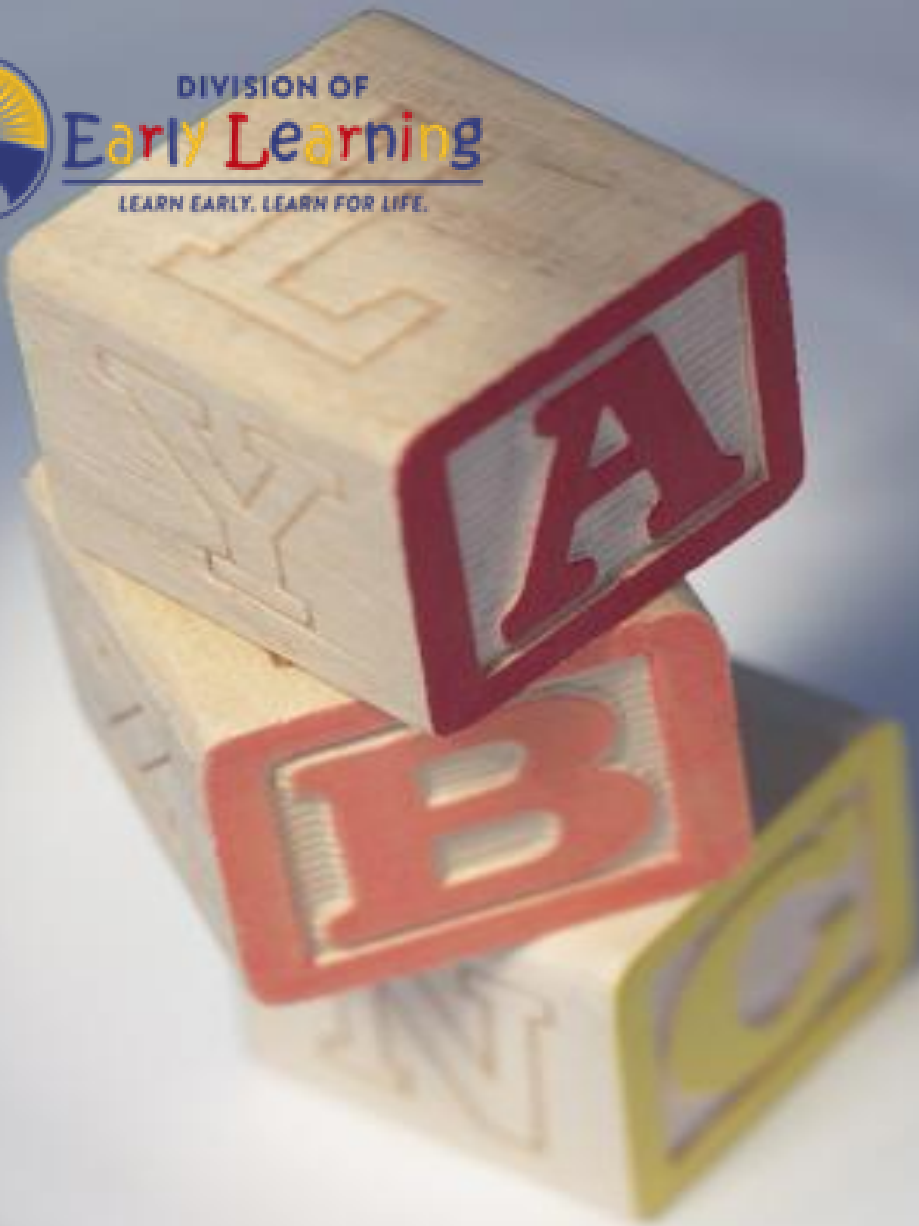




DIVISION OF  
**Early Learning**  
LEARN EARLY. LEARN FOR LIFE.



# Provider Portal User Guide

Version 5.11

September 27, 2022

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## Document Revision History

Document Version	Date	Author	Revision
5.4	01/20/22	Jim Ledbetter	Final
5.5	02/24/22	Jim Ledbetter	Final
5.6	03/24/22	Jim Ledbetter	Final
5.7	05/26/22	Jim Ledbetter	Final
5.8	06/28/22	Jim Ledbetter	Final
5.9	07/28/22	Jim Ledbetter	Final
5.10	08/25/22	Jim Ledbetter	Final
5.11	09/27/22	Jim Ledbetter	Final

## Document Overview

This document provides a step-by-step guide to navigate the Provider Portal.

### Purpose of this Document

The purpose of this document is to provide Provider Portal users with a reference document to successfully navigate and perform business processes included in Release 5.11 of the Provider Portal.

### Intended Audience

The intended audience for this document includes provider staff responsible for completing profiles, contracts, enrollments, and attendance.

### What's New in this User Guide?

New screenshots for Temporary Closures.

### Assistance

If you have questions about any of the material in this user guide or about any processes not covered by this guide, please contact your local Early Learning Coalition.

## Accessing the Provider Portal

The link to access the Provider Portal is <https://providerservices.floridaearlylearning.com>.

## Creating a Provider Portal Account

First-time Provider Portal users must register for an account to access the Provider Portal. Provider Portal users with multiple provider sites should begin by registering only one site location. This could be the provider's primary, flagship or main location. Once a Provider Portal account registration request is approved for one provider site, the provider user will be able to create accounts for additional sites after logging on to the Provider Portal.

Provider Services Logon

Account Information

User name (must be a valid email address)

Enter User Name

Not yet registered?  
Click [here](#) to register a new provider account.

Password

Enter Password

Log On

[Forgot my password](#)

[Change my password](#)

Click the [here](#) link to start the new account registration process and the following page will display:

Register for a New Provider Account

License Details

Taxpayer or Provider identification number\*

License/Registration/Exemption number, or EXEMPT\*

Verify License Details

Already registered?  
Click [here](#) to log in with your existing account information.

A Provider Portal user must enter the taxpayer identification number (from the provider), the provider identification number (from the early learning coalition) and the Department of Children and Families (DCF) license, registration, exemption number or type the word "EXEMPT". Providers may enter "EXEMPT" if they do not have an exemption number from DCF.

The Provider Portal user must click the [Verify License Details](#) button to complete step 1 of the Provider Portal account registration process.

If a match is found for the submitted information, the following message will display:

**Provider Data Found**

We found the following Provider data which corresponds to the license information that you entered. If we've correctly identified your provider, click Yes to pre-fill sections of the registration form. Otherwise, click No and try again with different license information.

**Business name:** 4 Kids Academy  
**Doing Business As name:** 4 KIDS ACADEMY  
**Owner name:** SARINA

Is this your provider?

If the information is not correct, click the **No** button and contact the local early learning coalition.

If the information is correct, click the **Yes** button. On the next screen, the registration information will be populated by the system, with the exception of User Information.

If a match is not found for the provider information, the following message will display:

**No Matching Provider Data Found**

**Taxpayer or Provider ID:** ✘ 00000000000  
**License/Registration/Exemption #:** ✘ EXEMPT

We were not able to find matching provider site or principal business data to the specified taxpayer/license information. If you are a new provider, this situation is to be expected.

If you have reason to expect that your information should be in our provider system, please re-enter your license information and try again or contact your [early learning coalition](#) for assistance.

After filling in the required information (noted with a red asterisk \*), the Provider Portal user must click the **Register** button to complete the registration process.

## Register for a New Provider Account

### License Details

Taxpayer or Provider identification number \* 

34534534545

License/Registration/Exemption number, or EXEMPT \* 

EXEMPT

### Business Details

Business name associated with your taxpayer identification number \*

Owner/Operator name \*

Principal Address line 1 \*


Principal Address line 2

Principal City \*

Principal State \*

Principal Zip code \*

## Location Details

Redlands Christian Migrant Association (RCMA) Provider 

Doing Business As name (DBA) \*

Provider type \*

Not Selected 

Legal status \*



Contact person phone number \*

## Physical Address of Facility

Facility address is the same as principal address.

Address line 1 \*

Address line 2

City \*

State

Florida

Zip code \*

County of physical location \*

--please select a value-- 

## User Information

First name \*

Middle name

Last name \*

Account user name (must be a valid email address) \*

Confirm account user name \*

Password (must contain at least 8 characters) \*

Confirm password \*

Register

After clicking the **Register** button, the following message may display:

ⓘ **Address Verification** ✕

Principal Address of Business

USPS standardized address is:

Entered Address	USPS Address
100 Example St, TALLAHASSEE, FL - 32399-0001	100 EXAMPLE ST, TALLAHASSEE, FL 32399-0001
<input type="radio"/> <b>Select this</b>	<input checked="" type="radio"/> <b>Select this</b>

CloseApply

Click the **Select this** radio button to accept the standardized United States Postal Service (USPS) address or the Entered Address if the USPS Address is not found. Then, click the **Apply** button to continue. If the Provider Portal user clicks the **Close** button, the user will be taken back to the previous screen to re-enter the address information.

Once the Provider Portal user submits an account request, the following page will display:

Account Request Confirmation

Your registration/activation request was sent to an administrator for processing. You will receive an email when your account is approved. Please click **Continue** to proceed to the logon page.

Continue

The Provider Portal user should access the email address used in the account and find the email sent by **DONOTREPLY@oel.myflorida.com**.

Hello Jim Ledbetter,

You are receiving this email because someone registered this email address for an account in Florida's statewide early learning Provider Portal. You will receive an email that will notify you how to proceed after your request is processed by your local early learning coalition.

ELC of the Big Bend Region  
(866) 973-9030  
<http://www.elcbigbend.org/>

**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have any questions, please contact your Early Learning Coalition at the number listed above.**

If the registration request is approved, the following email will be sent by **DONOTREPLY@oel.myflorida.com**.

Hello Jim Ledbetter,

The Provider Portal registration request you submitted for Jim's House of Learnin' 2 has been approved. You may now log on to the Provider Portal with the user name and password you registered with.

ELC of the Big Bend Region  
(866) 973-9030  
<http://www.elcbigbend.org/>

**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have any questions, please contact your Early Learning Coalition at the number listed above.**



The Provider Portal user can log on to the Provider Portal at <https://providerservices.floridaearlylearning.com>.

## Troubleshooting a Provider Portal Account Error Message

If the Provider Portal user receives the following message, contact the local early learning coalition to verify that the taxpayer identification number matches the OEL database.

**The license number belongs to a provider/business that is associated with a different taxpayer identification number.**

If the Provider Portal user receives either of the following messages, contact the local early learning coalition to determine if a provider portal account has already been created.

**The license number belongs to a provider that is already associated with a registered account.**

**The taxpayer or provider identification number belongs to a business that is already associated with a registered account.**

If the Provider Portal user receives the following message, contact the local early learning coalition to determine if the user name (email address) has been used in the Family Portal. The coalition may need to consult with OEL to make this determination. If a user name has been used in the Family Portal, even if an application was not created, OEL will have to remove the user name from the database so it can be used in the Provider Portal. If a provider has improperly used a user name to complete SR or VPK applications for a parent, the provider must contact that parent to get a replacement user name for that application so the provider's user name can be used in the Provider Portal. Another option is for the provider to pick another user name to use in the Provider Portal.

**Account user name (must be a valid email address) \***

oeldemonstration+pb@gmail.com

**User name "oeldemonstration+pb@gmail.com" is not available.**

## Provider Portal Returning User

### Log on Process

Provider Portal users who have already created a user account can log on from the Provider Services welcome page by entering the user name and password created during the account process. Click the **Log On** button to continue.

Provider Services Logon

### Account Information

User name (must be a valid email address)

Password

[Forgot my password](#)  
[Change my password](#)

**Log On**

### Password Recovery

If the Provider Portal user cannot remember the password, the user can click the **Forgot my password** link.

Provider Services Logon

### Account Information

User name (must be a valid email address)

Password

[Forgot my password](#)  
[Change my password](#)

**Log On**

Clicking the **Forgot my password** link will display the following page:

Forgot Your Password?

### Account Information

Please type the user name of your account and then click **Continue**. A password reset link will be sent to the email address associated with your account.

User name

[← Back](#) **Continue**

The Provider Portal user must know the email address used for the account. Once the Provider Portal user enters an email address and clicks the **Continue** button, the following page will display:

**Forgot Password Confirmation**

If an account was found with the username/email provided, you will receive a password reset link to the email.

Please click **Continue** to proceed to the login page

**Continue**

The Provider Portal user should then access the email account used for the account and find the email sent by **DONOTREPLY@oel.myflorida.com**.

DONOTREPLY@oel.myflorida.com  
to me

5:14 PM (0 minutes ago)

**This Message is from UAT Provider Portal**

You are receiving this message because you or someone else from this email address requested a new Provider Portal password. Please disregard this email if you did not request a new password.

To reset your password you must complete the following steps.

1. Please reset your password by clicking [here](#).
2. Enter your **user name** – it must be the email address you registered for a provider account with.
3. Enter in your new password.
4. Confirm your new password.
5. Click the **Reset Password** button. A **Reset Password Confirmation** screen will display if the logon was successful.
6. Click the **Continue** button. The **Provider Services Logon** page displays and you are now ready to sign in with the new password.

**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have any questions, please contact your Early Learning Coalition at the number listed above.**

Once the Provider Portal user clicks the **here** link, the following page will display:

**Reset Your Password**

**Account Information**

Please type the user name and new password for your account, and then click **Reset Password**.

**User name**

Enter User Name

**Password (must contain at least 8 characters)**

Enter Password

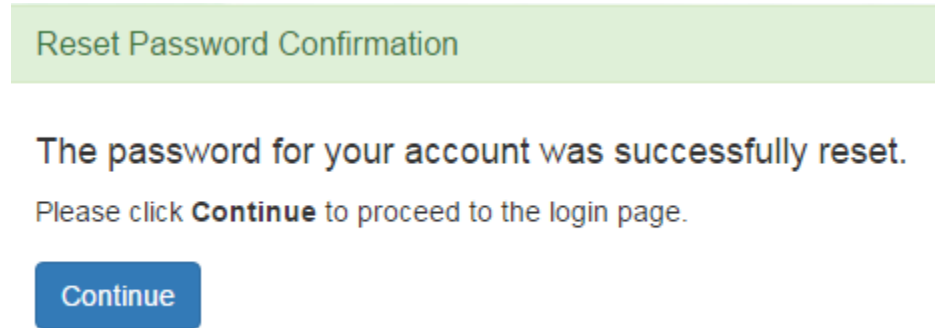
**Confirm password**

Enter Password

**Reset Password**

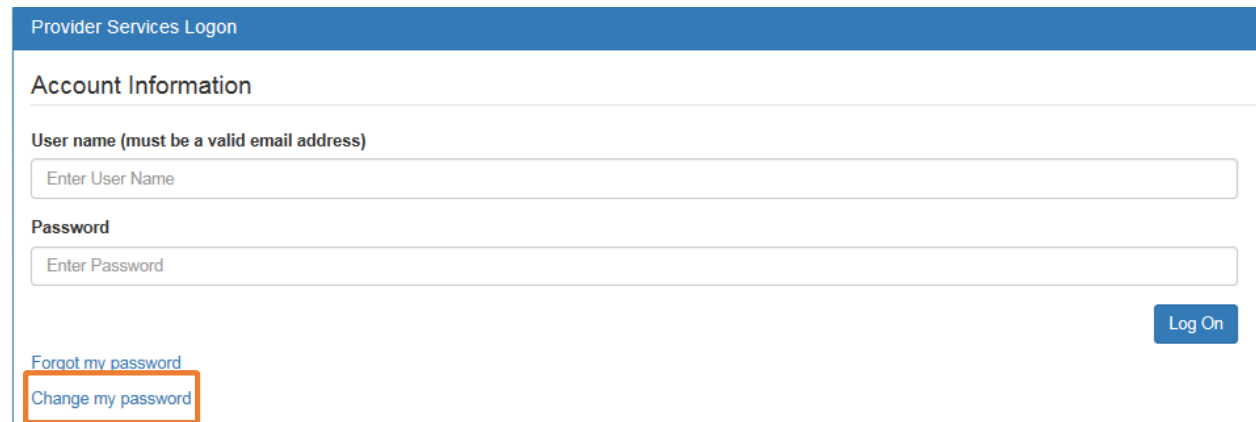
The Provider Portal user must enter the user name (email address), new password and confirm the new password. After entering the required fields, click the **Reset Password** button to continue.

If the Provider Portal user successfully changes the password, the following page will display:

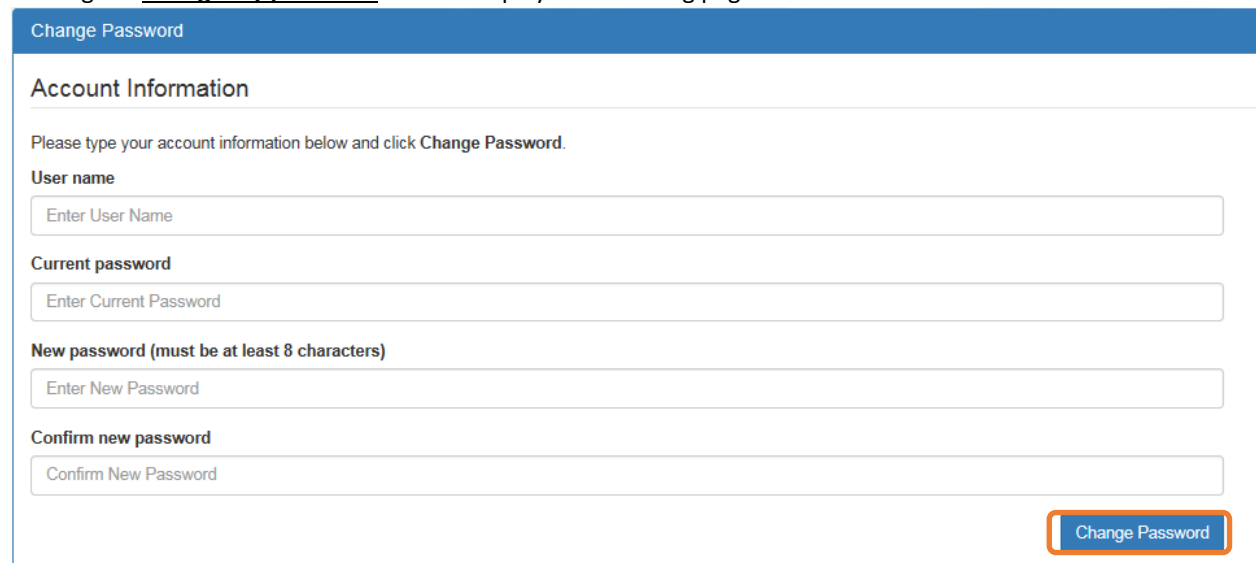


### Change Password Process

A Provider Portal user can change the password at any point by clicking the **Change my password** link.



Clicking the **Change my password** link will display the following page:



The Provider Portal user must enter the User Name (email address), current password, new password and confirm the new password. After entering the required fields, click the **Change Password** button to continue.

If the Provider Portal user successfully changes the password, the following page will display:

### Password Change Completed

The password for your account was successfully changed.

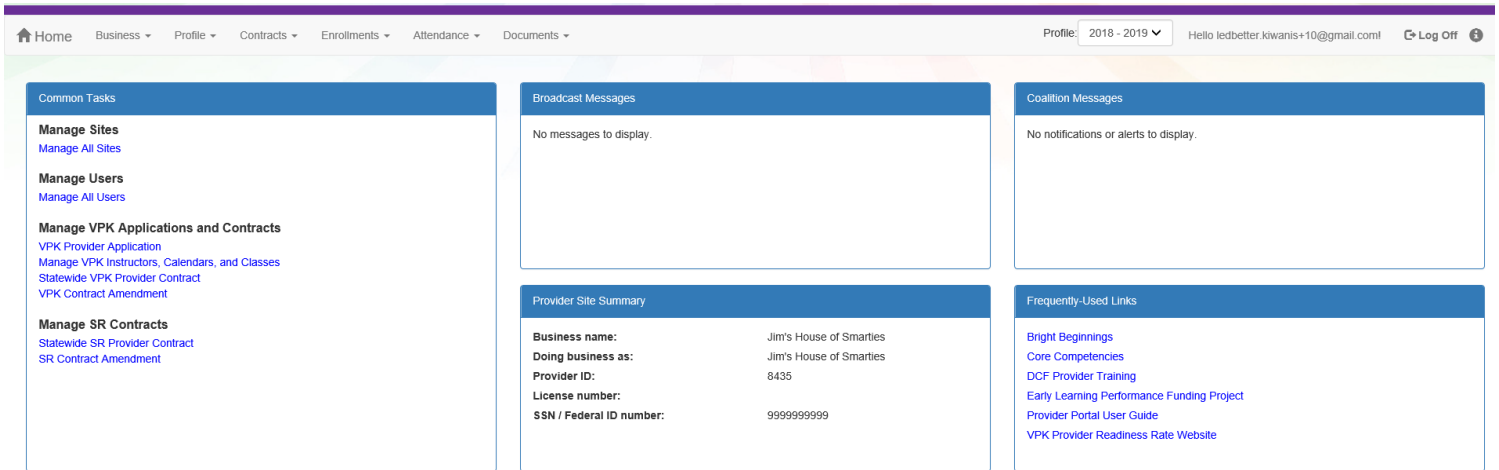
Please click **Continue** to proceed to the login page.

[Continue](#)

---

# Provider Dashboard

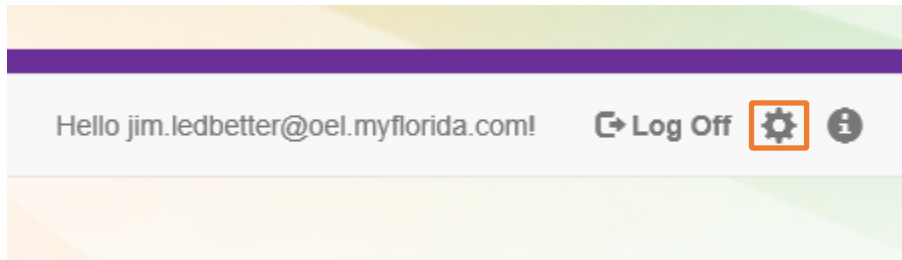
After logging on to the Provider Portal, the following page will display:



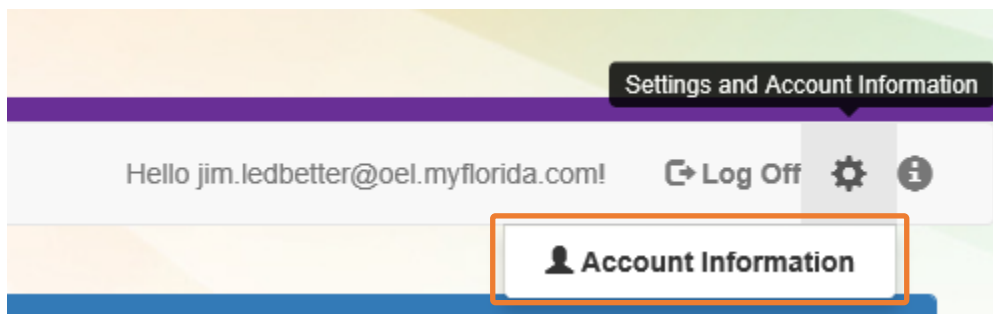
## Update Provider Portal User Account Information

Provider Portal users are able to update their user information – name and phone number – associated with their email address. If the name associated with an email address is blank, the user can add the first and last name. If a name associated with a standardized email address (e.g. [Info@JimsHouseofSmarties.com](mailto:Info@JimsHouseofSmarties.com)) needs to be changed due to a director or other staff leaving, the first and last name can be changed as long as another user has access to that Provider Portal account. If no one has access to the Provider Portal account, contact your local early learning coalition to submit a ticket to the OEL Service Desk.

Click on the gear icon.



The following will display. Click the **Account Information** button.



Enter the additional information and click **Save**.

