Program, Summer-Only Program)
- Whether you plan to accept any child care subsidy
- The proposed license capacity of your program
- The number of slots your program will accept for infants, toddlers, preschoolers, and/or school age children
- The proposed months, days, and hours of operation for your program
- Whether or not your program will be bilingual
- A brief description of your program and how it will meet children's individual needs
- A brief description of what the children's daily routine will be and activities for each age group; how these activities will be age appropriate; and, how each age group will benefit physically, emotionally, socially, and intellectually. (You should include how you will incorporate <u>Nebraska's Early Learning Guidelines</u> in your program.)
- A brief description of your plan for staff recruitment and retention efforts including the number staff and anticipated staff training.

APPLICATION SECTION 3: Project Information

- A business plan that briefly describes your business model, how your program will
 provide more child care slots, and goals you hope to accomplish by opening your
 child care program
- The date by when you plan to be licensed and operating
- A brief description on how your project will increase the availability of quality and 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 the community or geographic region your program will serve; 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)
- 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 st Child	
2 nd Child	
3 rd Child	
TOTAL DISCOUNTS	
TOTAL PROFIT/LOSS	