 Update User Account Information ✕

Please update your account details to continue

**First Name \***

**Middle Name**

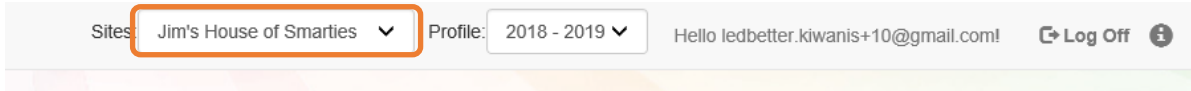
**Last Name \***

**Suffix**

**Phone Number \***

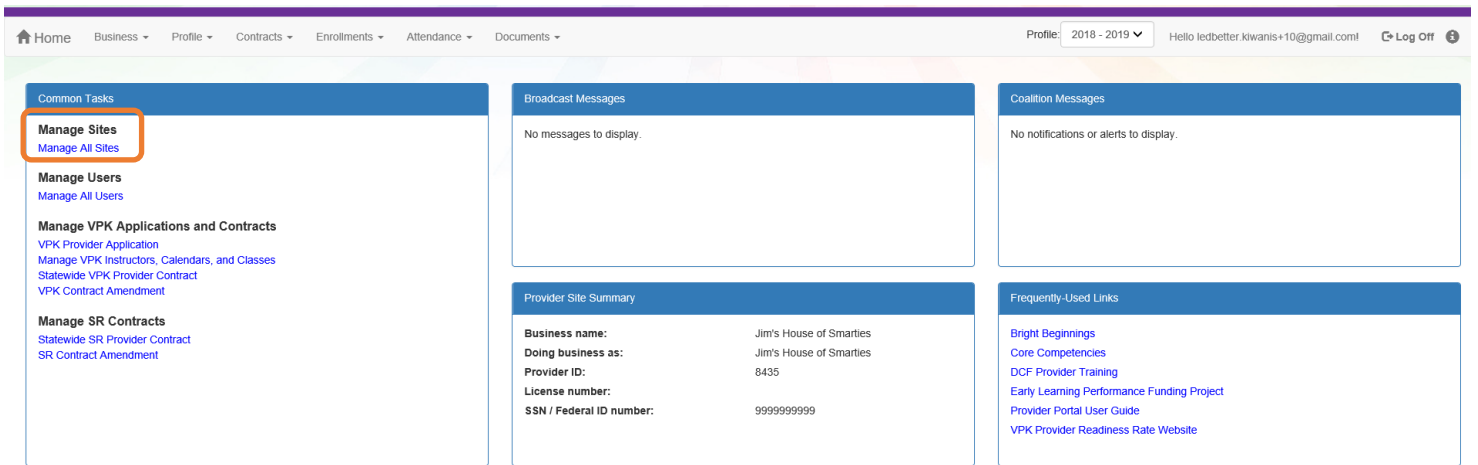
## Multiple Sites

If the Provider Portal user registered a provider site that shares a taxpayer identification number with multiple sites, all of the sites with a shared taxpayer identification number will appear in a dropdown list for that Business Administrator.



## Manage Sites

Providers with multiple site locations can use this feature to manage additional sites. Click the **Manage All Sites** link to add new provider sites. Additional sites can only be added if the sites share the same taxpayer identification number. This function will only be needed if the provider site is not found in the OEL database. Sites that share the same taxpayer identification number will automatically be assigned to the Business Administrator who registered the first provider site with the same taxpayer identification number.



## Manage Sites

Use this page to add new provider sites and to edit or inactivate provider sites for which you have the necessary administrative access.

If a button is disabled, it means that you don't have sufficient access to use that function for that particular provider site. Please see your site administrator if you need additional access.

Location name	License number	Address	Actions
Jim's House of Learning 2	EXEMPT	250 MARRIOTT DR TALLAHASSEE, FL 32301	<input type="button" value="Edit"/> <input type="button" value="Manage Users"/>



After clicking the **Add Site** button, the following message will display:

### Add New Site

To add a new site for your business, first type the license, registration, or exemption number of the new site, and then click Verify License to verify that the license number is available for use with the system.

**License/Registration/Exemption number, or EXEMPT\***

Verify License

Save

Cancel

If the new provider site matches, the location information will be pre-populated.

### Edit Site

**License/Registration/Exemption number, or EXEMPT\***

**Legal status\***

**Doing Business As (DBA) name\***

**Provider type\***

**Address line 1\***

**Address line 2**

**City\***

**State**

**Zip code\***

**County of physical location\***

Save

Cancel

If the new provider site does not match, the location information must be entered by the Provider Portal user.

### Add New Site

To add a new site for your business, first type the license, registration, or exemption number of the new site, and then click Verify License to verify that the license number is available for use with the system.

License/Registration/Exemption number, or EXEMPT\*

Legal status\*

Doing Business As (DBA) name\*

Provider type\*

Address line 1\*

Address line 2

City\*


State

Zip code\*

County of physical location\*

After clicking the **Register** button, the following message may display:

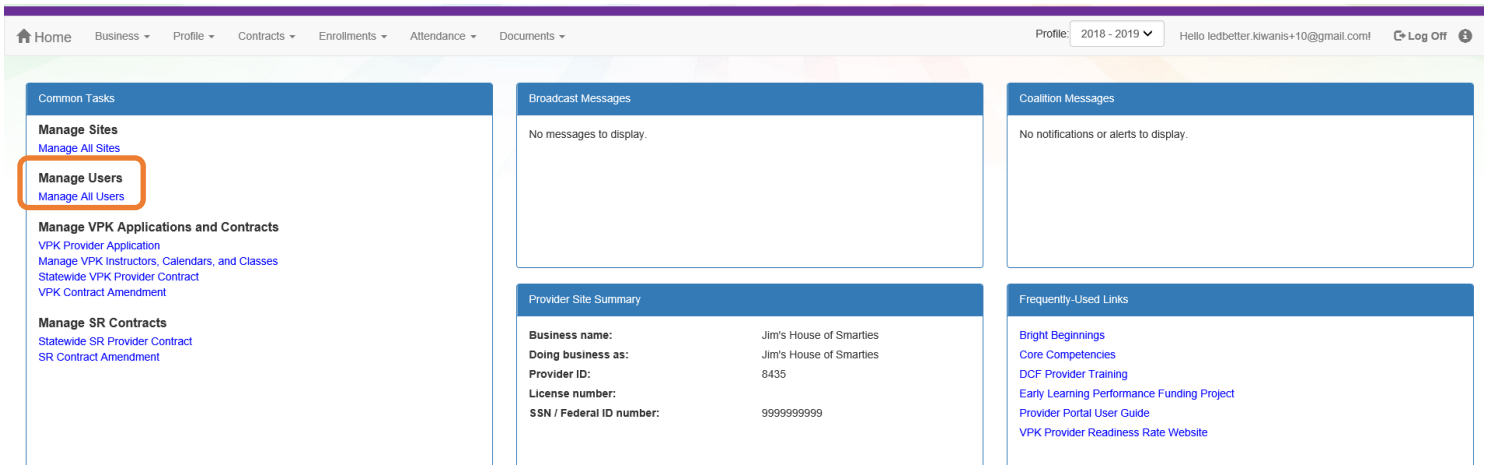
## Address Verification ✕

 USPS standardized address is **250 MARRIOTT DR TALLAHASSEE FL 32399-6573**  
Would you like to use this address instead of entered address?

Click the **Yes** button to accept the standardized United States Postal Service address. Click the **No** button to go back to the previous screen to re-enter the address information.

## Manage Users

Click the **Manage All Users** link to edit, add, and inactivate provider site users.



The screenshot shows a dashboard with a navigation bar at the top containing: Home, Business, Profile, Contracts, Enrollments, Attendance, Documents, Profile (2018 - 2019), Hello ledbetter.kwanis+10@gmail.com, and Log Off. The main content area is divided into several sections:

- Common Tasks:** Contains links for Manage Sites (Manage All Sites), **Manage Users** (Manage All Users), Manage VPK Applications and Contracts (VPK Provider Application, Manage VPK Instructors, Calendars, and Classes, Statewide VPK Provider Contract, VPK Contract Amendment), and Manage SR Contracts (Statewide SR Provider Contract, SR Contract Amendment).
- Broadcast Messages:** No messages to display.
- Coalition Messages:** No notifications or alerts to display.
- Provider Site Summary:** Lists details for Jim's House of Smarties: Business name, Doing business as, Provider ID (8435), License number, and SSN / Federal ID number (999999999).
- Frequently-Used Links:** Lists links such as Bright Beginnings, Core Competencies, DCF Provider Training, Early Learning Performance Funding Project, Provider Portal User Guide, and VPK Provider Readiness Rate Website.

To edit the role of a Provider Portal user, click the **Edit** button.

## Manage All Users

Use this page to add, edit, and inactivate users of any of the provider sites for which you have the necessary administrative access.

If a button is disabled, it means that you don't have sufficient access to use that function for that particular provider site. Please see your site administrator if you need additional access.

Jim's House of Learning 2			
User name	Role	Name	Actions
oeldemonstration+3@gmail.com	Business Administrator	Jim Ledbetter	<b>Edit</b> Inactivate

### Provider User Roles:

- Business Administrator – Able to edit the provider profile and principal business information that is shared among associated provider sites; able to add provider sites and users; submit profiles and profile updates; and create contracts. This role would typically be assigned to an owner.
- Site Administrator – Able to edit the provider profile associated to their site add provider users for a site, but cannot create a new site. This role would typically be assigned to a principal or director.
- User – Able to perform administrative tasks based on permissions granted by the Business Administrator or Site Administrator. This role would typically be assigned to teachers and aides.

After changing the role, click the **Save** button to continue.

### Edit User Permissions

Make the desired changes to the user's role and permissions, and then click Save.

Role \*

Business Administrator
Site Administrator
User

To add a user, click the **Add User** button.

## Manage All Users

Use this page to add, edit, and inactivate users of any of the provider sites for which you have the necessary administrative access.

If a button is disabled, it means that you don't have sufficient access to use that function for that particular provider site. Please see your site administrator if you need additional access.

Jim's House of Learning 2			
User name	Role	Name	Actions
oeldemonstration+3@gmail.com	Business Administrator	Jim Ledbetter	<input type="button" value="Edit"/> <input type="button" value="Inactivate"/>

### Add New User

To add a new user to your site, first type the user name (email address) of the new user, and then click Check User Name to see if the user is already registered with the system.

User name\*

In the user name field, the Provider Portal user will enter the email address of the new user. If the user already has an account in the Provider Portal, the user role must be selected. Click the **Save** button to continue.

### Add New User

To add a new user to your site, first type the user name (email address) of the new user, and then click Check User Name to see if the user is already registered with the system.

User name\*

The specified user account already exists in the system, so no further account information is needed. Select the role and permissions for the new user, and then click Save.

Role\*

  
Site Administrator  
User

In the user name field, the Provider Portal user will enter the email address of the new user. If the user does not exist in the system, the user's information and role must be entered. Click the **Save** button to continue.

## Add New User

To add a new user to your site, first type the user name (email address) of the new user, and then click Check User Name to see if the user is already registered with the system.

**User name \***

The specified user account does not yet exist in the system. Please complete the form below, and then click Save.

**Password \***

**Confirm password \***

**First name \***

**Middle name**

**Last name \***

**Role \***

Business Administrator  
Site Administrator  
User

Once the new user has been added, an email will be sent to the new user by **DONOTREPLY@oel.myflorida.com**.

Hello Jamie Ledbetter,

You are receiving this message because you have been given permission to access Jim's House of Learning 2 with your user account in Florida's statewide early learning Provider Portal.

You may now log on to the Provider Portal with your user name and password to get started.

If you do not have your current user name or password, contact Jim Ledbetter at [oeldemonstration+3@gmail.com](mailto:oeldemonstration+3@gmail.com) for your log in information.

ELC of the Big Bend Region  
(866) 973-9030  
<http://www.elcbigbend.org/>

**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have any questions, please contact your Early Learning Coalition at the number listed above.**

The User role has a set of permissions that can be individualized for each User. Each option is unchecked by default and must be checked to add to the User. Click the **Save** button to continue.

## Edit User Permissions

Make the desired changes to the user's role and permissions, and then click Save.

Role\*

### Permissions

<input checked="" type="checkbox"/>	Attach Profile Documents
<input checked="" type="checkbox"/>	Create Banking Information
<input checked="" type="checkbox"/>	Create Calendar
<input checked="" type="checkbox"/>	Create Profile
<input checked="" type="checkbox"/>	Create SR Contract
<input checked="" type="checkbox"/>	Create VPK Contract
<input checked="" type="checkbox"/>	Edit Banking Information
<input checked="" type="checkbox"/>	Edit Calendar
<input checked="" type="checkbox"/>	Edit Profile
<input checked="" type="checkbox"/>	Edit Site
<input checked="" type="checkbox"/>	Edit SR Contract
<input checked="" type="checkbox"/>	Edit VPK Contract
<input checked="" type="checkbox"/>	Manage ASQ
<input checked="" type="checkbox"/>	Manage Document Library
<input checked="" type="checkbox"/>	Manage Messages and Notifications
<input checked="" type="checkbox"/>	Manage Other
<input checked="" type="checkbox"/>	Modify and Submit SR Attendance Rosters
<input checked="" type="checkbox"/>	Modify and Submit VPK Attendance Rosters
<input checked="" type="checkbox"/>	Reports
<input checked="" type="checkbox"/>	Review Attendance Rosters

To inactive a user, which will remove the user from the site, click the **Inactivate** button.

## Manage All Users

Use this page to add, edit, and inactivate users of any of the provider sites for which you have the necessary administrative access.  
If a button is disabled, it means that you don't have sufficient access to use that function for that particular provider site. Please see your site administrator if you need additional access.

Jim's House of Learning 2			
User name	Role	Name	Actions
oeldemonstration+3@gmail.com	Business Administrator	Jim Ledbetter	<a href="#">Edit</a> <a href="#">Inactivate</a>

[Add User](#)

If the Provider Portal user discovers that an email address has an error after it has been entered, the user can add the correct email address by clicking the **Add User** button, entering the required information, and then click the **Save** button. Then, the user will click the **Inactivate** button for the email address which has the incorrect email address. For example, from the above Manage All Users screen, if the Business Administrator's email address was incorrectly entered as oeldemonstation@gamaial.com, the process would be to click the **Add User** button and create oeldemonstration+3@gmail.com, click **Save**, and then click **Inactivate** for oeldemonstation@gamaial.com. It is important to create the correct email address first before inactivating the incorrect email address.

## Broadcast Messages (not yet available)

The Broadcast Messages section of the Provider Dashboard will display all messages sent by the local early learning coalition to all providers in the coalition service area. Click the message title to see the full text of the message.

The screenshot shows the Provider Dashboard interface. At the top, there is a navigation bar with a home icon and menu items: Home, Business, Profile, Contracts, Enrollments, Attendance, and Documents. On the right side of the navigation bar, there is a profile dropdown set to '2018 - 2019', a user name 'Hello ledbetter.kiwanis+10@gmail.com', and a 'Log Off' button. The main content area is divided into several sections:

- Common Tasks:** Contains links for 'Manage Sites' (Manage All Sites), 'Manage Users' (Manage All Users), 'Manage VPK Applications and Contracts' (VPK Provider Application, Manage VPK Instructors, Calendars, and Classes, Statewide VPK Provider Contract, VPK Contract Amendment), and 'Manage SR Contracts' (Statewide SR Provider Contract, SR Contract Amendment).
- Broadcast Messages:** A section with a blue header and a white body containing the text 'No messages to display.' This section is highlighted with an orange border.
- Coalition Messages:** A section with a blue header and a white body containing the text 'No notifications or alerts to display.'
- Provider Info Summary:** A section with a blue header and a white body containing the following information:
  - Business name: Jim's House of Smarties
  - Doing business as: Jim's House of Smarties
  - Provider ID: 8435
  - License number:
  - SSN / Federal ID number: 999999999
- Frequently-Used Links:** A section with a blue header and a white body containing links for 'Bright Beginnings', 'Core Competencies', 'DCF Provider Training', 'Early Learning Performance Funding Project', 'Provider Portal User Guide', and 'VPK Provider Readiness Rate Website'.



## Coalition Messages

The Coalition Messages section of the Provider Dashboard displays messages sent by the local early learning coalition to a specific provider. This is a one-way communication; the provider cannot email the coalition directly from the portal. Click the message title to see the full text of the message.

The screenshot shows the Provider Dashboard interface. The top navigation bar includes Home, Business, Profile, Contracts, Enrollments, Attendance, and Documents. The user profile is set to 2018 - 2019 and the email is Hello ledbetter.kiwanis+10@gmail.com. The main content area is divided into several sections: Common Tasks, Broadcast Messages, Coalition Messages, Provider Site Summary, and Frequently-Used Links. The Coalition Messages section is highlighted with an orange box and contains the text "No notifications or alerts to display." The Provider Site Summary section displays the following information:

<b>Business name:</b>	Jim's House of Smarties
<b>Doing business as:</b>	Jim's House of Smarties
<b>Provider ID:</b>	8435
<b>License number:</b>	
<b>SSN / Federal ID number:</b>	999999999

The Frequently-Used Links section includes links for Bright Beginnings, Core Competencies, DCF Provider Training, Early Learning Performance Funding Project, Provider Portal User Guide, and VPK Provider Readiness Rate Website.

## Frequently Used Links

The Frequently Used Links section of the Provider Dashboard has links to web pages with information about statewide provider requirements, training and services.

The screenshot shows the Provider Dashboard interface, similar to the previous one. The top navigation bar and user profile information are the same. The main content area is divided into several sections: Common Tasks, Broadcast Messages, Coalition Messages, Provider Site Summary, and Frequently-Used Links. The Frequently-Used Links section is highlighted with an orange box and contains the following links:

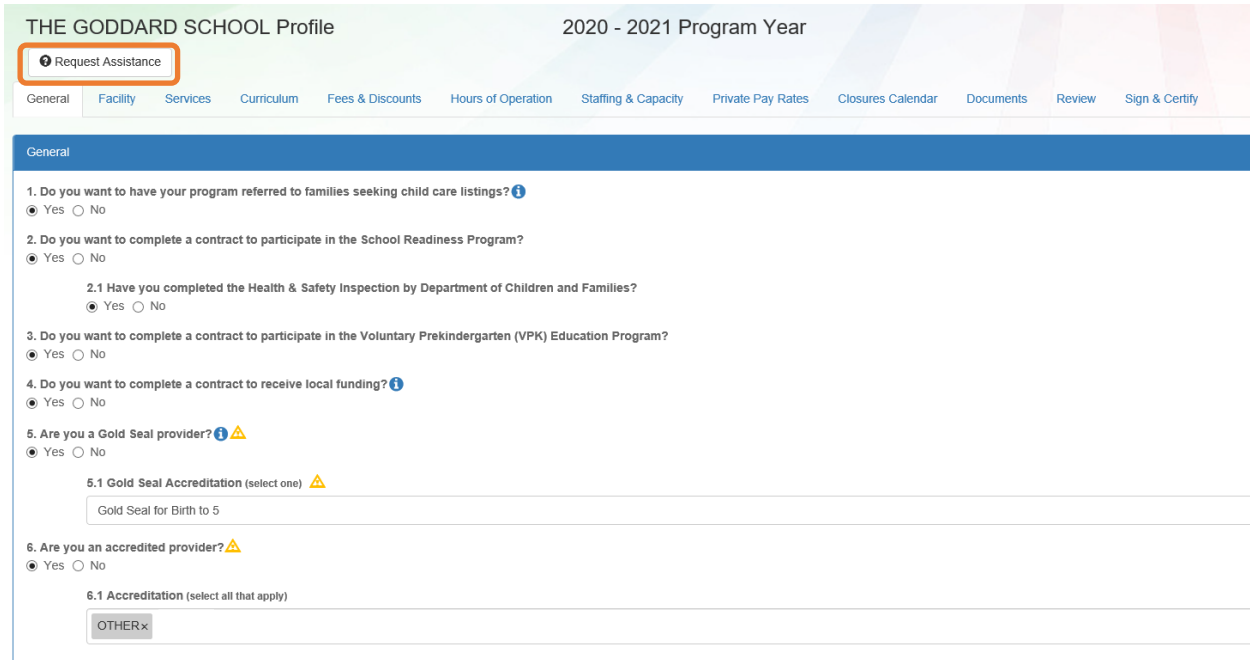
- Bright Beginnings
- Core Competencies
- DCF Provider Training
- Early Learning Performance Funding Project
- Provider Portal User Guide
- VPK Provider Readiness Rate Website

## Completing the Provider Profile

After registering as a provider, the next step is to complete the Provider Profile.

### Request Assistance

If a Provider Portal user needs assistance filling out any information in the Provider Profile, click the **Request Assistance** button.



THE GODDARD SCHOOL Profile 2020 - 2021 Program Year

**Request Assistance**

General Facility Services Curriculum Fees & Discounts Hours of Operation Staffing & Capacity Private Pay Rates Closures Calendar Documents Review Sign & Certify

General

1. Do you want to have your program referred to families seeking child care listings? **i**  
 Yes  No

2. Do you want to complete a contract to participate in the School Readiness Program?  
 Yes  No

2.1 Have you completed the Health & Safety Inspection by Department of Children and Families?  
 Yes  No

3. Do you want to complete a contract to participate in the Voluntary Prekindergarten (VPK) Education Program?  
 Yes  No

4. Do you want to complete a contract to receive local funding? **i**  
 Yes  No

5. Are you a Gold Seal provider? **i** **!**  
 Yes  No

5.1 Gold Seal Accreditation (select one) **!**

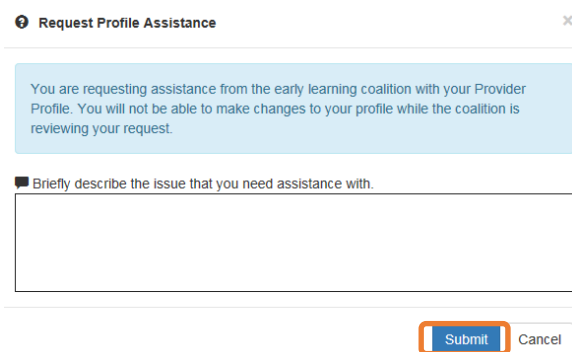
Gold Seal for Birth to 5

6. Are you an accredited provider? **!**  
 Yes  No

6.1 Accreditation (select all that apply)

OTHERx

Then, complete the field, briefly describing the need for assistance. Click the **Submit** button to send the request.



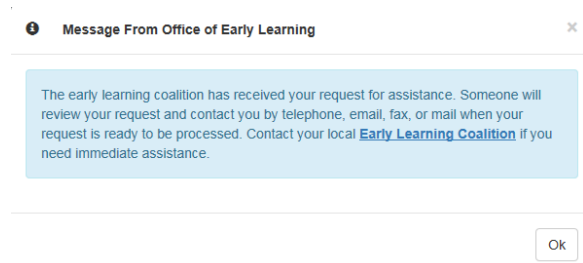
**Request Profile Assistance** x

You are requesting assistance from the early learning coalition with your Provider Profile. You will not be able to make changes to your profile while the coalition is reviewing your request.

Briefly describe the issue that you need assistance with.

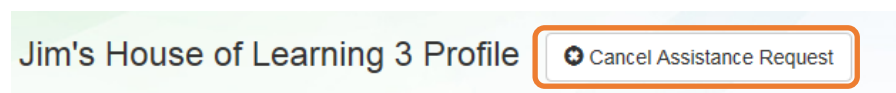
**Submit** Cancel

After clicking **Submit**, the following message will display:

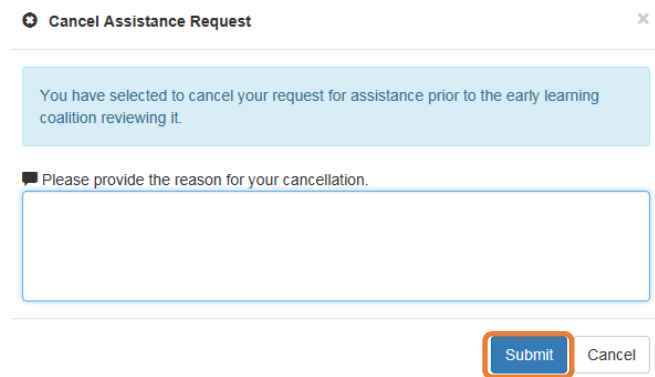


The Provider Portal user will not be able to edit the profile once the request for assistance is submitted; however, coalition staff will be able to edit information in a profile while providing assistance to a Provider Portal user.

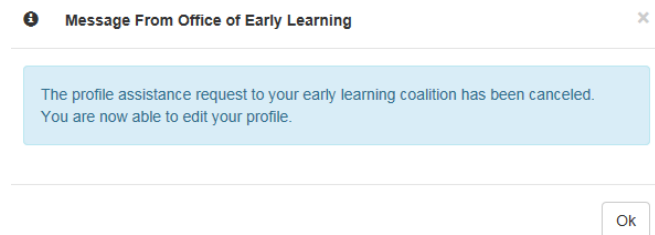
The request for assistance can be cancelled by the Provider Portal user by clicking the **Cancel Assistance Request** button.



If a Provider Portal user cancels the assistance request, the following message will display and the user will complete the field, briefly describing the reason for cancelling the request. Click the **Submit** button to continue.





After cancelling the request, the following message will display:



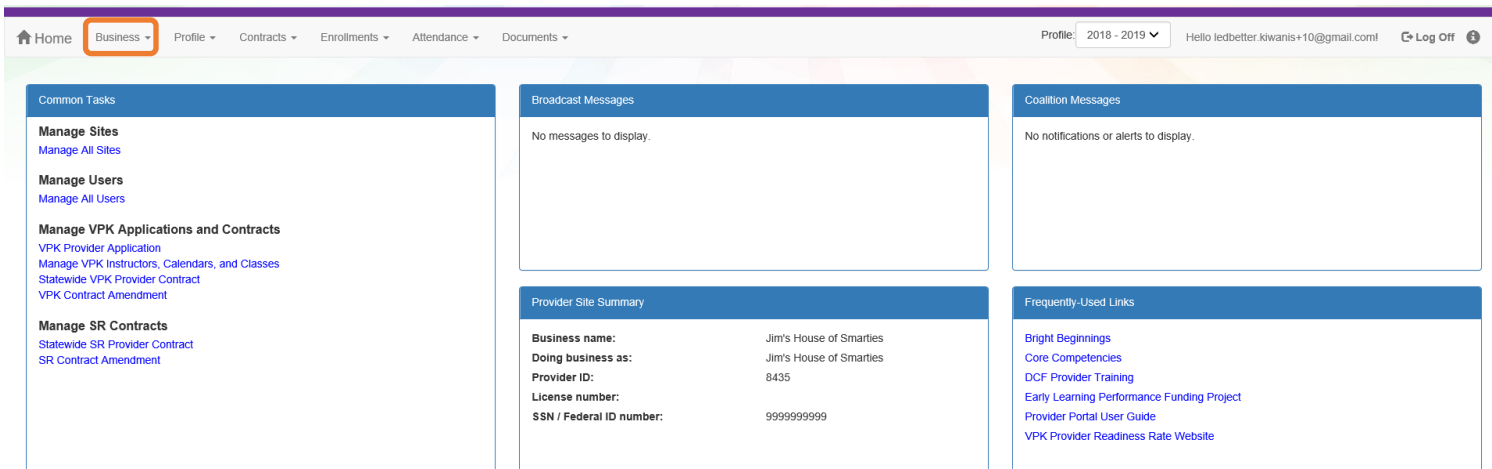
## Business

The Business Information page collects business information about the provider, including business name and address information, and it is shared among additional sites (if any). Only a Business Administrator may edit the information on this page.

**NOTE:** This information was previously captured in the Business tab of the provider profile. Although the Business Information page is now separated from the provider profile, it must be completed before the profile may be submitted.

Tool tips, indicated by the  symbol, are available to provide useful information to Provider Portal users about specific terms in the Provider Profile. Click the  to see the message.

To complete the Business Info page, click the **Business** dropdown menu from the Provider Dashboard.

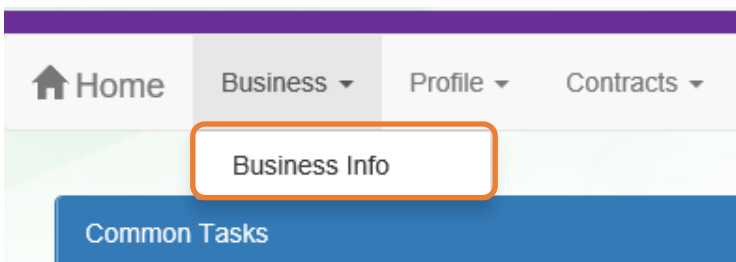


The screenshot shows the Provider Dashboard interface. At the top, there is a navigation bar with a home icon and several dropdown menus: Home, Business (highlighted with an orange box), Profile, Contracts, Enrollments, Attendance, and Documents. On the right side of the navigation bar, there is a 'Profile:' dropdown set to '2018 - 2019', a user name 'Hello ledbetter.kiwanis+10@gmail.com', and a 'Log Off' button. Below the navigation bar, the dashboard is divided into several sections:

- Common Tasks:** Contains links for 'Manage Sites' (Manage All Sites), 'Manage Users' (Manage All Users), 'Manage VPK Applications and Contracts' (VPK Provider Application, Manage VPK Instructors, Calendars, and Classes, Statewide VPK Provider Contract, VPK Contract Amendment), and 'Manage SR Contracts' (Statewide SR Provider Contract, SR Contract Amendment).
- Broadcast Messages:** Displays 'No messages to display.'
- Coalition Messages:** Displays 'No notifications or alerts to display.'
- Provider Site Summary:** A table with the following data:

Business name:	Jim's House of Smarties
Doing business as:	Jim's House of Smarties
Provider ID:	8435
License number:	
SSN / Federal ID number:	999999999
- Frequently-Used Links:** Contains links for 'Bright Beginnings', 'Core Competencies', 'DCF Provider Training', 'Early Learning Performance Funding Project', 'Provider Portal User Guide', and 'VPK Provider Readiness Rate Website'.

Then, click **Business Info**.



The screenshot shows the Provider Dashboard interface with the 'Business' dropdown menu expanded. The 'Business Info' option is highlighted with an orange box. Below the navigation bar, the 'Common Tasks' section is visible.

Business Information

1. Business Name Associated with Your Taxpayer Identification Number <sup>\*</sup> ⓘ

Jim's House of Learning 3

2. Taxpayer Identification Number <sup>\*</sup> ⓘ

888888888

3. Owner Information ⓘ

Owner Name <sup>\*</sup>

Jim Ledbetter

Owner Telephone Number <sup>\*</sup>

(555) 555-5555

Owner Email Address <sup>\*</sup>

fake@foo.com

Owner Phone Type <sup>\*</sup>

Mobile Phone

4. Owner's Designee or Contact Person Information ⓘ

Designee/Contact Name <sup>\*</sup>

Jim Ledbetter

Designee/Contact Telephone Number <sup>\*</sup>

(555) 555-5555

Designee/Contact Email Address <sup>\*</sup>

fake@foo.com

Designee/Contact Phone Type <sup>\*</sup>

Unknown

5. Business Ownership Type <sup>\*</sup> ⓘ

Corporation

6. Physical Address Information ⓘ

Address Line 1 <sup>\*</sup>

250 MARRIOTT DR

Address Line 2

City <sup>\*</sup>

TALLAHASSEE

State <sup>\*</sup>

FL

Zip Code <sup>\*</sup>

32301

7. Mailing Address Information ⓘ

Mailing address is the same as the principal address.

Address Line 1 <sup>\*</sup>

250 MARRIOTT DR

*\* Altering this address may trigger USPS verification*

Address Line 2

City <sup>\*</sup>

TALLAHASSEE

State <sup>\*</sup>

FL

Zip Code <sup>\*</sup>

32301

8. Payment Mailing Address Information ⓘ

Payment address is the same as the mailing address.

Address Line 1 <sup>\*</sup>

250 MARRIOTT DR

*\* Altering this address may trigger USPS verification*

Address Line 2

City <sup>\*</sup>

TALLAHASSEE

State <sup>\*</sup>

FL

Zip Code <sup>\*</sup>



32301

Cancel

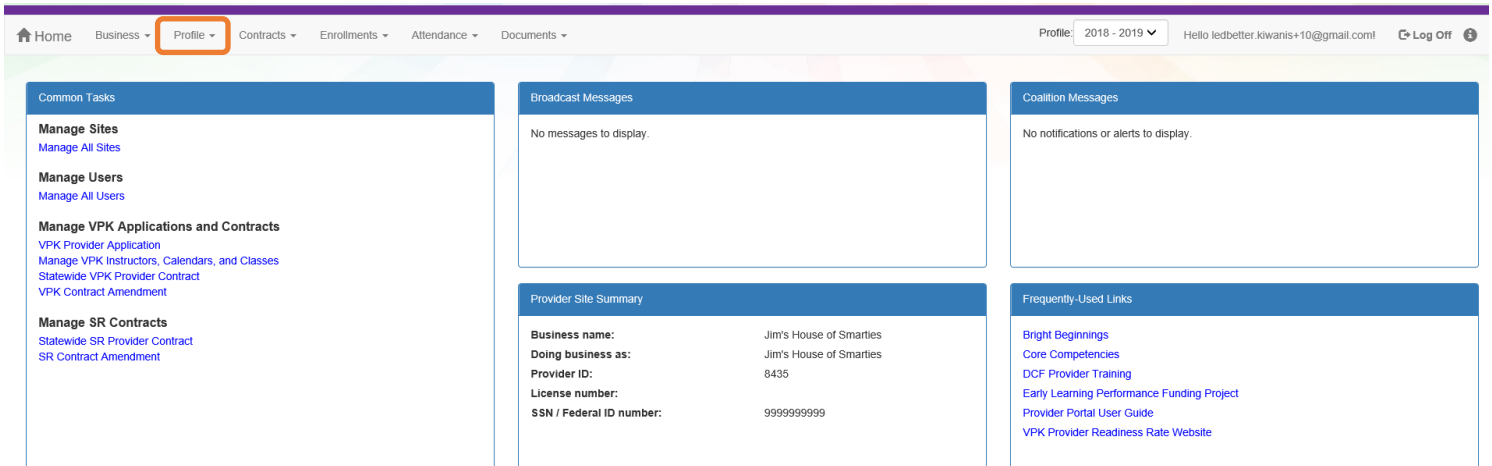
Save

## Profile

A Provider Portal user must fill out all information in each tab, and click the **Next** button to continue filling out the provider profile information. Click the **Back** button to return to the previous tab.

Tool tips, indicated by the  symbol, are available to provide useful information to Provider Portal users about specific terms in the Provider Profile. Click the  to see the message.

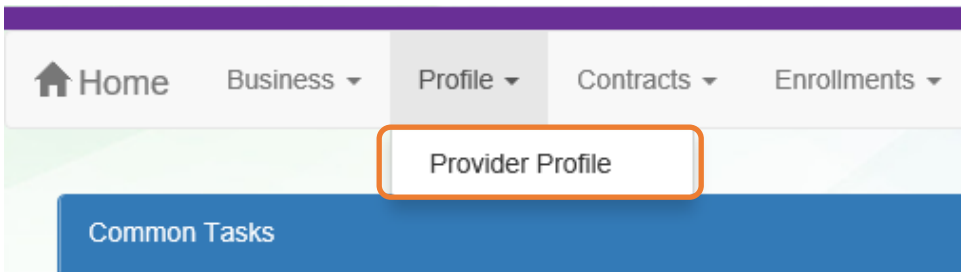
To complete the Provider Profile, click the **Profile** dropdown menu from the Provider Dashboard.



The screenshot shows the Provider Portal dashboard. The navigation bar at the top includes Home, Business, Profile (highlighted with an orange box), Contracts, Enrollments, Attendance, and Documents. The Profile dropdown menu is open, showing options: Manage Sites, Manage Users, Manage VPK Applications and Contracts, and Manage SR Contracts. The main content area is divided into four panels: Common Tasks, Broadcast Messages, Coalition Messages, and Frequently-Used Links. The Provider Site Summary panel displays the following information:

Business name:	Jim's House of Smarties
Doing business as:	Jim's House of Smarties
Provider ID:	8435
License number:	
SSN / Federal ID number:	999999999

Then, click **Provider Profile**.

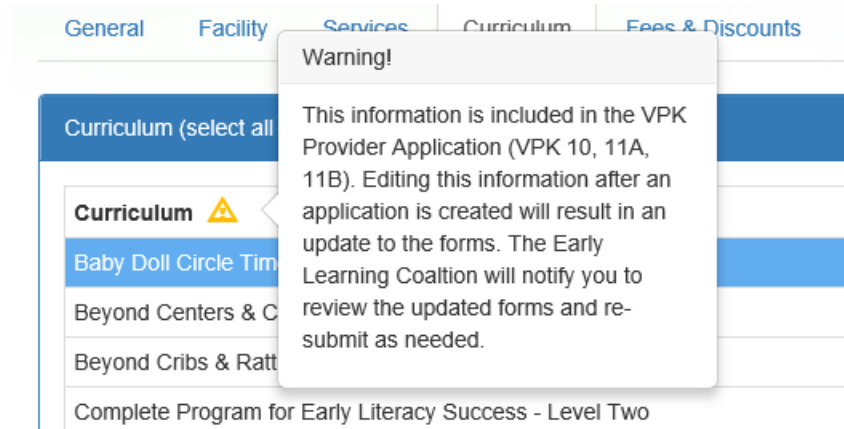


This close-up shows the Profile dropdown menu. The 'Profile' tab is selected, and the 'Provider Profile' option is highlighted with an orange box. Below the dropdown, the 'Common Tasks' section is visible.

## Yellow Warning Symbols

Yellow warning symbols will appear on certain fields on the following tabs: General, Facility, Services, Curriculum, Staffing & Capacity, and Documents.

If the Provider Portal user hovers over the yellow warning symbol, the following message will display.



If a change is made, the coalition will review the change and change the profile status to **Incomplete** to allow the Provider Portal user to re-submit the VPK-APP. The user will receive the following email from **DONOTREPLY@OEL.myflorida.com**.

From: <[OELSystemTest@oel.myflorida.com](mailto:OELSystemTest@oel.myflorida.com)>  
Date: Wed, Aug 16, 2017 at 12:06 PM  
Subject: Signature Required - VPK Provider Application Updated  
To: [alatham77@gmail.com](mailto:alatham77@gmail.com)  
Cc: [ME@nowhere.com](mailto:ME@nowhere.com)

Hello,

The VPK Provider Application (VPK 10,11A, 11B) forms have been updated for Maggie Mae Daycare. Your review and signature is required. Please log on the Provider Portal and go to the Contracts menu, and choose Manage Contracts. On this page, locate your VPK-APP and click Edit. Review the VPK Provider Application information and submit your signature on the Certify and Submit tab.

Please review and submit your signature as quickly as possible.

Thank you,

ELC of the Big Bend Region  
(866) 973-9030  
<http://www.elcbigbend.org/>

Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have questions, please contact your [early learning coalition](#).

## Step 1 – General

The General tab collects basic information about the provider, including provider types and whether or not there is interest in contracting with the early learning coalition to provide School Readiness or Voluntary Prekindergarten (VPK) Education services.

### General

1. Do you want to have your program referred to families seeking child care listings? 

Yes  No

2. Do you want to complete a contract to participate in the School Readiness Program?

Yes  No

2.1 Have you completed the Health & Safety Inspection by Department of Children and Families?

Yes  No

3. Do you want to complete a contract to participate in the Voluntary Prekindergarten (VPK) Education Program?

Yes  No

4. Do you want to complete a contract to receive local funding? 

Yes  No

5. Are you a Gold Seal provider?  

Yes  No

5.1 Gold Seal Accreditation (select one) 

Gold Seal for Birth to 5

6. Are you an accredited provider? 

Yes  No

6.1 Accreditation (select all that apply)

OTHER x



## Step 2 – Facility

The Facility tab collects contact information for the provider. The Provider Portal user is required to enter contact information for staff responsible for different aspects of the business. If the staff person is an Authorized Contract Representative or VPK Authorized Contract Representative, click the checkbox below each section (Director, VPK Director, etc.).

**NOTE:** If the provider is certified by the U.S. Department of Defense and is operating on a military installation, an additional question will display after question 8, but only if the provider meets one of the following conditions:

6. Legal Status	7. Exemption Reason	8. Provider Type
Licensed	N/A	Center
Licensed	N/A	Family Child Care Home
Licensed	N/A	Large Family Child Care Home
Registered	N/A	Family Child Care Home
Exempt	Military	Center
Exempt	Military	Family Child Care Home
Exempt	Military	Large Family Child Care Home

Facility

1. Doing Business as Name (DBA)

2. Contact

Telephone Number\*  Phone Type\*

Fax Number  Email Address\*

3. Physical Address of Facility

Address Line 1\*  Address Line 2

City\*  State\*  Zip Code\*

County\*

4. Director

Director Name\*  Director Email\*

Director Telephone Number\*  Director Phone Type\*

Is Authorized Contract Rep

5. VPK Director

VPK Director information is the same as the Director information.

VPK Director Name  VPK Director Email

VPK Director Telephone Number  VPK Director Phone Type

Is VPK Authorized Contract Rep

6. Legal Status

7. Exemption Details

Exempt Number\*  Expiration Date

Exemption Reason\*

8. Provider Type\*

Are you an accredited child care program certified by the United States Department of Defense and operating on a military installation? \*  Yes  No

6. Legal Status

7. Exemption Details

Exempt Number\*  Expiration Date

Exemption Reason\*

8. Provider Type\*

Yes  No
 

Military Child Care  
 If you answer 'Yes' to this question, please upload a copy of your U.S. Department of Defense certification to the Documents page.

Additional Facility Contacts

Add New Contact

When the **Add New Contact** button is clicked, the Provider Portal user can create additional provider contacts for the profile.

**Add New Contact**

Contact Type  
[Dropdown]

Name [Text Field]      Email [Text Field]

Primary Telephone Number [Text Field]      Primary Telephone Extension [Text Field]

Primary Phone Type  
[Select Type]

Secondary Telephone Number [Text Field]      Secondary Telephone Extension [Text Field]

Secondary Phone Type  
[Select Type]

Fax [Text Field]

Authorized Contract Rep

[Save] [Cancel]

- Contact Type**
- General Contact Information
  - SR Contact
  - CCRR Contact
  - Assistant Director
  - Facility Director
  - Operations Manager
  - Principal
  - Assistant Principal
  - Extended Day Contact

- Contact Type**
- Before School Contact
  - After School Contact
  - Finance
  - Food & Nutrition
  - Attendance
  - Camp Contact
  - Admissions
  - Enrollment
  - Administrator
- Associate Director
- Other Contact

## Step 3 – Services

The Services tab collects information on the ages of the children in provider care, as well as different provider services.

**Services**

1. Age of Children for which Care is Provided\*

Minimum Age\*  Months  Maximum Age\* Months

2. Programs Offered (select all that apply) ⚠

Before School × Migrant Head Start × Playgroup ×

3. About My Program (select all that apply)\*

Music lessons × Dance × Swim lessons ×

4. Languages Spoken by Staff (select all that apply)\*

English × Spanish × Haitian/Creole ×

5. Other Spoken Languages ⓘ

6. Meals (select all that apply)\*

Morning Snack × Afternoon Snack ×

7. Do you provide transportation services?\*

Yes  No

8. Transportation (select all that apply)

Transportation to/from local school ×

8.1 Transportation to/from Local School

School	Transportation To	Transportation From	
<input type="text" value="Add school"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="button" value="Add"/>
Mickey Mouse	<input type="checkbox"/>	<input type="checkbox"/>	<input type="button" value="Edit"/> <input type="button" value="Remove"/>

9. Do you currently implement a character development program?\*

Yes  No

9.1 Description of Character Development Program (250 characters max)

blah

10. Is your program equipped to care for children with special needs?\*

Yes  No

11. Is your facility wheelchair-accessible?\*

Yes  No

12. Does your program/facility offer therapeutic services to children?\*

Yes  No

13. Do you participate in a quality rating system? ⓘ

Yes  No

14. Affiliation - Not for Profit\*

Yes  No

15. Military Child Care ⓘ

Yes  No

## Step 4 – Curriculum

The Curriculum tab collects information about the provider’s curriculum. A provider may choose multiple curricula from the list. If the provider is a school readiness provider, an approved curriculum must be chosen. If no approved curricula are being used by the provider, the Provider Portal user should select “Other.” If a provider does not see their curricula listed, choose “Other” as the curriculum.

### Curriculum (select all that apply)

Curriculum	Age Range	Edition/Year
Baby Doll Circle Time	Birth - 3	2012
Beyond Centers & Circle Time	3 and 4	2nd edition/2007
Beyond Cribs & Rattles	Birth - 2	1st edition/2005
Complete Program for Early Literacy Success - Level Two	4	1st edition/2012

## Step 5 – Fees & Discounts

The Fees & Discounts tab collects information about fees the provider assesses the parent. The Provider Portal user should enter all applicable fees. All amount fields must have either a dollar amount or zero entered. If a fee is not applicable, the amount entered must be “0.” If there are no family discounts offered, the selection must be “None.”

### Fees and Discounts

1. Fees in Addition to Weekly Rates

Description	Amount	Frequency	Per Child / Per Family
Annual	\$ 75	Monthly	Per Child
Application/Registration	\$ 150	Annual	Per Child
Diapers	\$ 0		
Early Drop Off	\$ 0		
Extended Stay	\$ 0		
Insurance	\$ 0		
Late Payment	\$ 5	Daily	Per Child
Late Pick-Up	\$ 15	Hourly	Per Child
Meals/Snacks	\$ 0		
Returned Check	\$ 25	As needed	Per Family
School Age	\$ 475	Monthly	Per Child
Supplies/Materials	\$ 0		
Waiting List Registration	\$ 0		

2. Family Discounts Offered (select all that apply)

None

3. Other Family Discounts

## Step 6 – Hours of Operation

The Hours of Operation tab collects information on the type of schedules offered for care. The Provider Portal user must click the checkbox next to the desired day of the week before inputting hours of operation for that day. The default hours of operation for each day are 6:00 a.m.– 6:00 p.m. An Enhanced Schedule is available.

### Facility Hours of Operation

#### 1. Enhanced Schedule (select all that apply)

		Open	Close	Total Hours
<div style="border: 1px solid #ccc; padding: 2px;">           24-hour Care         </div> <ul style="list-style-type: none"> <li>Drop in Care</li> <li>Early/Extended Care</li> <li>Emergency/Temporary</li> <li>Evening</li> <li>Full Year</li> <li>Full-time</li> <li>Overnight</li> <li>Part time</li> </ul>				
<input checked="" type="checkbox"/> Tuesday	<input checked="" type="checkbox"/> 24 hours	12:00 AM	11:59 PM	23.98
<input checked="" type="checkbox"/> Wednesday	<input checked="" type="checkbox"/> 24 hours	12:00 AM	11:45 PM	23.75
<input type="checkbox"/> Thursday	<input type="checkbox"/> 24 hours	12:00 AM	12:00 AM	0
<input type="checkbox"/> Friday	<input type="checkbox"/> 24 hours	12:00 AM	12:00 AM	0
<input type="checkbox"/> Saturday	<input type="checkbox"/> 24 hours	12:00 AM	12:00 AM	0

## Step 7 – Staffing & Capacity

The Staffing & Capacity tab collects information on how many children the facility will or can care for. These questions are asked by age group. For each care level, the Provider Portal user should enter the highest number of teachers and children for all classrooms for each care level. This tab does not calculate staff-to-child ratios, but stores staffing and capacity numbers for local early learning coalition review.

**Staff-to-child Ratio** is the number of children that an individual teacher is responsible for. To reflect the actual ratio, the “Teachers in Classroom” column should always be 1. For example, if you have 2 teachers with one class of 20, you should list 1 “Teacher in Classroom” with 10 “Children in Classroom” and a “Group Size” of 20. If you follow the state mandated ratios for a center or facility, please see the example below. You can omit the age groups you do not serve.


**Group Size** is the maximum number of children, by age, that can be in a single classroom at any given time. If you follow the state mandated group sizes for a center or facility, please see the example below. You can omit the age groups you do not serve.

### Staffing and Capacity

#### 1. Staff-to-Child Ratio in Your Program ?

Care Level	Teachers in Classroom	:	Children in Classroom	Group Size <span style="float: right;">?</span>
< 12 Months	<input type="text" value="1"/>	:	<input type="text" value="1"/>	<input type="text" value="1"/>
12 < 24 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
24 < 36 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
36 < 48 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
48 < 60 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
60 < 72 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
In School	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
Special Needs	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
VPK Class	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>

2. Training/Educational Credentials in Your Program

Training/Education Type	Number of Staff 
FCCH 30 HOUR TRAINING	<input type="text" value="1"/>
40/45 HR INTRO CHILD CARE	<input type="text" value="0"/>
AA/AS NONCHILD RELATED	<input type="text" value="0"/>
AA/AS EARLY CHILDHOOD OR RELATED FIELD	<input type="text" value="0"/>
DIRECTOR CREDENTIAL ADV	<input type="text" value="0"/>
DIRECTOR CREDENTIAL LEVEL 1	<input type="text" value="0"/>
DIRECTOR CREDENTIAL LEVEL 2	<input type="text" value="0"/>
BA/BS NONCHILD RELATED	<input type="text" value="0"/>
BA EARLY CHILDHOOD OR RELATED FIELD	<input type="text" value="0"/>
BEHAVIOR OBSERVATION	<input type="text" value="0"/>
DIRECTOR (NON VPK)	<input type="text" value="0"/>
GED/HIGH SCHOOL	<input type="text" value="0"/>
EARLY (EMERGENT) LITERACY	<input type="text" value="0"/>
FCCPC/ECPC/CCAC/CDAE	<input type="text" value="0"/>
MA DEGREE EARLY CHILDHOOD	<input type="text" value="0"/>
MA NONCHILD RELATED	<input type="text" value="0"/>
NATL EARLY CHILDHOOD CERT	<input type="text" value="0"/>
SCHOOL-AGE CREDENTIAL	<input type="text" value="0"/>
VPK DIRECTOR CREDENTIAL	<input type="text" value="0"/>
OTHER- LIST	<input type="text" value="0"/>

### Example: Child Care Center 1

This example uses the state mandated minimum staff-to-child ratios and maximum group sizes permitted for centers.

General Facility Services Curriculum Fees & Discounts Hours of Operation **Staffing & Capacity** Private Pay Rates Closures Calendar

**Staffing and Capacity**

1. Staff-to-Child Ratio in Your Program ⓘ

Care Level	Teachers in Classroom	:	Children in Classroom	Group Size ⓘ
< 12 Months	<input type="text" value="1"/>	:	<input type="text" value="4"/>	<input type="text" value="12"/>
12 < 24 Months	<input type="text" value="1"/>	:	<input type="text" value="6"/>	<input type="text" value="12"/>
24 < 36 Months	<input type="text" value="1"/>	:	<input type="text" value="11"/>	<input type="text" value="22"/>
36 < 48 Months	<input type="text" value="1"/>	:	<input type="text" value="15"/>	<input type="text" value="30"/>
48 < 60 Months	<input type="text" value="1"/>	:	<input type="text" value="20"/>	<input type="text" value="40"/>
60 < 72 Months	<input type="text" value="1"/>	:	<input type="text" value="25"/>	<input type="text" value="40"/>
In School	<input type="text" value="1"/>	:	<input type="text"/>	<input type="text" value="50"/>
Special Needs	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
VPK Class	<input type="text" value="1"/>	:	<input type="text" value="11"/>	<input type="text" value="0"/>

### Example: Child Care Center 2

This example uses more stringent staff-to-child ratios and group sizes that are smaller than the state mandate for centers.

**Staffing and Capacity**

1. Staff-to-Child Ratio in Your Program ⓘ

Care Level	Teachers in Classroom	:	Children in Classroom	Group Size ⓘ
< 12 Months	<input type="text" value="1"/>	:	<input type="text" value="3"/>	<input type="text" value="6"/>
12 < 24 Months	<input type="text" value="1"/>	:	<input type="text" value="5"/>	<input type="text" value="10"/>
24 < 36 Months	<input type="text" value="1"/>	:	<input type="text" value="10"/>	<input type="text" value="10"/>
36 < 48 Months	<input type="text" value="1"/>	:	<input type="text" value="12"/>	<input type="text" value="12"/>
48 < 60 Months	<input type="text" value="1"/>	:	<input type="text" value="20"/>	<input type="text" value="20"/>
60 < 72 Months	<input type="text" value="1"/>	:	<input type="text"/>	<input type="text"/>
In School	<input type="text" value="1"/>	:	<input type="text"/>	<input type="text"/>
Special Needs	<input type="text" value="1"/>	:	<input type="text"/>	<input type="text"/>
VPK Class	<input type="text" value="1"/>	:	<input type="text"/>	<input type="text"/>

For more information on staff-to-child ratios and group sizes for facilities, please visit the [School Readiness Health and Safety Standards Handbook](#).



### Example: Family Child Care Homes 1

A family day care home is allowed to provide care for one of the following groups of children, which includes household children under 13 years of age. Below are examples of how to fill out this table using the state mandated minimum ratios.

\*\*The group size column should never exceed 10 for a family child care home.

This example uses the maximum of four children from birth to 12 months of age.

Staffing and Capacity

1. Staff-to-Child Ratio in Your Program ⓘ

Care Level	Teachers in Classroom	:	Children in Classroom	Group Size ⓘ
< 12 Months	<input type="text" value="1"/>	:	<input type="text" value="4"/>	<input type="text" value="4"/>
12 < 24 Months	<input type="text" value="1"/>	:	<input type="text"/>	<input type="text"/>
24 < 36 Months	<input type="text" value="1"/>	:	<input type="text"/>	<input type="text"/>
36 < 48 Months	<input type="text" value="1"/>	:	<input type="text"/>	<input type="text"/>
48 < 60 Months	<input type="text" value="1"/>	:	<input type="text"/>	<input type="text"/>
60 < 72 Months	<input type="text" value="1"/>	:	<input type="text"/>	<input type="text"/>
In School	<input type="text" value="1"/>	:	<input type="text"/>	<input type="text"/>
Special Needs	<input type="text" value="0"/>	:	<input type="text"/>	<input type="text"/>
VPK Class	<input type="text" value="1"/>	:	<input type="text"/>	<input type="text"/>

### Example: Family Child Care Homes 2

This example uses the maximum of three children from birth to 12 months of age, and other children, for a maximum total of six children.

Staffing and Capacity

1. Staff-to-Child Ratio in Your Program ⓘ

Care Level	Teachers in Classroom	:	Children in Classroom	Group Size ⓘ
< 12 Months	<input type="text" value="1"/>	:	<input type="text" value="3"/>	<input type="text" value="3"/>
12 < 24 Months	<input type="text" value="1"/>	:	<input type="text" value="3"/>	<input type="text" value="3"/>
24 < 36 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
36 < 48 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
48 < 60 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
60 < 72 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
In School	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
Special Needs	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
VPK Class	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>

### Example: Family Child Care Homes 3

This example uses the maximum of six preschool children if all are older than 12 months of age.

#### Staffing and Capacity

##### 1. Staff-to-Child Ratio in Your Program ?

Care Level	Teachers in Classroom	:	Children in Classroom	Group Size <span>?</span>
< 12 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
12 < 24 Months	<input type="text" value="1"/>	:	<input type="text" value="2"/>	<input type="text" value="2"/>
24 < 36 Months	<input type="text" value="1"/>	:	<input type="text" value="2"/>	<input type="text" value="2"/>
36 < 48 Months	<input type="text" value="1"/>	:	<input type="text" value="2"/>	<input type="text" value="2"/>
48 < 60 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
60 < 72 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
In School	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
Special Needs	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
VPK Class	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>

### Example: Family Child Care Homes 4

This example uses the maximum of 10 children if no more than 5 are preschool age and, of those 5, no more than 2 are under 12 months of age.

#### Staffing and Capacity

##### 1. Staff-to-Child Ratio in Your Program ?

Care Level	Teachers in Classroom	:	Children in Classroom	Group Size <span>?</span>
< 12 Months	<input type="text" value="1"/>	:	<input type="text" value="2"/>	<input type="text" value="2"/>
12 < 24 Months	<input type="text" value="1"/>	:	<input type="text" value="2"/>	<input type="text" value="2"/>
24 < 36 Months	<input type="text" value="1"/>	:	<input type="text" value="1"/>	<input type="text" value="1"/>
36 < 48 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
48 < 60 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
60 < 72 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
In School	<input type="text" value="1"/>	:	<input type="text" value="5"/>	<input type="text" value="5"/>
Special Needs	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
VPK Class	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>

### Example: Large Family Child Care Homes 1

A large family child care home is allowed to provide care for one of the following groups of children, which includes household children under 13 years of age.

\*\*The group size column should never exceed 12 for a large family child care home.

This example uses the maximum of 8 children from birth to 24 months of age.

Staffing and Capacity

1. Staff-to-Child Ratio in Your Program ⓘ

Care Level	Teachers in Classroom	:	Children in Classroom	Group Size ⓘ
< 12 Months	<input type="text" value="1"/>	:	<input type="text" value="3"/>	<input type="text" value="3"/>
12 < 24 Months	<input type="text" value="1"/>	:	<input type="text" value="5"/>	<input type="text" value="5"/>
24 < 36 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
36 < 48 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
48 < 60 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
60 < 72 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
In School	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
Special Needs	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
VPK Class	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>

### Example: Large Family Child Care Homes 2

This example uses the maximum of 12 children, with no more than 4 children under 24 months of age.

Staffing and Capacity

1. Staff-to-Child Ratio in Your Program ⓘ

Care Level	Teachers in Classroom	:	Children in Classroom	Group Size ⓘ
< 12 Months	<input type="text" value="1"/>	:	<input type="text" value="1"/>	<input type="text" value="1"/>
12 < 24 Months	<input type="text" value="1"/>	:	<input type="text" value="1"/>	<input type="text" value="1"/>
24 < 36 Months	<input type="text" value="1"/>	:	<input type="text" value="2"/>	<input type="text" value="2"/>
36 < 48 Months	<input type="text" value="1"/>	:	<input type="text" value="4"/>	<input type="text" value="4"/>
48 < 60 Months	<input type="text" value="1"/>	:	<input type="text" value="4"/>	<input type="text" value="4"/>
60 < 72 Months	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
In School	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
Special Needs	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>
VPK Class	<input type="text" value="0"/>	:	<input type="text" value="0"/>	<input type="text" value="0"/>

For more information on staff-to-child ratios and group sizes for family child care homes please visit the [School Readiness Health and Safety Standards Handbook](http://www.floridaearlylearning.com/sites/www/Uploads/files/Statewide%20Initiatives/Health%20and%20Safety/HS%20Handbook%20Facilities%20OEL-SR-6202%20ADA.pdf).  
<http://www.floridaearlylearning.com/sites/www/Uploads/files/Statewide Initiatives/Health and Safety/HS Handbook Facilities OEL-SR-6202 ADA.pdf>

## Step 8 – Private Pay Rates

The Private Pay Rates tab collects information on the provider’s private pay rate based on unit of care and care level. The Provider Portal user must enter in the private pay rates for each “Unit of Care” and “Care Level” offered by the provider. Shaded cells do not permit entry. If care is not provided for that Unit of Care and Care Level, no entry is needed.

Providers that indicate they want to complete a contract to participate in the school readiness program on the General tab will also have a section on the Private Pay Rates tab to enter the Daily Rates for the School Readiness Program. The Provider Portal user may edit the \$0.00 amount for each “Unit of Care” and “Care Level” offered by the provider or click on the **SR Daily Rate Helper** button. The Helper button will automatically calculate the rates based on the Full Time Monthly Rates or Full Time Weekly Rates, and the Part Time Weekly Rates entered in the Private Pay Rates section. The rates are also editable after calculation. These rates will be utilized in the contracting process if the provider enters into a School Readiness contract with an early learning coalition.

**NOTE:** With Release 3.5, School Readiness providers must now answer a question regarding the family’s responsibility to pay the differential between the Approved Reimbursement Rate and the Private Pay Rate.

Private Pay Rates

**Private Pay Rates**

Enter the advertised rates (private pay rates) your program charges in the table. Do not include voucher/subsidy rates, sliding scale rates, employee discounts or any other discounted rates. Only complete the rate type for each age group that you offer.

	Infant	Toddler	2 Year Old	Preschool 3	Preschool 4	Preschool 5	School Age	Special Needs
Full Time Monthly Rate	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Summer Camp Weekly Rate	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Drop-In Daily Rate	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Full Time Weekly Rate	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
Part Time Weekly Rate	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
VPK Full Time Weekly Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0	\$ 0	\$ 0	\$ 0.00	\$ 0
VPK Part Time Weekly Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0	\$ 0	\$ 0	\$ 0.00	\$ 0
School Age After School Weekly Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0	\$ 0	\$ 0	\$ 0
School Age Before School Weekly Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0	\$ 0	\$ 0	\$ 0
School Age - Both Before & After School Weekly Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0	\$ 0	\$ 0	\$ 0

Do you require the parent to pay the differential between the Approved Reimbursement Rate and the Private Pay Rate?  Yes  No

SR Daily Rate Helper

**Daily Rates for School Readiness Program**

Enter the school readiness program daily rates in the table below. These rates will be used for SR contracting purposes and to determine your SR program reimbursement rates. Only complete the rate type for each age group that you offer. You may also use the SR Daily Rate Helper feature to automatically calculate the daily rates based on the Private Pay Rates entered above. The calculations are editable.

	Infant	Toddler	2 Year Old	Preschool 3	Preschool 4	Preschool 5	School Age	Special Needs
SR Full Time Daily Rate	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
SR Part Time Daily Rate	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0	\$ 0
SR School Age - Both Before & After School Daily Rate	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0.00	\$ 0	\$ 0	\$ 0	\$ 0

## Step 9 – Closures Calendar

The Closures Calendar tab collects information on any days the provider will be closed. The Provider Portal user will select all closure days for the provider. Once selected, the date will change from white to blue. The local early learning coalition may define reimbursable holidays for the School Readiness program, which will be shaded gray. When a provider closure date and a coalition-defined reimbursable holiday are the same, the date will be shaded dark blue. A Provider Portal user does not need to include Saturdays and Sundays on the Closures Calendar if services are not provided on those days.

**NOTE:** Actual reimbursable holidays will be selected during the contracting process if the provider enters into a School Readiness contract with an early learning coalition.

Closures Calendar

Using the Calendar below, please indicate (select with your mouse) all days your facility will not be offering care for children.

Available  Selected  ELC Closure  Selected + ELC Closure

2017 - 2018 Program Year

July 2017							August 2017							September 2017							October 2017							
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	
						1			1	2	3	4	5							1	2	1	2	3	4	5	6	7
2	3	4	5	6	7	8	6	7	8	9	10	11	12	3	4	5	6	7	8	9	8	9	10	11	12	13	14	
9	10	11	12	13	14	15	13	14	15	16	17	18	19	10	11	12	13	14	15	16	15	16	17	18	19	20	21	
16	17	18	19	20	21	22	20	21	22	23	24	25	26	17	18	19	20	21	22	23	22	23	24	25	26	27	28	
23	24	25	26	27	28	29	27	28	29	30	31			24	25	26	27	28	29	30	29	30	31					
30	31																											

November 2017							December 2017							January 2018							February 2018								
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa		
			1	2	3	4						1	2			1	2	3	4	5	6						1	2	3
5	6	7	8	9	10	11	3	4	5	6	7	8	9	7	8	9	10	11	12	13	4	5	6	7	8	9	10		
12	13	14	15	16	17	18	10	11	12	13	14	15	16	14	15	16	17	18	19	20	11	12	13	14	15	16	17		
19	20	21	22	23	24	25	17	18	19	20	21	22	23	21	22	23	24	25	26	27	18	19	20	21	22	23	24		
26	27	28	29	30			24	25	26	27	28	29	30	28	29	30	31				25	26	27	28					
							31																						

March 2018							April 2018							May 2018							June 2018						
Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa	Su	Mo	Tu	We	Th	Fr	Sa
				1	2	3	1	2	3	4	5	6	7			1	2	3	4	5						1	2
4	5	6	7	8	9	10	8	9	10	11	12	13	14	6	7	8	9	10	11	12	3	4	5	6	7	8	9
11	12	13	14	15	16	17	15	16	17	18	19	20	21	13	14	15	16	17	18	19	10	11	12	13	14	15	16
18	19	20	21	22	23	24	22	23	24	25	26	27	28	20	21	22	23	24	25	26	17	18	19	20	21	22	23
25	26	27	28	29	30	31	29	30						27	28	29	30	31			24	25	26	27	28	29	30

Back Next

Available  Selected  ELC Closure  Selected + ELC Closure

## Step 10 – Documents

The Documents tab allows the Provider Portal user to upload documents for the local early learning coalition to review. Based on provider answers in the provider profile, the Documents tab will display types of documents that may be uploaded to support a contract to provide School Readiness or VPK services. Users may enter up to five documents for each document type. Documents uploaded in this tab will also populate in the Document Library and will be utilized during the contracting process.

### Supporting Documents

#### Certificate of Accreditation

Upload Document...

#### Certificate of Licensure

Upload Document...

#### Private Child Care Pay Rates

Upload Document...

#### IRS Form W-9

Upload Document...

## Step 11 – Review

After reviewing the information for each section, the Provider Portal user must click the **Next** button to continue.

Click the **+** to expand and the **-** to collapse each section below. Click the **Button** to navigate back to that section.

Review - Let's make sure we have all your information.

Click the headers or the **+** to expand and the **-** to collapse each section below. Click the **Button** to navigate to that section.

**+** Business

**-** General

1. Do you want to have your program referred to families seeking child care listings?	Yes
2. Do you want to complete a contract to participate in the School Readiness Program?	Yes
2.1 Have you completed the Health & Safety Inspection by Department of Children and Families?	Yes
3. Do you want to complete a contract to participate in the Voluntary Prekindergarten (VPK) Education Program?	Yes
4. Do you want to complete a contract to receive local funding?	Yes
5. Are you a Gold Seal provider?	Yes
5.1 Gold Seal Accreditation	Gold Seal for preschool to 5
6. Are you an accredited provider?	Yes
6.1 Accreditations	OTHER

...

**+** Private Pay Rates

**-** Closures Calendar

Closures Dates
7/4/2017
8/3/2017
8/4/2017
8/5/2017
8/10/2017
8/11/2017
8/12/2017

Back

Next

## Step 12 – Sign and Certify

To submit the Provider Profile, the Full Name must exactly match (and is case-sensitive) the name entered on the Manage Users page. The Provider Portal user must then check the “Check box to certify by electronic signature” check box and click the **Submit** button.

☆ Profile Certification And Submittal

By signing this form I certify that:

- I have examined this application and, to the best of my knowledge and belief, the information provided is true and correct.
- If any of the information listed changes, I understand that I must log into my provider portal account and update my information within 14 days of the change.
- I understand that my provider profile information will be shared with the Department of Children and Families, Office of Child Care Regulation, for inclusion in the CARES system.
- I also understand that if I make changes prior to the coalition approving them, I may be out of compliance with the requirements of the VPK and or SR programs.

Authorized Electronic Signature

Full Name:

Check box to certify by electronic signature

Submission date: 6/26/2017

Submit

Once the Provider Portal user submits the Provider Profile, the following page will display:

You Have Successfully Completed and Submitted your Provider Profile!

Your early learning coalition will process your profile.  
Please check your email for important information about your profile.

You can click on the button below to return to the home page.

Return to home page

The Provider Portal user should then find the email sent by **DONOTREPLY@oel.myflorida.com**.

Hello Jim Ledbetter,

The provider profile you completed for Jim's House of Learning 2 was submitted successfully. You will receive an email that will notify you how to proceed after your provider profile is reviewed and processed by your local early learning coalition.

ELC of the Big Bend Region  
(866) 973-9030  
<http://www.elcbigbend.org/>

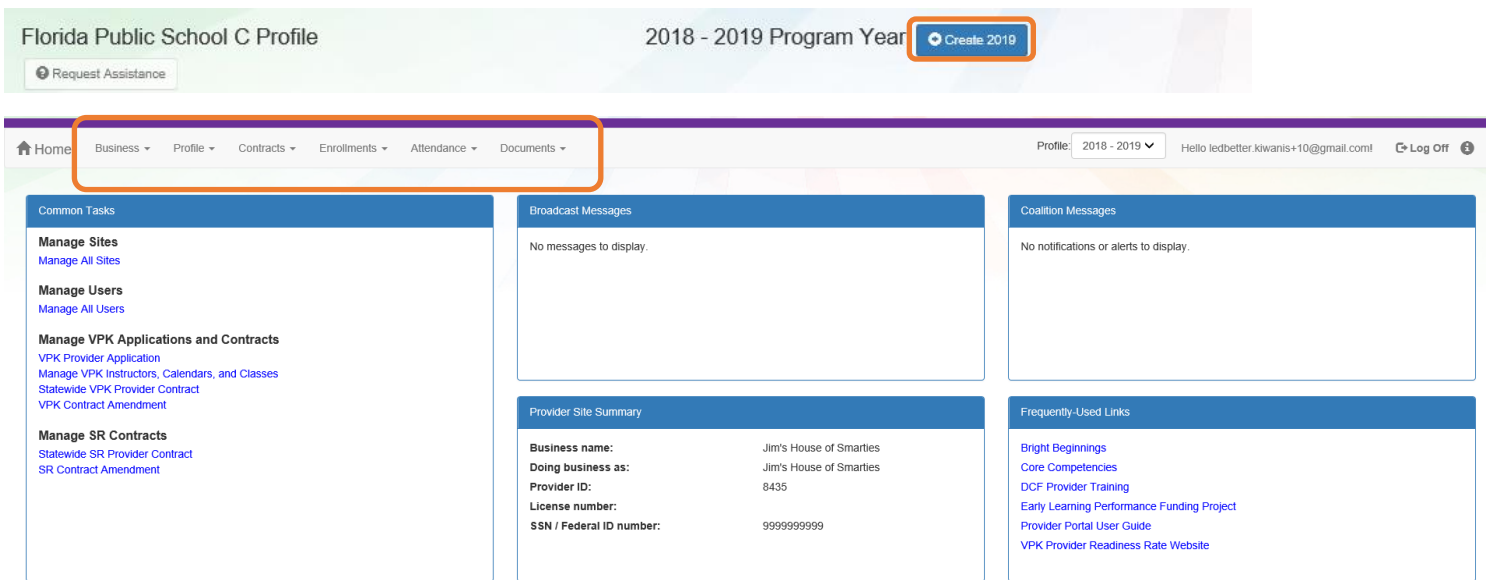
**Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have any questions, please contact your Early Learning Coalition at the number listed above.**



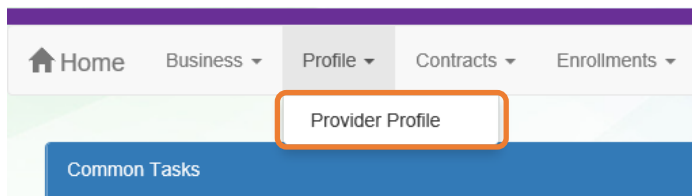
# Managing a Profile as a Provider Portal User

## Provider Dashboard

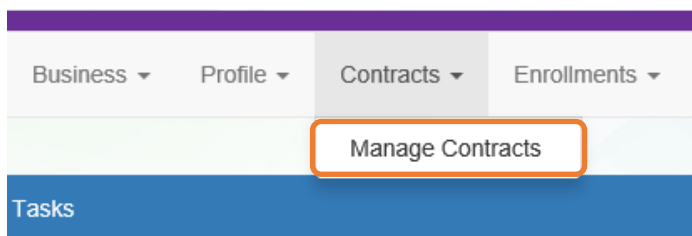
On January 1 of each program year, a button will appear next to the current program year that will allow the Provider Portal user to migrate all profile information from the current program year to the next program year (except Closures Calendar dates). To migrate profile information to the next program year, the Provider Portal user will click the **Create 2019** button. In this example, the provider is migrating profile information from the 2018 – 2019 program year to the 2019 – 2020 program year. All information from the 2018-2019 profile will migrate to the 2019-2020 profile, with the exception of the Closures Calendar. The provider can also skip a profile year and still be able to create a profile for the current year. For example, the provider had a 2017-2018 profile, but skipped the 2018-2019 profile. In order to create a 2019-2020 profile, the provider will go to the 2017-2018 profile, click the **Create 2018** button, then go to the 2018-2019 profile, and click the **Create 2019** button. The skipped profile 2018-2019 can remain Incomplete.



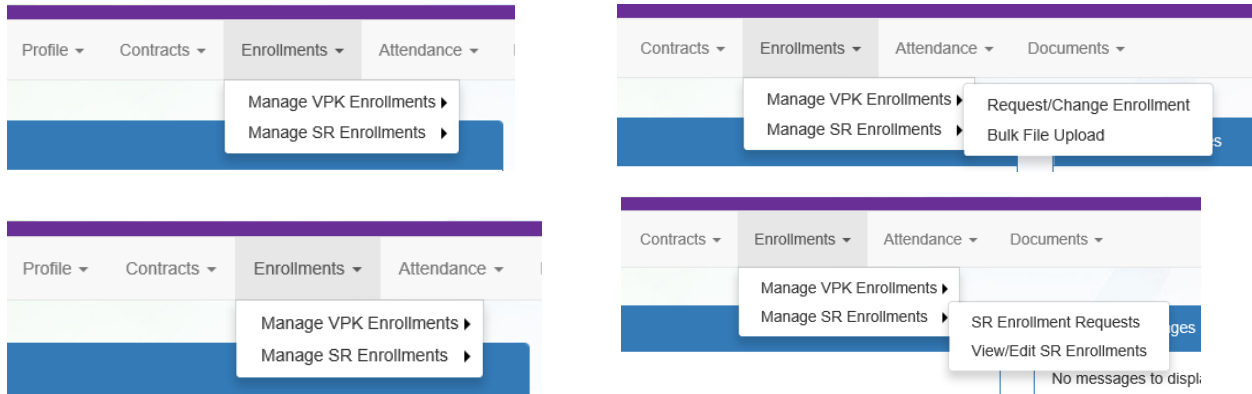
After a provider is active, a Provider Portal User can edit the Provider Profile, by clicking the Profile dropdown menu and then clicking the **Provider Profile** button.



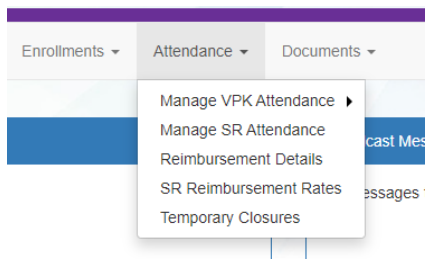
Provider Portal users can manage School Readiness and VPK contracts from the Provider Dashboard.



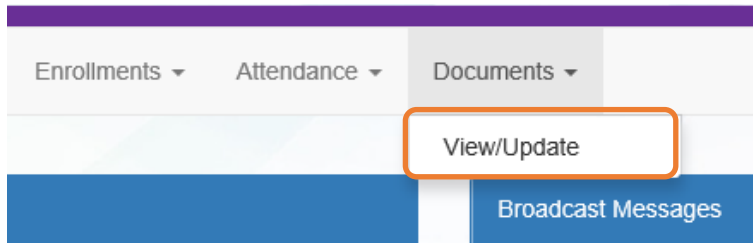
Provider Portal users can manage School Readiness and VPK enrollments from the Provider Dashboard.



Provider Portal users can manage School Readiness and VPK attendance, as well as view reimbursement details for paid attendance rosters, SR Reimbursement Rates, and Temporary Closures, from the Provider Dashboard.



Provider Portal users can click the Documents dropdown menu to access the Document Library Management function and view and upload additional documents for coalition review.














## Managing Contracts

Provider Portal users can view contract statuses and edit/download contracts through the Manage Contracts function.

Manage contracts for Jim's House of Canes & Gators 9 total records

Show 10 entries ▾

Contract ID 	Type of Contract	Contract Name	Coalition	Status	Last Updated	Action	View Contract	Start Date	End Date	Termination Date
45	VPK-APP	VPK 10,11A,11B	ELC of Palm Beach	Coalition Reviewing	06/26/2017	 Edit		07/01/2017		
139	VPK	OEL-VPK 20	ELC of the Big Bend Region	Certified	04/04/2017	 View	 Download	07/01/2017	06/30/2018	
156	VPK	OEL-VPK 20	ELC of the Big Bend Region	Terminated	05/26/2017	 View		07/01/2017	06/30/2018	05/26/2017
157	VPK	OEL-VPK 20	ELC of the Big Bend Region	Terminated	06/26/2017	 View		07/01/2017	03/02/2019	06/26/2017
180	VPK	OEL-VPK 20	ELC of the Big Bend Region	Not Eligible	05/24/2017	 View		07/01/2017	06/30/2018	
26723	SR	Contract Lite	OEL	Terminated	04/05/2017		 Download	01/10/2017	01/10/2018	04/04/2017
26731	SR	Contract Lite	OEL	Certified	03/15/2017		 Download	01/01/2017	01/01/2018	
26788	VPK-SIS	Contract Lite	ELC of the Big Bend Region	Certified	04/04/2017		 Download	04/04/2017	06/30/2017	
26804	VPK-SIS	Contract Lite	ELC of the Big Bend Region	Terminated	06/26/2017		 Download	05/18/2017	06/30/2017	04/28/2017

## Managing Documents

Documents can be added to the Document Library for coalition review. The folder list within the Document Library is standard for all providers, but coalitions have the ability to re-name or add new folders. Documents uploaded to the Documents tab of the provider profile will also populate in the Document Library; however, documents uploaded to the Document Library will not populate in the Documents tab of the provider profile.

## Viewing/Uploading Documents

To view or upload documents in a folder, the provider portal user will click the **View Files** or **Upload New File** button, respectively.

Document Library Management				
[FAQ]				
Folder List				
Folder Name	View	Upload	Date Updated	Updated By
Accreditation and / or Gold Seal (1 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Contracts (1 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	10/25/2016	OELAdmin
Insurance Auto (1 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Insurance Liability (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/22/2016	oel.fp.qa+01@gmail.com
Insurance-Worker Comp (1 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
License or Exemption (1 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Miscellaneous (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Monthly Adjustment Request (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Monthly Classroom Transfer Forms (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Monthly Extended Absence Request (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Monthly Outstanding Parent Fee (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Monthly Reimbursement Report (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Monthly Sign in-out Sheet (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Monthly VPK Child Withdrawal Forms (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Provider Public Rate Sheet (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Uncategorized (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
Unemployment Insurance (1 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	09/12/2016	OELAdmin
VPK Affidavit of Good Moral Character (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
VPK Background Screenings (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
VPK Curriculum (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
VPK Director Credentials (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
VPK Enrollment Certificates (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
VPK Instructor's Credentials (0 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin
W9 (1 files)	<a href="#">View Files</a>	<a href="#">Upload New File</a>	08/14/2016	OELAdmin

Document Library Management			
[FAQ]			
Change Folder:	<input type="text" value="Contracts"/>		
Total Files:	1	Date Created: 10/25/2016	
Folder Detail - Contracts			<a href="#">Rename File</a>
File Name	Download	Date Uploaded	Uploaded By
Koala.jpg	<a href="#">Download</a>	12/07/2016	ledbetter.kiwanis@gmail.com

Select a document to upload.

- Select the folder from the drop down list to which you would like to upload a file to.
- Click the *Browse...* button to browse your documents and select the one that you want to upload to the folder.
- You may give a description to the file you are uploading.

Upload file to site:

Jim's House of Learning 2

Select Destination Folder \*

Contracts

Select File \*

Browse...

Attach your document.

Click the *Attach Selected Document* button below to upload the selected document to your selected folder. This will upload a copy of your document and store it in the chosen folder. The upload process may take from several seconds to a *minute*, depending on the size of the document and the speed of you internet connection.

Attach Selected Document

Cancel

Provider Portal users can move within the Document Library by clicking the Change Folder dropdown menu. Files can also be renamed within each folder by clicking the **Rename File** button.

## Document Library Management

[\[FAQ\]](#)

**Change Folder:** Contracts

Total Files: 1 Date Created: 10/25/2016

### Folder Detail - Contracts

[Rename File](#)

File Name	Download	Date Uploaded	Uploaded By
Koala.jpg	<a href="#">Download</a>	12/07/2016	ledbetter.kivanis@gmail.com

Enter the new file name in the New File Name field and click the **Save Changes** button to continue.

### Rename File ✕

**Select Folder:** Contracts

**Select File:** Koala.jpg

**New File Name:**

Cancel
Save Changes

## Archiving Documents

Click the **Remove** button to remove a document from the profile documents screen and archive it in the appropriate Document Library Management folder.

The screenshot shows the 'Supporting Documents' section of a user profile. It contains a table with the following data:

Document(s)	View	Remove	Delete	Begin Date	Expiration Date
2019-2020 License.pdf	<a href="#">View</a>	<a href="#">Remove</a>	<a href="#">Delete</a>	02/23/2019	07/14/2019
2019-2020 New License.pdf	<a href="#">View</a>	<a href="#">Remove</a>	<a href="#">Delete</a>	02/23/2019	02/22/2020
2020-2021BKAlcense.pdf	<a href="#">View</a>	<a href="#">Remove</a>	<a href="#">Delete</a>	02/23/2020	02/22/2021
License2021.pdf	<a href="#">View</a>	<a href="#">Remove</a>	<a href="#">Delete</a>	02/21/2021	02/22/2022
PlayStub2.docx	<a href="#">View</a>	<a href="#">Remove</a>	<a href="#">Delete</a>		

A red arrow points to the 'Remove' button of the first document in the table.

## Document Library Management

[FAQ]

A Frequently Asked Questions pop-up message is available for the Provider Portal user. Contact the local early learning coalition if additional help is needed.

### Frequently Asked Questions

x

#### How do I create a new folder?

A: Folders can only be created by your Coalition. In case you need to add files that cannot be assigned to one of the pre-defined folders please put them in the 'Miscellaneous' folder. Call your coalition for further information.

#### How do I upload files to a folder?

A: Click 'Upload New File' button which will open a dialog box that allows you to upload a file to a folder you select.

#### If I misspelled a word when naming a file, how can I correct it?

A: Files can be renamed from the 'Folder Details' screen. Click on the 'View Files' button to navigate to the 'Folder Details' screen, here you have to click on the 'Rename File' button that would open a dialog box that allows you to select the Folder and the files within it that you wish to rename.

**Note:** You can only change the name of an existing file and not its type or extension.

#### What format does a document have to be in to be uploaded?

A: Any of the following formats are permitted: .bmp, .tiff, .pdf, .jpg, .gif, .png, .doc, .docx, .txt

#### Is there a size limit on the documents to be uploaded?

A: A file's size cannot exceed 2MB.

#### Who can I contact for technical assistance?

A: Please call your coalition office for any further assistance. [coalition map](#)

#### How can I reduce the size of my document?

A: To reduce the file size of a PDF, print the file using Adobe PDF as the printer, select the smallest file size option under the Default Settings menu and click OK on all open dialog boxes. The PDF is then converted to a smaller file. Upon completion, save the new file.

Close

## Provider Contracting

**NOTE:** Provider contracts are populated by information in the **Active** profile. As a result, the profile is read-only once the contract status is **Initiated**, **Incomplete**, or **Submitted**. If any changes need to be made to the **Active** profile after a contract is initiated or there is an error found in the profile once the contract is being edited (the contract status is **Incomplete**), contact your early learning coalition.

Jim's House of Smarties Profile

2019 - 2020 Program Year

Current Status: Active

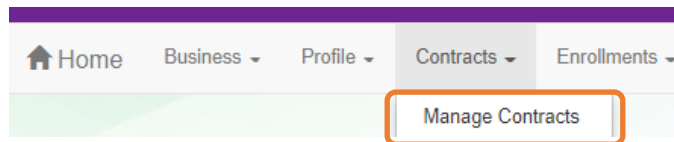
[Request Assistance](#)

### Read Only Mode

This profile is locked at this time because a contract is currently pending. If profile changes are needed for the contract, please contact the coalition.

## SR Contract

After the coalition has initiated an SR contract, the user will navigate to **Contracts > Manage Contracts** from the Provider Dashboard.



The Manage Contracts page displays. Click the **Edit** button for the initiated OEL-SR 20.

Manage Contracts											
Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Action	View Contract	Effective Date	Termination Date	Program Year	
Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter
+ 75810	SR	OEL-SR 20		Initiated	4/27/2021	<a href="#">Edit</a>		7/1/2021		2021 - 2022	
+ 71637	SR	OEL-SR 20		Certified	4/14/2021	<a href="#">View</a>		9/17/2020		2020 - 2021	

Showing 1 to 2 of 2 entries

First Previous **1** Next Last



## Provider Eligibility and Notification

After clicking the **Edit** button, the following page displays. Review the options in the dropdown menus and update the provider representative information, if needed.

School Readiness (SR) Contract Return for Edit Preview Contract

Provider(s):  
1. [redacted] Learning Center

**II. PROVIDER ELIGIBILITY**

II.8.a The Coalition participates in the Contracted Slots Program.

II.8.c The COALITION has determined the PROVIDER eligible to participate in the Contracted Slots Program.

**III. PROVIDER RESPONSIBILITIES AND SCOPE OF WORK**

III.30. If applicable, does the eligible PROVIDER, pursuant to paragraph 8, elect to participate in the Contracted Slots Program? \*

**XI. NOTIFICATION**

XI.83.b The representative for PROVIDER for the purposes of this Contract is Angela [redacted] \* who can be contacted at [redacted] or by email at [redacted]@gmail.com

**SIGNATURE AUTHORITY**

Select all signature authority candidates that apply:

Previous Step Next Step

## Provider Responsibilities and Scope of Work

If the provider is eligible to participate in the contracted slots program, the provider must select if they want to participate in the program. If the contracted slots program is not applicable, the option to participate in the contracted slots program is not displayed.

If this question is displayed, make a selection, then click **Next Step** to continue.

School Readiness (SR) Contract Return for Edit Preview Contract

Provider(s):  
1. [redacted] Learning Center

**II. PROVIDER ELIGIBILITY**

II.8.a The Coalition participates in the Contracted Slots Program.

II.8.c The COALITION has determined the PROVIDER eligible to participate in the Contracted Slots Program.

**III. PROVIDER RESPONSIBILITIES AND SCOPE OF WORK**

III.30. If applicable, does the eligible PROVIDER, pursuant to paragraph 8, elect to participate in the Contracted Slots Program? \*

**XI. NOTIFICATION**

XI.83.b The representative for PROVIDER for the purposes of this Contract is Angela [redacted] \* who can be contacted at [redacted] or by email at [redacted]@gmail.com

**SIGNATURE AUTHORITY**

Select all signature authority candidates that apply:

Previous Step Next Step

## Signature Authority

Providers must designate all users who are authorized to sign the SR contract for the listed provider(s). Provider portal users who have full permissions to manage SR contracts are included in the dropdown.

**NOTE:** Users who also have coalition portal access (e.g. ELC, RCMA, and DEL users) are excluded from the list as authorized provider signators.

Click the dropdown field to view all provider users who are eligible to electronically sign the SR contract. Select all users who should have authorization to sign the contract for the listed provider(s).

**NOTE:** In order for the user who is currently editing the contract to be able to electronically sign, their username must be selected.

When the authorized signator(s) are selected, click **Next Step**.

The screenshot displays the 'School Readiness (SR) Contract' form. At the top right, there are two buttons: 'Return for Edit' (red) and 'Preview Contract' (white). The form is divided into several sections:

- Provider(s):** A dropdown menu showing '1. [redacted] Learning Center'.
- II. PROVIDER ELIGIBILITY:** Contains two items: 'II.8.a The Coalition participates in the Contracted Slots Program. [Yes v]' and 'II.8.c The COALITION has determined the PROVIDER eligible to participate in the Contracted Slots Program. [Yes v]'.
- III. PROVIDER RESPONSIBILITIES AND SCOPE OF WORK:** Contains item 'III.30. If applicable, does the eligible PROVIDER, pursuant to paragraph 8, elect to participate in the Contracted Slots Program? \* [Yes v]'.
- XI. NOTIFICATION:** Contains item 'XI.83.b The representative for PROVIDER for the purposes of this Contract is [redacted] \* who can be contacted at [redacted] or by email at [redacted]@gmail.com'.
- SIGNATURE AUTHORITY:** This section is highlighted with an orange border. It includes the instruction 'Select all signature authority candidates that apply:' followed by a 'Select v' dropdown menu. Below this is a list of candidates with checkboxes: 'Select all', 'Carolyn ([redacted]@gmail.com)', 'Angela ([redacted]@gmail.com)', and 'Angela ([redacted]@gmail.com)'. A blue 'Next Step >' button is also highlighted with an orange border.

## Exhibit 1: Program Assessments

After clicking the **Next Step** button, the Exhibit 1 page displays. If the provider is exempt from program assessment requirements, the provider must select if they want to waive the exemption. If the provider is not exempt, the option to waive exemption is not displayed.

School Readiness (SR) Contract Return for Edit Preview Contract

**Exhibit 1**

Provider Name: [redacted]

**PROVIDER ELIGIBILITY**

The COALITION has determined the PROVIDER is exempt from the program assessment requirement pursuant to Rule 6M-4.740, F.A.C. [Yes v]

The PROVIDER waives the PROVIDER'S exemption and agrees to comply with requirements of Rules 6M-4.740, F.A.C. \* [Select v]

**NOTE:** If the provider is exempt from program assessments and selects “Yes” to waive the exemption, the contract will be sent back to the coalition for review.

Sites: [redacted] Hello [redacted]

School Readiness (SR) Contract Return for Edit

**Confirm** [x]

You have indicated that you wish to waive the Provider's exemption from program assessments. The contract must now be reviewed by the Coalition before you may continue. Clicking "Yes" will send the contract back to the Coalition. You will not be signing or agreeing to any terms by performing this action.

Do you wish to send the contract back to the Coalition for review?

Yes Cancel

**PROVIDER ELIGIBILITY**

The COALITION has determined the PROVIDER is exempt from the program assessment requirement pursuant to Rule 6M-4.740, F.A.C. [Yes v]

The PROVIDER waives the PROVIDER'S exemption and agrees to comply with requirements of Rules 6M-4.740, F.A.C. \* [Yes v]

The Composite Program Assessment Score displays under Provider Eligibility. If the score is greater than or equal to 5.00, select whether the provider wants to waive their biennial status and receive an annual program assessment. If the composite program assessment score is below 5.00, the option to waive biennial status is not displayed.

School Readiness (SR) Contract Return for Edit Preview Contract

**Exhibit 1**

Provider Name: [redacted] Learning Center

**PROVIDER ELIGIBILITY**

The COALITION has determined the PROVIDER is exempt from the program assessment requirement pursuant to Rule 6M-4.740, F.A.C. [No v]

Composite Program Assessment Score

The PROVIDER waives the PROVIDER'S biennial status and agrees to receive an annual program assessment pursuant to Rule 6M-4.740, F.A.C. \* [Select v]

## Exhibit 1: Child Assessments

On the Exhibit 1 page, select if the provider elects to conduct child assessments.

School Readiness (SR) Contract Return for Edit Preview Contract

**Exhibit 1**

Provider Name:  Learning Center

### PROVIDER ELIGIBILITY

The COALITION has determined the PROVIDER is exempt from the program assessment requirement pursuant to Rule 6M-4.740, F.A.C.

Composite Program Assessment Score

The PROVIDER waives the PROVIDER'S biennial status and agrees to receive an annual program assessment pursuant to Rule 6M-4.740, F.A.C. \*

### PROVIDER RESPONSIBILITIES AND SCOPE OF WORK

If applicable, the eligible PROVIDER, agrees to conduct child assessments using a reliable assessor as defined by the child assessment tool, that meet the criteria described in s. 1002.82(k), F.S., at least three times per year and will submit valid and reliable data to the statewide information system. If the PROVIDER selects to conduct child assessments, PROVIDER understands the requirements of the rule must be met to receive the child assessment differential.

\*

PROVIDER agrees to conduct child assessments in accordance with Rule 6M-4.500(11), F.A.C. using the selected as the assessment tool.

Previous Step Next Step

If "Yes" is selected, a pop-up message appears for the provider to confirm that they have/will upload the reliability certification.

School Readiness (SR) Contract Return for Edit Preview Contract

### PROVIDER ELIGIBILITY

The COALITION has determined the PROVIDER is exempt from the program assessment requirement pursuant to Rule 6M-4.740, F.A.C.

Composite Program Assessment Score

The PROVIDER waives the PROVIDER'S biennial status and agrees to receive an annual program assessment pursuant to Rule 6M-4.740, F.A.C. \*

### PROVIDER RESPONSIBILITIES AND SCOPE OF WORK

If applicable, the eligible PROVIDER, agrees to conduct child assessments using a reliable assessor as defined by the child assessment tool, that meet the criteria described in s. 1002.82(k), F.S., at least three times per year and will submit valid and reliable data to the statewide information system. If the PROVIDER selects to conduct child assessments, PROVIDER understands the requirements of the rule must be met to receive the child assessment differential.

\*

PROVIDER agrees to conduct child assessments in accordance with Rule 6M-4.500(11), F.A.C. using the selected as the assessment tool.

**Confirm Child Assessment**

You selected yes to indicate you wish to implement child assessments. If you have not uploaded the required certificates of reliability in the Quality Performance System (QPS) you must do so immediately in order to proceed with your SR contract.

By clicking "Yes" you certify that you have the reliability certification and will be required to upload.

If the provider selects “Yes” to conduct child assessments, select a child assessment tool. Click **Next Step** to continue.

School Readiness (SR) Contract Return for Edit Preview Contract

**Exhibit 1**

Provider Name: [REDACTED] Learning Center

### PROVIDER ELIGIBILITY

The COALITION has determined the PROVIDER is exempt from the program assessment requirement pursuant to Rule 6M-4.740, F.A.C.

Composite Program Assessment Score

The PROVIDER waives the PROVIDER'S biennial status and agrees to receive an annual program assessment pursuant to Rule 6M-4.740, F.A.C. \*

### PROVIDER RESPONSIBILITIES AND SCOPE OF WORK

If applicable, the eligible PROVIDER, agrees to conduct child assessments using a reliable assessor as defined by the child assessment tool, that meet the criteria described in s. 1002.82(k), F.S., at least three times per year and will submit valid and reliable data to the statewide information system. If the PROVIDER selects to conduct child assessments, PROVIDER understands the requirements of the rule must be met to receive the child assessment differential.

\*

PROVIDER agrees to conduct child assessments in accordance with Rule 6M-4.500(11), F.A.C. using the selected as the assessment tool.

\*

← Previous Step Next Step →

### Exhibit 3: Quality Improvement Plan Selection

After clicking **Next Step**, the Exhibit 3 page only displays if the provider is required to participate in a quality improvement plan. Enter the user's initials in each box that has a check mark, then click **Next Step** to continue.

School Readiness (SR) Contract

[Return for Edit](#)
[Preview Contract](#)

**Exhibit 3: Quality Improvement Plan Selection**

Provider Name:		
Selection	Strategy	Description (summary)
<input type="checkbox"/> <input type="checkbox"/> Provider Initials Teacher Name(s):	COALITION approved strategy	Description included in QIP Notice.
<input type="checkbox"/> <input type="checkbox"/> Provider Initials Teacher Name(s):	Certified Coaching Visits	Each selected classroom will participate in 20 hours of certified coaching provided by the ELC or its delegate.
<input checked="" type="checkbox"/> <input type="checkbox"/> Provider Initials Teacher Name(s): <a href="#" style="color: #0056b3; text-decoration: underline;">See QIP Notice</a>	CLASS Group Coaching (CGC) Training	Each selected instructor/director will complete either the CGC PreK 24-hour course or the CGC Infant/Toddler 24-hour course provided by the COALITION's or its delegate's CGC Specialist.
<input type="checkbox"/> <input type="checkbox"/> Provider Initials Teacher Name(s):	Early Childhood Training System (ECTS) Courses	Each selected instructor/director will successfully complete two Early Childhood Training System courses facilitated by the ELC. Course options include taking an online course alone, with TA coaching support and/or as a member of a COALITION-sponsored Community of Practice.
<input type="checkbox"/> <input type="checkbox"/> Provider Initials Teacher Name(s):	20-hours of IACET- or OEL-approved training	Each selected instructor/director will register for and successfully complete 20 hours of International Association for Continuing Education & Training (IACET) approved training (or other OEL-approved CEU training) provided by the ELC or their delegate.
<input type="checkbox"/> <input type="checkbox"/> Provider Initials Teacher Name(s):	Professional Development	Each selected instructor/director shall register in the Florida Early Care and Education Professional Development Registry, generate a professional development plan in the registry and complete the required progression along the career pathway.

[← Previous Step](#)

[Next Step →](#)

### Exhibit 5: Provider Reimbursement Rates

If the provider charges an annual registration fee (**Profile > Provider Profile > Fees & Discounts**), the following page displays. Select the annual fee details, then click **Next Step** to continue.

**NOTE:** If “Month” is selected, another dropdown field appears for the provider to select a month. If “Other” is selected, the provider must provide a description.

School Readiness (SR) Contract
Return for Edit
Preview Contract

#### Exhibit 5: Provider Reimbursement Rates

Provider Name:  

If PROVIDER charges a registration fee please check one and provide the amount: \$  .00

One time fee upon enrollment.

Annual fee. \* Select

Select

Month

Upon Enrollment

Other

Other Describe

← Previous Step

Next Step →

### Exhibit 6: Holiday Schedule

After clicking **Next Step**, the following displays. The dates are based on any coalition-defined holidays and the closure dates from the profile Closure Calendar.

If fewer dates are listed than the coalition maximum total paid closure dates, additional provider holidays can be added to the holiday schedule exhibit if applicable. Click the **Edit** button on the holiday table.

School Readiness (SR) Contract
Return for Edit
Preview Contract

#### Exhibit 6: Holiday Schedule

Provider Name: <span style="background-color: #e6e6e6; padding: 0 20px;"> </span>		Edit
	Holiday	Date Observed
1.	Independence Day	7/5/2021
2.	Labor Day	9/6/2021
3.	Veteran's Day	11/11/2021
4.	Thanksgiving Day	11/25/2021
5.	Friday after Thanksgiving	11/26/2021
6.	Christmas Eve	12/24/2021
7.	Christmas Day	12/27/2021
8.	New Years Day	12/31/2021
9.	Martin Luther King Jr. Day	1/17/2022
10.	Presidents Day	2/21/2022
11.		
12.		

← Previous Step

Next Step →

After clicking the **Edit** button, a pop-up window appears with an editable holiday table. On a blank row, enter the holiday name, then select a date from the dropdown in the Date column. Duplicate dates cannot be used. When done editing, click **Save**. Then, click **Next Step** to continue.

**Paid Holidays for Multiple Sites**

All sites use this holiday schedule?

Provider Name: \_\_\_\_\_

	Holiday	Date
1.	Independence Day	3/20/2022
2.	Labor Day	3/26/2022
3.	Veteran's Day	3/27/2022
4.	Thanksgiving Day	4/2/2022
5.	Friday after Thanksgiving	4/3/2022
6.	Christmas Eve	4/9/2022
7.	Christmas Day	4/10/2022
8.	New Years Day	4/15/2022
9.	Martin Luther King Jr. Day	4/16/2022
10.	Presidents Day	4/17/2022
11.	Good Friday	4/23/2022
12.		4/24/2022

### Preview Contract

Prior to executing the contract, click **Preview Contract** to view the contract. This allows the user to view all the information input into the contract and exhibits from the profile. Information added by the coalition and provider should be reviewed as well.

STATE OF FLORIDA  
STATEWIDE SCHOOL READINESS PROVIDER CONTRACT  
FORM OEL-SR 20

**XIV. EXECUTION OF CONTRACT**

Signature of President/Vice President/Secretary/Officer/Owner/Principal/or Other Authorized Representative \_\_\_\_\_  
 By Electronic Signature  
 Print Name \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

Provider's Additional Signatory (if required by the Provider) \_\_\_\_\_  
 By Electronic Signature  
 Print Name \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_


COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.

Signature of Authorized Coalition Representative \_\_\_\_\_  
 By Electronic Signature  
 Print Name \_\_\_\_\_



After clicking the **Preview Contract** button, the following displays in a new browser tab.

1 of 23 100%

**STATE OF FLORIDA  
STATEWIDE SCHOOL READINESS PROVIDER CONTRACT  
FORM DEL-SR 20**

**I. PARTIES AND TERMS OF CONTRACT**

1. **Parties.** This Contract is made and entered into this 1st day of July, 2022, by and between the Early Learning Coalition of \_\_\_\_\_ County (herein referred to as "COALITION"), and LEARNING CENTER, INC. doing business as (if applicable), Learning Center (herein referred to as "PROVIDER"), with its principal offices located at \_\_\_\_\_ and its provider physical site address (if the single site provider physical site address is different from principal office address) located at \_\_\_\_\_.

a. **Multiple Public School Locations.** If PROVIDER is a school district executing a single Contract on behalf of multiple public school School Readiness (SR) Program PROVIDERS, a list of their names and their physical addresses are included in Exhibit 1: PROVIDER Location List. Thereafter, PROVIDER shall include each location listed in Exhibit 1.

b. **Multiple Private Locations.** If PROVIDER is executing a single Contract on behalf of multiple private SR PROVIDER sites within COALITION'S service area, a list of their names and their physical addresses are included in Exhibit 1: PROVIDER Location List. Thereafter, PROVIDER shall include each location listed in Exhibit 1.

c. **Identification Number.** Insert PROVIDER's  EIN or  SSN here:  
\_\_\_\_\_

PROVIDER's EIN (Employer Identification Number) or SSN (Social Security Number) is requested in accordance with ss. 119.071(5)(a)2 and 119.092, F.S., for use in the records and data systems of the Division of Early Learning and COALITION. Submission of PROVIDER's EIN or SSN is mandatory. PROVIDER's EIN or SSN will be used for processing payments to PROVIDER as an SR PROVIDER, for reporting those payments for federal tax purposes, and for routine identification. If PROVIDER completes Exhibit 1 listing multiple locations with multiple EIN numbers, this paragraph may be left blank.

2. **Purpose.** This Contract is designed to inform PROVIDER of the requirements of participation in the SR Program. Payment is not conveyed to PROVIDER through this Contract. Instead, PROVIDER must agree to comply with the terms and conditions of this Contract in order to

## Contract Execution

To electronically sign the contract, check the **By Electronic Signature** checkbox.

**NOTE FOR PUBLIC SCHOOLS:** If a school board or school district needs to manually sign a contract, the contract can be downloaded as a .pdf and printed. An authorized representative should electronically sign and submit the contract.

STATE OF FLORIDA  
STATEWIDE SCHOOL READINESS PROVIDER CONTRACT  
FORM OEL-SR 20

Preview Contract

XIV. EXECUTION OF CONTRACT

Signature of President/Vice President/Secretary/Officer/Owner/Principal  
Authorized Representative  
 By Electronic Signature  
Print Name  
Title  
Date

Provider's Additional Signatory (if required by the Provider)  
 By Electronic Signature  
Print Name  
Title  
Date

COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.

Signature of Authorized Coalition Representative  
 By Electronic Signature  
Print Name  
Title  
Date

Previous Step

Next Step

After clicking the checkbox, the following message displays. Enter the **Title of Signator**, then click **Yes**.

**NOTE:** The **Title of Signator** is not the provider's name, but the business title, e.g. Owner, Director, Principal.

Form OEL-SR 20 Electronic Signature

You are about to electronically sign the Form OEL-SR 20.

Title of Signator: \*

Click "Yes" to confirm your electronic signature.

Yes Cancel

After clicking the **Yes** button, the electronic signature of the signatory, printed name, title, and the date/time will populate, highlighted in yellow. Click **Next Step** to continue.

**NOTE:** The electronic signature and printed name of the user is based on the user who is logged on to the portal. Please ensure that the proper user is logged on to electronically sign the contract. If the incorrect name is used for the electronic signature, the checkbox can be un-checked.

You are about to remove your signature from the Form OEL-VPK 20.

Click "Yes" to continue.

Yes Cancel



STATE OF FLORIDA  
STATEWIDE SCHOOL READINESS PROVIDER CONTRACT  
FORM OEL-SR 20

I. Preview Contract

XIV. EXECUTION OF CONTRACT

(Electronic Signature) \_\_\_\_\_

Signature of President/Vice President/Secretary/Officer/Owner/Principal/or  
Other Authorized Representative

By Electronic Signature

Print Name

Owner \_\_\_\_\_

Title

4/6/2020 1:00:34 PM

Date

Provider's Additional Signatory (If required by the Provider)

By Electronic Signature

Print Name

\_\_\_\_\_

Title

Date

COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.

Signature of Authorized Coalition Representative

By Electronic Signature

Print Name

\_\_\_\_\_

Title

Date

Previous Step

Next Step

## Contract Certification

After clicking the **Next Step** button, the following page displays. Enter the full name of the user who is logged on, title, and click the **Certified by electronic signature** checkbox. Click **Submit**.

### SR Contract Certification

In accordance with s. 1002.88(1)(p), F.S., PROVIDER has caused this Contract to be executed as of the date set forth in Paragraph 1. By signing below, PROVIDER hereby certifies that PROVIDER has read and understood this Contract. PROVIDER certifies that all information provided is true and correct and agrees that noncompliance with the requirements of the School Readiness Program including, but not limited to the requirements of this Contract, and all Exhibits and authorized attachments, shall result in corrective action, withholding of funds, or termination of this Contract at the discretion of COALITION, in accordance with Section X.

**Warranty of Authority.** Each person signing this contract warrants that he or she is duly authorized to do so and to bind the respective party to the contract.

#### By signing this form I certify that:

- I had the opportunity to review the Statewide School Readiness (SR) Provider Contract.
- I have examined this contract and, to the best of my knowledge and belief, the information provided is true and correct.
- I understand that upon the approval of my provider's contract, I will receive notification my contract is in force.
- I am duly authorized to sign and bind the respective party to the contract.

Submit Contract

\* Full Name

\* Title

\*  Certified by electronic signature

Contract sign date

Submit

After clicking the **Submit** button, the following message will display and an email will be sent by **DONOTREPLY@OEL.myflorida.com**.

✔ You Have Successfully Completed, Signed, Certified and Submitted your Statewide SR Provider Contract!

**Your early learning coalition will review and process your contract.**  
**Please check your email for important information regarding your contract.**

You can click on the button below to return to your home page.

← Return to home page

Statewide SR Provider Contract Submitted Inbox x

OELTestSystems OELTestSystems@oel.myflorida.com via oelmyflorid.com 10:45 PM (27 minutes ago)

to me

Hello Jim Ledbetter.

The Statewide SR Provider Contract (Forms OEL-SR\_20\_20/FFN/LE/L) you submitted for Jimini B, the Monitor has been delivered to the ELC of St. Lucie. The contract will be reviewed and you will receive an email with further instructions.

Remember, you must receive a copy of the Statewide SR Provider Contract signed by the coalition **before** receiving payment or beginning SR classes.

Thank you,  
ELC of St. Lucie  
(772) 595-6424  
<http://www.elcslc.org/>

Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have questions, please contact your [early learning coalition](#)

Navigate to the provider manage contracts page (**Contracts > Manage Contracts**). The SR contract will have a status of **Submitted** for the coalition to review.

Manage Contracts

Show 10 entries Clear All Filters Search:

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Action	View Contract	Effective Date	Termination Date	Program Year
<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	<input type="text" value="Filter"/>
+ 75810	SR	OEL-SR 20	[REDACTED]	Submitted	4/27/2021	<a href="#">View</a>		7/1/2021		2021 - 2022
+ 71637	SR	OEL-SR 20	[REDACTED]	Certified	4/14/2021	<a href="#">View</a>		9/17/2020		2020 - 2021

Showing 1 to 2 of 2 entries First Previous 1 Next Last

## VPK Contract

After the coalition has initiated a VPK contract, the user will navigate to **Contracts > Manage Contracts** from the Provider Dashboard.



The manage contract page displays. Click the Edit button for the initiated OEL-VPK 20.

Manage Contracts											
Show 10 entries <span style="float: right;">Clear All Filters Search: <input type="text"/></span>											
	Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Action	View Contract	Effective Date	Termination Date	Program Year
	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter
+	76050	VPK	OEL-VPK 20		Initiated	4/27/2021	<a href="#">Edit</a>		7/1/2021		2021 - 2022
+	75220	SR	OEL-SR 20		Certified	4/27/2021	<a href="#">View</a>		3/8/2021		2020 - 2021

## Compensation and Funding: Advance Pay Options

After clicking the **Edit** button, the following page displays. When the user's pointer hovers over the dropdown fields, a tool tip informs the user that the advance payment selections will apply to all sites on the contract.

Select an Advance Payment Option for the school year and summer programs. Click **Next Step** to continue.

Voluntary Prekindergarten (VPK) Contract Preview Contract

Provider(s):  
1. [REDACTED]

### VII COMPENSATION AND FUNDING

VII.40.

**Advance Payment Option**  
**School Year Program**

Select

Advance payment option for School Program is required.

**Summer Program**

Select

Advance payment option for Summer Program is required.

Selection applies to any site included in the contract

This advance payment election affects all sites on the contract. If you are a multiple-site provider and your selection does not apply to all sites on the contract, contact your coalition to remove those site(s) from the contract. A separate contract will need to be executed for the provider site(s) that are removed from this contract.

← Previous Step Next Step →

### School Year Program

Select

Select

PROVIDER elects to receive monthly advance payments for the school year program.  
PROVIDER elects not to receive monthly advance payments for the school year program.  
PROVIDER does not intend to offer the school year program.

### Summer Program

Select

Select

PROVIDER elects to receive monthly advance payments for the summer program.  
PROVIDER elects not to receive monthly advance payments for the summer program.  
PROVIDER does not intend to offer the summer program.

### Exhibit 1: Provider Location List Attachment

After clicking the **Next Step** button, the following displays. Select the School Year and/or Summer checkbox if the session is offered. Click **Next Step** to continue.

Voluntary Prekindergarten (VPK) Contract Preview Contract

Exhibit 1 : Provider Location List Attachment


Location Number	Location Legal Name	Doing Business As	Physical Address	Employer ID Number(EIN)	School Year	Summer	Official Use Only
					<input type="checkbox"/>	<input type="checkbox"/>	

[← Previous Step](#) [Next Step >](#)

### Preview Contract

Prior to executing the contract, click **Preview Contract** to view the contract. This allows the user to view all the information input into the contract and exhibits from the profile. Information added by the coalition and provider should be reviewed as well.

Form OEL-VPK 20

 STATE OF FLORIDA  
STATEWIDE VOLUNTARY PREKINDERGARTEN PROVIDER CONTRACT  
FORM OEL-VPK 20

[Preview Contract](#)

I.


**XV. EXECUTION OF CONTRACT**

<hr/> <b>Signature of President/Vice President/Secretary/Officer/Owner/Principal/or Other Authorized Representative</b> <input type="checkbox"/> By Electronic Signature	<hr/> <b>Print Name</b>
<hr/> <b>Title</b>	<hr/> <b>Date</b>
<hr/> <b>Provider's Additional Signatory (If required by the Provider)</b>	<hr/> <b>Print Name</b>



After clicking the **Preview Contract** button, the following displays in a new browser tab.

1 of 10 100%



**STATE OF FLORIDA**  
**STATEWIDE VOLUNTARY PREKINDERGARTEN**  
**PROVIDER CONTRACT**  
**FORM DEL-VPK 20**

**I. PARTIES AND TERMS OF CONTRACT**

1. **Parties.** This Contract is made and entered into this 1st day of July, 2022, by and between the Early Learning Coalition of TALLAHASSEE (herein referred to as "COALITION"), and KIM TEST PROVIDER (doing business as, if applicable) Kim's Test Daycare #3 (herein referred to as "PROVIDER"), with its principal office located at 2305 HOME CT TALLAHASSEE, FL 32303 and its provider physical site address (if the single site provider physical site address is different from principal office address) located at 1835 N MONROE ST TALLAHASSEE, FL 32303.

a. **Multiple Public School Locations.** If PROVIDER is a school district executing a single Contract on behalf of multiple public school Voluntary Prekindergarten (VPK) Education Program providers, a list of their names and their physical addresses are included in Exhibit 1: Provider Location List. Thereafter PROVIDER shall include each entity listed in Exhibit 1.

b. **Multiple Private Provider Locations.** If PROVIDER is executing a single Contract on behalf of multiple private VPK provider sites within COALITION's service area, a list of their names and their physical addresses are included in Exhibit 1: Provider Location List. Thereafter PROVIDER shall include each entity listed in Exhibit 1.

c. **Identification Number:** Insert PROVIDER'S  EIN or  SSN here: TEST111

PROVIDER's EIN (Employer Identification Number) or SSN (Social Security Number) is requested in accordance with ss.119.071(5)(a)2. and 119.092, F.S., for use in the records and data systems of the Department of Education and COALITION. Submission of PROVIDER's EIN or SSN is mandatory. PROVIDER's EIN or SSN will be used for processing payments to PROVIDER as a VPK provider, for reporting those payments for federal tax purposes, and for routine identification.

2. **Purpose.** This Contract is designed to inform PROVIDER of the requirements of participation in the VPK Program. Payment is not conveyed to PROVIDER through this Contract. Instead, PROVIDER must agree to comply with the terms and conditions of this Contract in order to be eligible to participate in the VPK Program. This Contract is to engage an eligible provider to

## Contract Execution

To electronically sign the contract, click the **By Electronic Signature** checkbox.

**NOTE FOR PUBLIC SCHOOLS:** If a school board or school district needs to manually sign a contract, it can be downloaded as a .pdf and printed.

STATE OF FLORIDA  
STATEWIDE VOLUNTARY PREKINDERGARTEN PROVIDER CONTRACT  
FORM OEL-VPK 20

I. Preview Contract

**XV. EXECUTION OF CONTRACT**

Signature of President/Vice President/Secretary/Officer/Owner/Principal/Other Authorized Representative Print Name  
 By Electronic Signature

\_\_\_\_\_  
Title Date

Provider's Additional Signatory (If required by the Provider) Print Name  
 By Electronic Signature

\_\_\_\_\_  
Title Date

Provider's Additional Signatory (If required by the Provider) Print Name  
 By Electronic Signature

\_\_\_\_\_  
Title Date

COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.

Signature of Authorized Coalition Representative Print Name  
 By Electronic Signature

\_\_\_\_\_  
Title Date

After clicking the checkbox, the following message displays. Enter the **Title of Signator**, then click **Yes**.

**NOTE:** The **Title of Signator** is not the provider's name, but the business title, e.g. Owner, Director, Principal.

Form OEL-VPK 20 Electronic Signature

You are about to electronically sign the Form OEL-VPK 20.

Signature Title for Form OEL-VPK 20.

Title of Signator: \* |

Click "Yes" to confirm your electronic signature.

Yes Cancel

After clicking the **Yes** button, the electronic signature of the signatory, printed name, title, and the date/time will populate, highlighted in yellow. Click **Next Step** to continue.


**NOTE:** The electronic signature and printed name of the user is based on the user who is logged on to the portal. Please ensure that the proper user is logged on to electronically sign the contract. If the incorrect name is used for the electronic signature, the checkbox can be un-checked.

Form OEL-VPK 20 Electronic Signature x

You are about to remove your signature from the Form OEL-VPK 20.

Click "Yes" to continue.

YesCancel



STATE OF FLORIDA  
STATEWIDE VOLUNTARY PREKINDERGARTEN PROVIDER CONTRACT  
FORM OEL-VPK 20

Preview Contract

I.

**xv. EXECUTION OF CONTRACT**

<div style="border: 1px solid #ccc; background-color: #ffff00; padding: 2px; text-align: center; font-size: small;">(Electronic Signature)</div> <p>Signature of President/Vice President/Secretary/Officer/Owner/Principal/Other Authorized Representative</p> <p><input checked="" type="checkbox"/> By Electronic Signature</p> <div style="border: 1px solid #ccc; background-color: #ffff00; padding: 2px; text-align: center; font-size: small;">Owner</div>	<div style="border: 1px solid #ccc; background-color: #ffff00; padding: 2px; text-align: center; font-size: small;">[Redacted]</div> <p>Print Name</p> <div style="border: 1px solid #ccc; background-color: #ffff00; padding: 2px; text-align: center; font-size: small;">4/6/2020 1:10:09 PM</div> <p>Date</p>
<p>Provider's Additional Signatory (If required by the Provider)</p> <p><input type="checkbox"/> By Electronic Signature</p> <p>Title _____</p>	<p>Print Name _____</p> <p>Date _____</p>
<p>Provider's Additional Signatory (If required by the Provider)</p> <p><input type="checkbox"/> By Electronic Signature</p> <p>Title _____</p>	<p>Print Name _____</p> <p>Date _____</p>
<p>COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.</p>	
<p>Signature of Authorized Coalition Representative</p> <p><input type="checkbox"/> By Electronic Signature</p> <p>Title _____</p>	<p>Print Name _____</p> <p>Date _____</p>

Previous Step

Next Step

## Contract Certification

After clicking the **Next Step** button, the following will display. Enter the full name of the user who is logged on, title, and click the **Certified by electronic signature** checkbox. Click **Submit**.

### VPK Contract Certification

In accordance with ss. 1002.55(3)(i), 1002.61(3)(b), and 1002.63(3)(b), F.S., PROVIDER has caused this Contract to be executed as of the date set forth in Paragraph 1. By signing below, PROVIDER hereby certifies that PROVIDER has read and understood this Contract. PROVIDER certifies that all information provided is true and correct and agrees that noncompliance with the requirements of the VPK Program, which include the requirements of this Contract, and all Exhibits and authorized attachments, shall result in corrective action, withholding of funds, or termination of this Contract at the discretion of COALITION, in accordance with Section XI.

Warranty of Authority. Each person signing this contract warrants that he or she is dually authorized to do so and to bind the respective party to the contract.

#### By signing this form I certify that:

- I had the opportunity to review the Statewide Voluntary Prekindergarten (VPK) Provider Contract.
- I have examined this contract and, to the best of my knowledge and belief, the information provided is true and correct.
- I understand that upon the approval of my provider's contract, I will receive notification my contract is in force.
- I am duly authorized to sign and bind the respective party to the contract.

Submit Contract

* Full Name	<input type="text"/>
* Title	<input type="text"/>
* <input type="checkbox"/> Certified by electronic signature	
Contract sign date	4/6/2020
<input type="button" value="Submit"/>	

After clicking the **Submit** button, the following message will display and an email will be sent by **DONOTREPLY@OEL.myflorida.com**.

You Have Successfully Completed, Signed, Certified and Submitted your Statewide VPK Provider Contract!

**Your early learning coalition will review and process your contract.**  
**You may not offer VPK services until you have received notification that your contract has been approved and fully executed by your coalition.**  
**Please check your email for important information regarding your contract.**

You can click on the button below to return to your home page.

[Return to home page](#)

### Statewide VPK Provider Contract Submitted inbox x

OELSystemTest <OELSystemTest@oel.myflorida.com>  
to ledbetter.kiwanis+10@gmail.com

2:35 PM (0 minutes ago)

Hello Jim Ledbetter,

The Statewide VPK Provider Contract (Forms OEL-VPK 20, 20PP/PS) you submitted for Jim's House of Smarties has been delivered to the ELC of the Big Bend Region. The contract will be reviewed and you will receive an email with further instructions.

Remember, you must receive a copy of the Statewide VPK Provider Contract signed by the coalition **before** receiving payment or beginning VPK classes.

Thank you,  
ELC of the Big Bend Region  
(866) 973-9030  
<http://www.elcbigbend.org/>

Please do not reply to this message. Replies to this message are routed to an unmonitored mailbox. If you have questions, please contact your [early learning coalition](#).

Navigate to the provider manage contracts page (**Contracts > Manage Contracts**). The SR contract will have a status of **Submitted** for the coalition to review.

Manage Contracts

Show 10 entries Clear All Filters Search:

	Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Action	View Contract	Effective Date	Termination Date	Program Year
	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter	Filter
+	76050	VPK	OEL-VPK 20		Submitted	4/27/2021	View		7/1/2021		2021 - 2022
+	75220	SR	OEL-SR 20		Certified	4/27/2021	View		3/8/2021		2020 - 2021

## VPK-APP

The VPK-APP replaces forms OEL-VPK 10 (Provider Application), OEL-VPK 11A (Class Registration – Instructors), and OEL-VPK 11B (Class Registration – Calendars). The tabs must be done in order of appearance (Attendance Policy, then VPK Director, etc.); the answers in one tab populate information in the next tab.

After the coalition has initiated the provider application, the Provider Portal user will click **Manage Contracts** from the Provider Dashboard.



The following will display. Click the **Edit** button to review the contract.

Manage contracts for Jimini & the Monitor <span>1 total records</span>										
Show 10 entries ▾										
Contract ID ↓	Type of Contract	Contract Name	Coalition	Status	Last Updated	Action	View Contract	Start Date	End Date	Termination Date
44	VPK-APP	VPK 10,11A,11B	ELC of North Florida/Episcopal Children's Services	Initiated	4/20/2017	<a href="#">Edit</a>		7/1/2017		

## Step 1 – Attendance Policy

The Attendance Policy tab allows the Provider Portal user to upload the provider Attendance Policy. The document that is to be distributed to parents must be uploaded by clicking the **Browse** button, finding the document in the electronic files and clicking the **Upload** button.

Jim's House of Canes & Gators (and Noles) 2017 - 2018 (Incomplete) ▾

Attendance Policy [VPK Director](#) [VPK Instructors](#) [VPK Calendars](#) [VPK Class\(es\)](#) [Review](#) [Certify and Submit](#)

### Attendance Policy Submission

A VPK Provider must

- ✓ Adopt an attendance policy that aligns with VPK rules and statutes and requires parents to verify the child's attendance each month on forms required by Rule 6M-8.305, F.A.C.
- ✓ Provide a copy of its attendance policy to the early learning coalition before executing a contract by uploading to the portal (below)
- ✓ Provide a copy of this policy to parents of each VPK child admitted into the provider's VPK program (at the time of enrollment)
- ✓ Not amend its attendance policy for its VPK program duration of the VPK contract

**Please Note**

Section 1002.71, F.S., states a private prekindergarten provider or public school may not require payment of a fee or charge for services provided for a child enrolled in VPK during a period reported for funding purposes; or require a child to enroll for, or require the payment of any fee or charge for, supplemental services as a condition of admitting a child for enrollment in the VPK program.

Attendance Policy File(s):

[Browse...](#) Choose VPK Attendance Policy file by clicking Browse button [Upload](#)

File Name	Uploaded On	Size
-----------	-------------	------

## Step 2 – VPK Director

The VPK Director tab allows the Provider Portal user to add information and upload documents for the primary VPK Director that will be listed on the OEL-VPK 10. Click the **Add New Director** button to begin.

Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

Attendance Policy VPK Director ★ VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

**+ Add New Director**

Show removed directors

Click the **Save** button after all information is entered for the director.

Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

Attendance Policy VPK Director ★ VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

**VPK Director Name:**

**Telephone Number:**

**Email:**

**Credential Type:**

**Credential Certificate Number:**

**Credential Issue Date:**

**Credential Expiration Date:**

**+ Save** **✕ Cancel**

**NOTE:** The Credential Type, Credential Certificate Number, Credential Issue Date, and Credential Expiration Date will not appear for public schools.

Once the VPK Director is added, the supporting documents may be added by clicking **Edit**.

Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

Attendance Policy VPK Director ★ VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

**+ Add New Director**

Show removed directors

★ Jim Ledbetter **Edit** **Remove**

**Supporting Documents:** **Edit**

File Name	Document Type	Issued On	Expires On	Uploaded On	Size
-----------	---------------	-----------	------------	-------------	------

Telephone Number: 5555555555

Email: ledbetter.kwanis+10@gmail.com

Credential Type: VPK Director Credential

Credential Certificate Number: 11111111

Credential Issue Date: 12/01/2017

Credential Expiration Date: 12/03/2018

The Provider Portal user will select the document type, browse to select a file, enter the document issue or expiration date (if applicable), and click **Upload**. Then, click **Save**. At least one document should be uploaded.

Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

VPK Director Name: Jim Ledbetter x

Telephone Number: 5555555555

Email: ledbetter.kiwanis+10@gmail.com

Credential Type: VPK Director Credential ▾

Credential Certificate Number: 11111111

Credential Issue Date: 12/01/2017

Credential Expiration Date: 12/03/2018

Document Type:

Background Screening

Affidavit of Good Moral Character

Credential

Additional Documentation

Choose Files: Browse... Choose documents by clicking Browse button

Document Issued Date: Enter or Select Date

Document Expiration Date: Enter or Select Date

Upload

Save Cancel

File Name	Document Type	Issued On	Expires On	Uploaded On	Size
-----------	---------------	-----------	------------	-------------	------

### Step 3 – VPK Instructors

The VPK Instructors tab allows the Provider Portal user to add information and upload documents for each instructor. Click the **Add New Instructor** button to begin.

Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

+ Add New Instructor

Show removed class instructors

Click the **Save** button after all information is entered for each instructor.

Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

Legal Name:

SSN: Enter SSN

Degree: Select Highest Degree ▾

Type: Select Type ▾

Credential: Select Credential ▾

Certified teacher

Save Cancel



Once the VPK Instructor is added, the supporting documents may be added by clicking **Edit**.

Jim Ledbetter Edit Remove

SSN: 0000000000

Degree: Received an M.A. or an M.S.

Type: Lead

Credential: M.A. or M.S. in an approved field with required minimum hours and experience

Certified Teacher? No

Supporting Documents Edit

File Name	Document Type	Issued On	Expires On	Uploaded On	Size
-----------	---------------	-----------	------------	-------------	------

The Provider Portal user will select the document type, browse to select a file, enter the document issue or expiration date (if applicable), and click **Upload**. Then, click **Save**. At least one document should be uploaded.

Jim's House of Smarties 2017 - 2018 (Incomplete)

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

Legal Name: Jim Ledbetter

SSN: 0000000000

Degree: Received an M.A. or an M.S.

Type: Lead

Credential: M.A. or M.S. in an approved field with required minimum hours and experience

Certified teacher

Save Cancel

Document Type:

- Background Screening
- Affidavit of Good Moral Character
- Credential
- Additional Documentation

Choose Files: Browse... Choose documents by clicking Browse button

Document Issued Date: Enter or Select Date

Document Expiration Date: Enter or Select Date

Upload

File Name	Document Type	Issued On	Expires On	Uploaded On	Size
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**NOTE:** If a VPK Instructor achieves new certifications and moves from a sub to an aide, create a new record for that Instructor. If the Instructor Type is only changed from sub to aide, the maximum class size will not increase to 20 in a class that already has a Lead Instructor.

#### Step 4 – VPK Calendars

The VPK Calendars tab allows the Provider Portal user to provide information regarding each unique class calendar which will be offered at the VPK site. If classes are offered at identical times on identical dates, they utilize the same class calendar (e.g., all classes are scheduled from 8:00am to 11:00am, Monday through Friday, starting on January 11). If classes are not offered at identical times on identical dates, they utilize unique class calendars which must be created separately. Click the **Add New Calendar** button to begin.

Jim's House of Smarties 2017 - 2018 (Incomplete)

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

+ Add New Calendar

Show removed calendars

The Calendar ID will automatically populate with a letter beginning with A. Each additional calendar will receive a sequential Calendar ID.

The Calendar Name is an optional field. It may be used for a short nickname such as "Fall AM."

The program type selection of School-Year (540 hours) or Summer (300 hours) is required. The program selected will determine the valid calendar date range. The Calendar Start Date and Calendar End Date must be within the valid calendar date range. The Calendar Start Date and Calendar End Dates should reflect the first day VPK instruction will be delivered and the final day VPK instruction will be delivered.

Next, the instructional days, start time and end time must be added by checking the box by the days of the week that VPK instruction will be delivered and entering the times of VPK instruction for the days of the week that VPK instruction will be delivered.

Calendar ID:

Calendar Name:

Program Type:

Calendar Start Date:  Calendar End Date:

Please select a program (Summer or School-Year) type to enable date select.

Day	Start Time	End Time
<input type="checkbox"/> Monday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Tuesday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Wednesday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Thursday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Friday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Saturday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Sunday	<input type="text"/>	<input type="text"/>

Valid instructional day entries should be made

Total Calculated Hours: 0.00

The Total Calculated Hours are less than the hours allotted for the VPK Program Type selected. Please correct if needed.

Total VPK Instructional Days: 0

After the instructional days, start time and end time are added, the Total Calculated Hours and Total VPK Instructional Days sections will populate.

Calendar Start Date:  Calendar End Date:

Day	Start Time	End Time
<input checked="" type="checkbox"/> Monday	08:00 AM	11:00 AM
<input checked="" type="checkbox"/> Tuesday	08:00 AM	11:00 AM
<input checked="" type="checkbox"/> Wednesday	08:00 AM	11:00 AM
<input checked="" type="checkbox"/> Thursday	08:00 AM	11:00 AM
<input checked="" type="checkbox"/> Friday	08:00 AM	11:00 AM
<input type="checkbox"/> Saturday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Sunday	<input type="text"/>	<input type="text"/>

Total Calculated Hours: 585.00

The Total Calculated Hours are greater than the hours allotted for the VPK Program Type selected. Please correct.

Total VPK Instructional Days: 195

Providers are to use the calendar to note any non-instructional days on which VPK instruction will not be delivered (such as vacations or holidays) and exceptions to normal instructional days that occur during the defined calendar start and end date. Entering Non-Instructional Days and Instructional Day Exceptions can increase or decrease the Total Calculated Hours.

For example, if the Total Calculated Hours exceed 300 hours for the summer program type or 540 hours for the school-year program type (as shown in the example above), the user may remove a day (or more) by labeling it a Non-Instructional Day. Each Non-Instructional Day entered will deduct the hours assigned to that day, thereby decreasing the Total Calculated Hours. Instructional Day Exceptions can be used to change the hours assigned to that day (to increase or decrease the hours). For example, if the calendar is a few hours short, an instructional day's hours may be extended to increase the Total Calculated Hours. To add a Non-Instructional Day or an Instructional Day Exception to the calendar, click on that date on the calendar. Multiple days can be selected by clicking and dragging across multiple days on the calendar.

Calendar Start Date: 08/21/2017      Calendar End Date: 05/18/2018

Instructional Days:

Day	Start Time	End Time
Monday	08:00 AM	11:00 AM
Tuesday	08:00 AM	11:00 AM
Wednesday	08:00 AM	11:00 AM
Thursday	08:00 AM	11:00 AM
Friday	08:00 AM	11:00 AM
Saturday		
Sunday		

Click a date to modify instructional hours. Multiple days may be selected by clicking and dragging days.

Sun	Mon	Tue	Wed	Thu	Fri	Sat
25	27	28	29	30	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31						

Total Calculated Hours: 585.00

The Total Calculated Hours are greater than the hours allotted for the VPK Program Type selected. Please correct.

Total VPK Instructional Days: 195

+ Save    Cancel

After clicking on a date, a pop-up message will appear. The Provider Portal user must select the Event Type and enter a short description. When an Instructional Day Exception is selected, the user must also enter the time range for the day.

Modify VPK Instructional Day ✕

---

**Event Type:** Select Event Type  
Non-Instructional Day  
Instructional Day Exception

**Description:**

---

Cancel
Update
Remove

Click the **Update** button to save changes. Click the **Remove** button to remove an existing Non-Instructional Day or Instructional Day Exception created on the calendar.

When the Total Calculated Hours match the hours for the VPK program type, the user will click the **Save** button.

Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

Calendar ID:

Calendar Name:

Program Type:

Calendar Start Date:  Calendar End Date:

Start date and end date should be in a valid range for the Program Type selected.

Instructional Days: 

Day	Start Time	End Time
<input type="checkbox"/> Monday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Tuesday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Wednesday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Thursday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Friday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Saturday	<input type="text"/>	<input type="text"/>
<input type="checkbox"/> Sunday	<input type="text"/>	<input type="text"/>

Click a date to modify instructional hours. Multiple days may be selected by clicking and dragging days.

Sun	Mon	Tue	Wed	Thu	Fri	Sat
26	27	28	29	30	1	2
3	4	5	6	7	8	9
10	11	12	13	14	15	16
17	18	19	20	21	22	23
24	25	26	27	28	29	30
31	1	2	3	4	5	6

Valid instructional day entries should be made

Total Calculated Hours: 0.00

The Total Calculated Hours are less than the hours allotted for the VPK Program Type selected. Please correct if needed.

Total VPK Instructional Days: 0

**NOTE:** The hours must equal, or be fewer than, 300 hours for the summer program type or 540 hours for the school-year program type for the calendar to save.

## Step 5 – VPK Class(es)

The VPK Class(es) tab allows the Provider Portal user to build VPK classes and assign instructor(s) to them. Click the **Add New Class** button to begin.

Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

**Add New Class**

Show removed classes

The Class ID will automatically populate after the Class Calendar is selected. The Class ID is created using a sequential letter beginning with A. In the second space, either an “F” for school-year (fall) or “S” for summer will appear. The F and S is derived from the calendar’s program type. The last two digits represent the last two numbers of the program year. Each additional class will receive a sequential Class ID.

The Class Name is an optional field. It may be used for a short nickname such as “Blue Room.”

The Main Curriculum drop down is populated with selections made from the provider’s profile.

The Class Start Date and Class End Date are populated with the Calendar Start Date and End Date.

The Instructors are populated with individuals from the VPK Instructors tab. Check the checkbox in front of the instructor to add them to the class, then enter the Instruction Start Date. If the class has not started, the Instruction Start Date defaults to the Class Start Date. For each class, one Lead Instructor must be selected. Click the **Save** button after all information is entered for each class.

Class ID: ⓘ CF17

Class Name: ⓘ Enter Class Name

Class Calendar: ⓘ A - 1

Main Curriculum: ⓘ BABY DOLL CIRCLE TIME

Class Start Date: ⓘ 01/01/2018

Class End Date: ⓘ 06/29/2018

Instructors:

Jim Ledbetter (Received an M.A. or an M.S, Lead, M.A. or M.S. in an approved field with required minimum hours and experience )

Instruction Start Date: 01/01/2018

Not Jim Ledbetter (Received an M.A. or an M.S, Lead, M.A. or M.S. in an approved field with required minimum hours and experience )

**Save** Cancel

## Step 6 – Review

During the review process, the Provider Portal user can click the **Edit** button to make any changes to a section. After reviewing the information for each section, the user must click the **Certify and Submit** tab button to continue.

Attendance Policy VPK Director VPK Instructors VPK Calendar VPK Class(es) Review **Certify and Submit**

Review - Let's make sure we have all your information

Attendance Policy **Edit**

Attendance Policy File Name	Uploaded On	Size
TEST DOCUMENT.docx	01/02/2018	15 KB

VPK Director **Edit**

Director Name	Telephone Number	Email	Credential Type	Credential Certificate Number	Credential Issue Date	Credential Expiration Date	Supporting Documents
Not Jim Ledbetter (Removed)	5555555555	ledbetter.kiwaniw7@gmail.com	VPK Director Credential	22222222	12/01/2017	12/01/2018	1 Files uploaded
Jim Ledbetter	5555555555	ledbetter.kiwaniw10@gmail.com	VPK Director Credential	11111111	12/01/2017	12/03/2018	2 Files uploaded

VPK Instructors **Edit**

Instructor Name	SSN	Degree	Type	Credential	Is Certified?	Equivalent Credential	Supporting Documents
Not Jim Ledbetter	777777777	Received an M.A. or an M.S	Lead	M.A. or M.S. in an approved field with required minimum hours and experience	No		1 Files uploaded
Jim Ledbetter	000000000	Received an M.A. or an M.S	Lead	M.A. or M.S. in an approved field with required minimum hours and experience	No		1 Files uploaded

VPK Calendars **Edit**

Calendar ID	Calendar Name	Program Type	Start Date	End Date	Instructional Days	Non-Instructional Days	Site Closure Days	Exceptional Instructional Days
A	1	School Year (540 hours)	01/01/2018	05/29/2018	MON 06:00 AM-11:00 AM TUE 06:00 AM-10:00 AM WED 06:00 AM-10:00 AM THU 06:00 AM-10:00 AM FRI 06:00 AM-10:00 AM Total Calculated Hours: 540.00 Total VPK Instructional Days: 130			01/02/2018 06:00 AM-06:00 AM : fire department 01/08/2018 06:00 AM-07:00 AM : police department 01/09/2018 6:00 am-06:00 AM : DCF
B (Removed)	Beta	School Year (540 hours)	01/16/2018	05/31/2018	MON 06:00 AM-12:00 PM TUE 06:00 AM-11:00 AM WED 06:00 AM-11:00 AM THU 06:00 AM-11:00 AM FRI 06:00 AM-11:00 AM Total Calculated Hours: 508.00 Total VPK Instructional Days: 98			

VPK Class(es) **Edit**

Class ID	Class Calendar Name	Main Curriculum	Class Start Date	Class End Date	Instructors
BF17 (Removed)	1	BABY DOLL CIRCLE TIME	01/02/2018	01/02/2018	Not Jim Ledbetter Start date: 01/01/0001
AF17	1	BABY DOLL CIRCLE TIME	01/01/2018	01/02/2018	Not Jim Ledbetter Start date: 01/01/0001

## Step 7 – Certify and Submit

To submit the VPK-APP, the Signer's Name must exactly match the name entered in the Provider Profile, the Provider Portal user must fill in the phone number, check the "Check box to certify by electronic signature" check box and click the **Submit VPK Provider Application** button.

### • Certify and Submit

By signing this form I certify that:

- To the best of my knowledge and belief, the information provided is true and correct.
- If any information changes, I (PROVIDER) will notify the COALITION within 14 days of the change.
- I understand that if changes implemented prior to receipt of COALITION approval may result in noncompliance with VPK requirements.
- Each VPK instructor listed has submitted an attestation of good moral character, has provided documentation to be maintained in the files of the PROVIDER/DISTRICT and the COALITION documenting that the individual has undergone a Level 2 background screening within the previous five (5) years in accordance with section 435.04, F.S., which demonstrates that the individual is not ineligible to act as a VPK instructor; and is not ineligible to teach in a public school because the instructor's educator certificate has been suspended or revoked.
- Each credentialed VPK instructor listed has the credentials required for the VPK program.
- I understand that my information will be shared with the Department of Children and Families, Office of Child Care Regulation, for inclusion in the CARES system.

Provider Signature


**Signer's Name \***

  
**Day Time Phone Number \***  
**Electronic Signature \***

Check this box to certify by electronic signature

**Application Completion Date \***

 You Have Successfully Completed and Submitted your VPK Provider Application!

Congratulations, you have successfully submitted your VPK Provider application.

Your early learning coalition will process your application.

Please check your email for important information about your application.

From here you can:

[Return to dashboard](#)

[Log off](#)

## Updating a VPK-APP

A Provider Portal user can edit a VPK-APP by clicking the **Edit** button on their Manage Contracts page. Clicking the **Download** button will export the information in the VPK-APP to a .pdf document.

Manage contracts for Jim's House of Canes & Gators 9 total records

Show 10 entries ▾

Contract ID ↓	Type of Contract	Contract Name	Coalition	Status	Last Updated	Action	View Contract	Start Date	End Date	Termination Date
45	VPK-APP	VPK 10,11A,11B	ELC of Palm Beach	Certified	06/27/2017	<a href="#">Edit</a>	<a href="#">Download</a>	07/01/2017	07/17/2018	

## VPK Director

To edit the current director's information in the VPK Director tab, click the **Edit** button. To remove a director, click the **Remove** button. To add a new director, click the **Add New Director** button. To edit the current supporting document, or add a new document, click the **Edit** button.

Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

[Attendance Policy](#) [VPK Director](#) [VPK Instructors](#) [VPK Calendars](#) [VPK Class\(es\)](#) [Review](#) [Certify and Submit](#)

[+ Add New Director](#)

Show removed directors

★ Not Jim Ledbetter [Edit](#) [Remove](#)

Supporting Document: [Edit](#)

File Name	Document Type	Issued On	Expires On	Uploaded On	Size
TEST DOCUMENT.docx <a href="#">Download</a>	Background Screening	12/01/2017	12/01/2018	01/02/2018	15 KB

Telephone Number: 5555555555  
Email: ledbetter.kwanis+7@gmail.com  
Credential Type: VPK Director Credential  
Credential Certificate Number: 22222222  
Credential Issue Date: 12/01/2017  
Credential Expiration Date: 12/01/2018

When the **Remove** button is clicked, the following message will display.

Remove Not Jim Ledbetter? ×

**!** You are about to remove this director and make him/her inactive. All information and documents (if any) will be retained. You may re-add this director at a later time if needed. To continue, enter the last day this individual served as VPK Director and click Remove, otherwise click Cancel.

Enter or Select Date

[Remove](#)

[Cancel](#)

Once the director's last day is entered and the **Remove** button is clicked, the director will no longer appear on the VPK Director screen, unless the **Show removed directors** checkbox is checked. The director can be re-added by clicking the **Re-add** button.



Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

+ Add New Director

Show removed directors

★ Not Jim Ledbetter (Removed) [Re-add](#)

Telephone Number:	5555555555
Email:	ledbetter.kiwanis+7@gmail.com
Credential Type:	VPK Director Credential
Credential Certificate Number:	22222222
Credential Issue Date:	12/01/2017
Credential Expiration Date:	12/01/2018

Supporting Documents:

File Name	Document Type	Issued On	Expires On	Uploaded On	Size
TEST DOCUMENT.docx	Background Screening	12/01/2017	12/01/2018	01/02/2018	15 KB

## VPK Instructors

To edit the current instructors' information in the VPK Instructors tab, click the **Edit** button. To add a new instructor, click the **Add New Instructor** button. To remove an instructor, click the **Remove** button. To edit the current supporting document(s), or add a new document, click the **Edit** button.

Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

+ Add New Instructor

Show removed class instructors

Not Jim Ledbetter [Edit](#) [Remove](#)

SSN:	777777777
Degree:	Received an M.A. or an M.S
Type:	Lead
Credential:	M.A. or M.S. in an approved field with required minimum hours and experience
Certified Teacher?	No

Supporting Documents: [Edit](#)

File Name	Document Type	Issued On	Expires On	Uploaded On	Size
TEST DOCUMENT.docx <a href="#">Download</a>	Background Screening	12/01/2017	12/01/2018	01/02/2018	15 KB

---

Jim Ledbetter [Edit](#) [Remove](#)

SSN:	000000000
Degree:	Received an M.A. or an M.S
Type:	Lead
Credential:	M.A. or M.S. in an approved field with required minimum hours and experience
Certified Teacher?	No

Supporting Documents: [Edit](#)

File Name	Document Type	Issued On	Expires On	Uploaded On	Size
TEST DOCUMENT.docx <a href="#">Download</a>	Background Screening	12/01/2017	12/01/2018	01/02/2018	15 KB

If the instructor has not been assigned to a class, when the **Remove** button is clicked, the following message will display.

✕ Remove Not Jim Ledbetter? ✕

ⓘ You are about to remove this instructor and make him/her inactive. All information and documents (if any) will be retained. You may re-add this instructor at a later time if needed. To continue, click Remove, otherwise click Cancel.

Cancel [Remove](#)

Once the **Remove** button is clicked, the instructor will no longer appear on the VPK Instructors screen, unless the **Show removed class instructors** checkbox is checked. The instructor can be re-added by clicking the **Re-add** button.

Jim's House of Smarties 2017 - 2018 (Incomplete)

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

+ Add New Instructor

Show removed class instructors

Not Jim Ledbetter (Removed) **Re-add**

SSN:	77777777
Degree:	Received an M.A. or an M.S.
Type:	Lead
Credential:	M.A. or M.S. in an approved field with required minimum hours and experience
Certified Teacher?	No

Supporting Documents:

File Name	Document Type	Issued On	Expires On	Uploaded On	Size
TEST DOCUMENT.docx	Background Screening	12/01/2017	12/01/2018	01/02/2018	15 KB

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Jim Ledbetter **Edit** **Remove**

SSN:	000000000
Degree:	Received an M.A. or an M.S.
Type:	Lead
Credential:	M.A. or M.S. in an approved field with required minimum hours and experience
Certified Teacher?	No

Supporting Documents: **Edit**

File Name	Document Type	Issued On	Expires On	Uploaded On	Size
TEST DOCUMENT.docx <b>Download</b>	Background Screening	12/01/2017	12/01/2018	01/02/2018	15 KB

If the instructor has been assigned to a class, when the **Remove** button is clicked, the following message will display.

**Instructor is currently assigned** ✕

**!** This action cannot be performed because the instructor is currently assigned to a class. Please remove the instructor from all classes first.

Ok

To remove an instructor from a class, go to the VPK Class(es) section and click the **Edit** button for the class.

Jim's House of Smarties 2017 - 2018 (Incomplete)

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

Add New Class

Show removed classes

AF17 **Edit** **Remove**

Class Name: Alpha  
Class Calendar: 1  
Main Curriculum: BABY DOLL CIRCLE TIME  
Class Start Date: 01/01/2018  
Class End Date: 06/29/2018

Instructors:

Name	Type

January 2018 >

Sun	Mon	Tue	Wed	Thu	Fri	Sat
31	1	2 6a Exception: fire department	3	4	5	6
7	8 6a Exception: police department	9 6a Exception: DCF	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	1	2	3

In the Instructors area, uncheck the instructor's name. Once un-checked, enter the Last Taught Date, or click the **Never began instruction of class** checkbox if the class has not started. Click **Save**.

Class ID:

Class Name:

Class Calendar:

Main Curriculum:

Class Start Date:

Class End Date:

Instructors:

Jim Ledbetter (Received an M.A. or an M.S., Lead, M.A. or M.S. in an approved field with required minimum hours and experience )

Instruction Start Date:

Not Jim Ledbetter (Received an M.A. or an M.S., Lead, M.A. or M.S. in an approved field with required minimum hours and experience )

Last Taught Date:   Never began instruction of class

The VPK Classes tab will now show that the instructor is removed from the class.

CF17  January 2018

Class Name: N/A  
 Class Calendar: 1  
 Main Curriculum: BABY DOLL CIRCLE TIME  
 Class Start Date: 01/01/2018  
 Class End Date: 06/29/2018

Instructors:

Name	Type
Jim Ledbetter	Lead
Not Jim Ledbetter (Removed)	Lead

Sun	Mon	Tue	Wed	Thu	Fri	Sat
31	1 6a Exception: fire department	2	3	4	5	6
7	8 6a Exception: police department	9 6a Exception: DCF	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	1	2	3

Now that the instructor is no longer assigned to any class, the Provider Portal user may go to the VPK Instructors tab to remove the instructor by clicking **Remove**. The following message will display:

**Remove Not Jim Ledbetter?**

**!** You are about to remove this instructor and make him/her inactive. All information and documents (if any) will be retained. You may re-add this instructor at a later time if needed. To continue, click Remove, otherwise click Cancel.

Once the **Remove** button is clicked, the instructor will no longer appear on the VPK Instructors screen, unless the **Show removed class instructors** checkbox is checked. The instructor can be re-added by clicking the **Re-add** button.

Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

+ Add New Instructor

Show removed class instructors

**Not Jim Ledbetter (Removed)** [Re-add](#)

SSN: 77777777

Degree: Received an M.A. or an M.S.

Type: Lead

Credential: M.A. or M.S. in an approved field with required minimum hours and experience

Certified Teacher? No

**Supporting Documents:**

File Name	Document Type	Issued On	Expires On	Uploaded On	Size
TEST DOCUMENT.docx	Background Screening	12/01/2017	12/01/2018	01/02/2018	15 KB

---

**Jim Ledbetter** [Edit](#) [Remove](#)

SSN: 000000000

Degree: Received an M.A. or an M.S.

Type: Lead

Credential: M.A. or M.S. in an approved field with required minimum hours and experience

Certified Teacher? No

**Supporting Documents:** [Edit](#)

File Name	Document Type	Issued On	Expires On	Uploaded On	Size
TEST DOCUMENT.docx <a href="#">Download</a>	Background Screening	12/01/2017	12/01/2018	01/02/2018	15 KB

The Review tab is also updated with the Instructor removal information.

VPK Instructors [Edit](#)

Instructor Name	SSN	Degree	Type	Credential	Is Certified?	Equivalent Credential	Supporting Documents
Jim Ledbetter	000000000	Received an M.A. or an M.S.	Lead	M.A. or M.S. in an approved field with required minimum hours and experience	No		1 Files uploaded
<b>Not Jim Ledbetter (Removed)</b>	77777777	Received an M.A. or an M.S.	Lead	M.A. or M.S. in an approved field with required minimum hours and experience	No		1 Files uploaded

---

VPK Class(es) [Edit](#)

Class ID	Class Name	Start Date	End Date	Instructor	
CF17	1	BABY DOLL CIRCLE TIME	01/01/2018	06/29/2018	Jim Ledbetter
					<b>Not Jim Ledbetter (Removed)</b>

## VPK Calendars

To edit the current calendar in the VPK Calendars tab, click the **Edit** button, make any necessary edits, and click the **Save** button. To remove a calendar, click the **Remove** button. To add a new calendar, click the **Add New Calendar** button.

The screenshot displays the 'VPK Calendars' interface for 'Jim's House of Smarties' in the 2017-2018 school year. It features two calendar views for January 2018. The top calendar, titled 'Non-Instructional, Site Closures and Exceptional Instructional Days', shows instructional days from Monday to Friday, 08:00 AM to 11:00 AM, with exceptions for 'Im department' on Tuesday and 'police department' on Wednesday. The bottom calendar, titled 'Non-Instructional, Site Closures and Exceptional Instructional Days', shows instructional days from Monday to Friday, 08:00 AM to 11:00 AM, with no exceptions. Both calendars include a table of instructional days with columns for Day, Start Time, and End Time. The interface also includes buttons for '+ Add New Calendar', '+ Edit', and '+ Remove', and a summary of total calculated hours and instructional days.

If there are no classes assigned to a calendar, when the **Remove** button is clicked, the following message will display.

The dialog box is titled 'Remove ?' and contains a warning message: 'You are about to remove this calendar and make it inactive. You may re-add this calendar at a later time if needed. Are you sure you want to remove this calendar?'. Below the message are two buttons: 'Cancel' and 'Remove'.

If there are classes assigned to a calendar, the following message will display:

The dialog box is titled 'Calendar is currently assigned' and contains a warning message: 'This action cannot be performed because the calendar is currently assigned to a class. If the class has not started yet, you may remove the calendar from the class and try this action again.'. Below the message is an 'Ok' button.

Once a calendar is removed, the calendar will no longer appear on the VPK Calendars screen, unless the **Show removed calendars** checkbox is checked. The calendar can be re-added by clicking the **Re-add** button.

The screenshot displays the VPK Calendars interface for 'Jim's House of Smarties' in the 2017-2018 school year. It features two calendar views for January 2018. The top view shows a calendar with instructional days and exceptions (e.g., 'Exception: bus department', 'Exception: police department', 'Exception: DCF'). The bottom view shows a calendar with instructional days and a 'Re-add' button highlighted in the left sidebar.

**NOTE:** Calendar End Dates and Class End Dates are editable.

The Calendar End Date can be changed to reflect changes in Non-Instructional Days or holidays that are added after the calendar begins. Changing the Calendar End Date will update the Class End Date and the Instructor Last Taught Date.

The screenshot displays the 'Add New Calendar' form in the VPK Calendars interface for 'Jim's House of Smarties' in the 2018-2019 school year. The 'Calendar End Date' field is highlighted with an orange box, and the 'Show removed calendars' checkbox is checked.

After the calendar is changed, if the provider needs to change the Instruction Start Date of an instructor, the provider will un-check and re-check the checkbox for each instructor and edit the date.

Jim's House of Smarties 2018 - 2019 (Certified) ▾

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

Class ID: AF18

Class Name: Blah

Class Calendar: A -

Main Curriculum: BABY DOLL CIRCLE TIME

Class Start Date: 08/13/2018

Class End Date: 04/21/2019

Instructors:

M (Received a B.S. or a B.A. Lead, 40-hour introductory child care training course )

Instruction Start Date: 08/13/2018

Save Cancel

Jim's House of Smarties 2018 - 2019 (Certified) ▾

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

Class ID: AF18

Class Name: Blah

Class Calendar: A -

Main Curriculum: BABY DOLL CIRCLE TIME

Class Start Date: 08/13/2018

Class End Date: 04/21/2019

Instructors:

M (Received a B.S. or a B.A. Lead, 40-hour introductory child care training course )

Last Taught Date: 02/28/2019  Never began instruction of class

You must select at least one Lead instructor or enter a new class end date.

Save Cancel

The Calendar Name can be added if the provider did not add a Calendar Name when the calendar was created.

Jim's House of Smarties 2018 - 2019 (Certified) ▾

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

+ Add New Calendar

Show removed calendars

A Edit Remove

**Calendar Name:**

Program Type: School Year (340 hours)  
Calendar Start Date: 08/13/2018  
Calendar End Date: 04/21/2019

**Instructional Days:**

Day	Start Time	End Time
Monday	08:00 AM	11:00 AM
Tuesday	08:00 AM	11:00 AM
Wednesday	08:00 AM	11:00 AM
Thursday	08:00 AM	11:00 AM
Friday	08:00 AM	11:00 AM
Saturday		
Sunday		

**Non-Instructional, Site Closures and Exceptional Instructional Days:**

Sun	Mon
29	30
5	6

Total Calculated Hours: 540.00  
Total VPK Instructional Days: 180



## VPK Class(es)

To edit the current class information in the VPK Class(es) tab, click the **Edit** button. To add a new class, click the **Add New Class** button. To remove a class, click the **Remove** button. After all edits have been made for each class, click the **Save** button.

Jim's House of Smarties 2017 - 2018 (Incomplete) ▾

Attendance Policy VPK Director VPK Instructors VPK Calendars VPK Class(es) Review Certify and Submit

**Add New Class**

Show removed classes

**AF17** **Edit** **Remove** January 2018 month list

Class Name: Alpha  
 Class Calendar: 1  
 Main Curriculum: BABY DOLL CIRCLE TIME  
 Class Start Date: 01/01/2018  
 Class End Date: 06/29/2018

Instructors:

Name	Type

Sun	Mon	Tue	Wed	Thu	Fri	Sat
31	1	2 6a Exception: fire department	3	4	5	6
7	8 6a Exception: police department	9 6a Exception: DCF	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	1	2	3

**Save** **Cancel**

Classes that have started may not be removed. Limited editing is available.

**CF17** **Edit** January 2018 month list

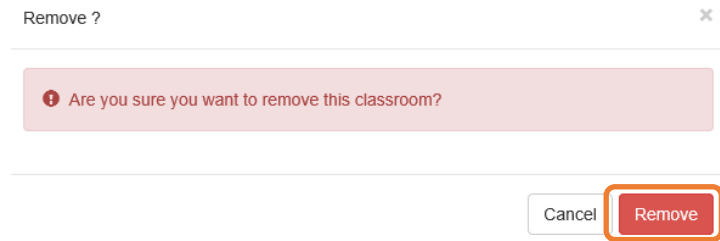
Class Name: N/A  
 Class Calendar: 1  
 Main Curriculum: BABY DOLL CIRCLE TIME  
 Class Start Date: 01/01/2018  
 Class End Date: 06/29/2018

Instructors:

Name	Type
Jim Ledbetter	Lead
Not Jim Ledbetter (Removed)	Lead

Sun	Mon	Tue	Wed	Thu	Fri	Sat
31	1	2 6a Exception: fire department	3	4	5	6
7	8 6a Exception: police department	9 6a Exception: DCF	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	1	2	3

If the class has not started, when the **Remove** button is clicked, the following message will display:



Once the **Remove** button is clicked, the class will no longer appear on the VPK Class(es) screen, unless the **Show removed classes** checkbox is checked.

The screenshot shows the "VPK Class(es)" screen for "Jim's House of Smarties" for the 2017-2018 school year. The page has a navigation bar with links for "Attendance Policy", "VPK Director", "VPK Instructors", "VPK Calendars", "VPK Class(es)", "Review", and "Certify and Submit". Below the navigation bar, there is a section for "Add New Class" and a checkbox labeled "Show removed classes" which is checked. The main content area displays two class entries, each with a calendar for January 2018. The first class is "BF17" with a status of "Class Name: Beta(Removed)". The second class is "AF17" with a status of "Class Name: Alpha". Both classes have a "Class Calendar: 1" and "Main Curriculum: BABY DOLL CIRCLE TIME". The calendars show dates from 1 to 31, with some dates marked as "Exception by department" or "Exception DCF".

To end the class, click the **Edit** button and change the Class End Date to reflect the last day that VPK instruction was provided. The Instructor Last Taught Date will be updated to the Class End Date after clicking the **Save** button.

Class ID:

Class Name:

Class Calendar:

Main Curriculum:

Class Start Date:

**Class End Date:**

Instructors:

Jim Ledbetter (Received an M.A. or an M.S., Lead, M.A. or M.S. in an approved field with required minimum hours and experience )

Instruction Start Date:

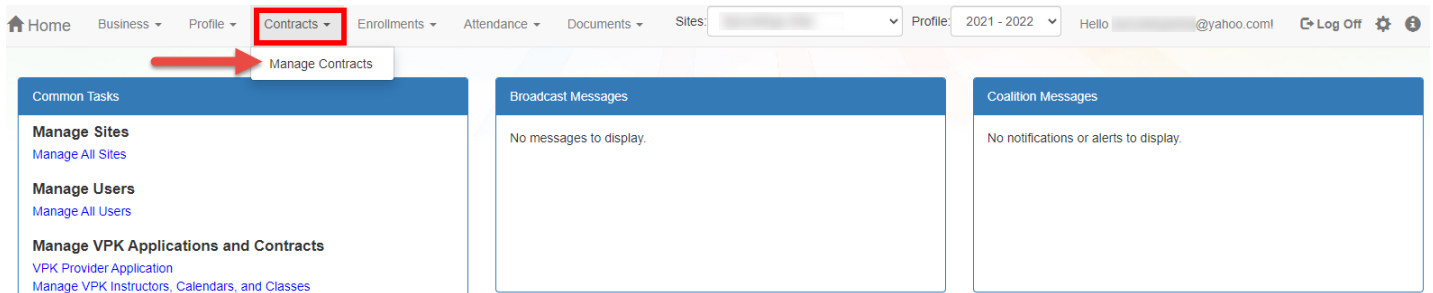
**Save**

The Review tab will now reflect the updated class information.

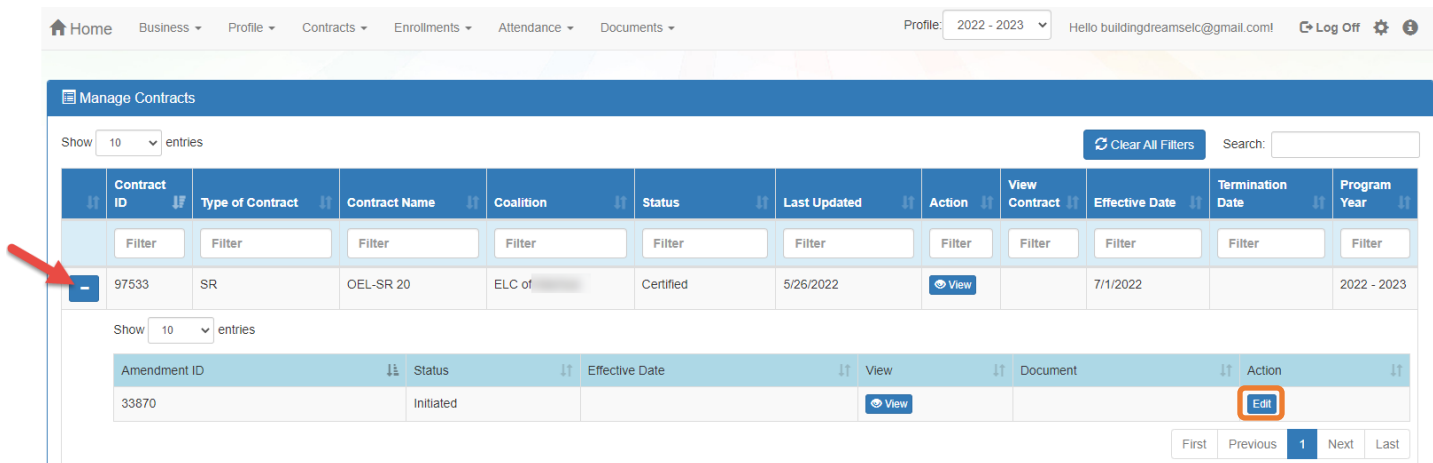
VPK Class(es) <input type="button" value="Edit"/>						
CF17	1	BABY DOLL CIRCLE TIME	01/01/2018	02/22/2018	Jim Ledbetter	Last Taught Date: 02/22/2018
					<b>Not Jim Ledbetter (Removed)</b>	Last Taught Date: 02/22/2018

# Editing an SR Contract Amendment

Navigate to **Contracts > Manage Contracts**.



The Manage Contracts page for the provider site displays. Click the plus “+” sign to the left of the OEL-SR 20 contract to expand the amendment section. The amendment is in **Initiated** status. Click the **Edit** button.



**NOTE:** The amendment status changes from **Initiated** to **Incomplete** while the amendment is being edited.

Review the Provider(s), Provider Eligibility, Notification, and Signature Authority sections.

- PROVIDER RESPONSIBILITIES AND SCOPE OF WORK – If applicable, the contracted slots question displays. Select a response.
- NOTIFICATION – Enter any changes to the provider contact information, if applicable.
- SIGNATURE AUTHORITY – If any changes are needed to the existing signature authority selections, click the dropdown menu. Select all users who are authorized to sign contracts and amendments. To remove a Signator, deselect the user(s) to be removed.
  - **NOTES:**
    - Any previously selected users should remain selected if they are still authorized signatories.
    - Users with coalition portal aces will not be on the authorized signators list.

School Readiness (SR) Contract Amendment Preview Amendment

Provider(s):  
1. [Redacted]  
2. [Redacted]

**II. PROVIDER ELIGIBILITY**

II.8.a The Coalition participates in the Contracted Slots Program. Yes [v]

II.8.c The COALITION has determined the PROVIDER eligible to participate in the Contracted Slots Program. Yes [v]

**III. PROVIDER RESPONSIBILITIES AND SCOPE OF WORK**

III.30. If applicable, does the eligible PROVIDER, pursuant to paragraph 8, elect to participate in the Contracted Slots Program? \* [Select v]

**XI. NOTIFICATION**

XI.83.b Previous Provider Contact

Name: [Redacted]

Phone: [Redacted]

Email: [Redacted]@yahoo.com

New Provider Contact (if applicable)

Name: [Redacted]

Phone: [Redacted]

Email: [Redacted]

**SIGNATURE AUTHORITY**

**IMPORTANT!** If there are any changes, select all users who are currently authorized to sign contracts and amendments, including any previously selected names if they are still authorized signatories.

[Redacted] @gmail.com v

Reason for modification:

[Redacted]

Save Next Step >

Click **Next Step** to proceed to the Exhibit 1 page.

Below is an example of an amendment for a multiple-site provider where a new site is being added to the contract. The page displays both providers currently on the contract and the new site being added to the contract.

### Original Provider

- PROVIDER ELIGIBILITY – If the provider’s Composite Program Assessment Score is 5.00 or greater, the provider can change their selection for waiving their biennial status and enter a reason for modification. **NOTE:** If the provider is answering the question for the first time, a response (Yes or No) is required.
- PROVIDER RESPONSIBILITIES AND SCOPE OF WORK – If a change is needed to the provider’s selection to conduct child assessments (*ONLY during the appropriate child assessment period*) or the child assessment tool needs to be changed, make the new selections and enter the reason for modification.

### Added Provider

If a provider is being ADDED to the contract:

- PROVIDER ELIGIBILITY
  - If the provider is exempt from Program Assessment requirements, select if the provider wants to waive their exemption and receive a program assessment.
  - If the provider has a Composite Program Assessment Score of 5.00 or greater, select if the provider agrees to waive their biennial status and agree to an annual program assessment.
- PROVIDER RESPONSIBILITIES AND SCOPE OF WORK – Select if the provider conducts child assessments. If yes, select the assessment tool.

The screenshot shows a web form titled "School Readiness (SR) Contract Amendment" with a "Preview Amendment" link in the top right. The form is divided into two sections, each representing a provider. The top section is for the "Original Provider" and the bottom section is for the "Provider being added to the contract".

**Original Provider Section:**

- PROVIDER ELIGIBILITY:** Includes a dropdown for "The PROVIDER waives the PROVIDER'S exemption and agrees to comply with requirements of Rules 6M-4.740, F.A.C." (set to "No"), a text input for "Composite Program Assessment Score" (5.25), a dropdown for "The PROVIDER waives their biennial status and agrees to receive an annual program assessment." (set to "N/A"), and a dropdown for "The new selection is:" (set to "Select").
- PROVIDER RESPONSIBILITIES AND SCOPE OF WORK:** Includes a dropdown for "Change in PROVIDER'S selection to conduct child assessments or eligibility to receive the Child assessment rate." (set to "Yes"), a dropdown for "The previous assessment tool is:" (set to "TS Gold"), a dropdown for "Change in PROVIDER'S selection to conduct child assessments or eligibility to receive the Child assessment rate." (set to "Select"), and a dropdown for "The new assessment tool is:" (set to "Select").

**Provider being added to the contract Section:**

- PROVIDER ELIGIBILITY:** Includes a dropdown for "The COALITION has determined the PROVIDER is exempt from the program assessment requirement pursuant to Rule 6M-4.740, F.A.C." (set to "No"), a text input for "Composite Program Assessment Score" (4.25).
- PROVIDER RESPONSIBILITIES AND SCOPE OF WORK:** Includes a dropdown for "If applicable, the eligible PROVIDER, agrees to conduct child assessments using a reliable assessor as defined by the child assessment tool, that meet the criteria described in s. 1002.82(9), F.S., at least three times per year and will submit valid and reliable data to the statewide information system. If the PROVIDER selects to conduct child assessments, PROVIDER understands the requirements of the rule must be met to receive the child assessment differential." (set to "Yes"), a dropdown for "PROVIDER agrees to conduct child assessments in accordance with Rule 6M-4.500(1), F.A.C. using the selected as the assessment tool." (set to "TS Gold").

At the bottom of the form, there are "Previous Step" and "Next Step" buttons.

Click **Next Step** to continue.

The Exhibit 3: Quality Improvement Plan (QIP) Selection page displays if the coalition selected a new QIP strategy. If Exhibit 3 displays, initial the selected strategy. Then, click **Next Step**.

SR Amendment Quality Improvement Plans Preview Amendment

Exhibit 3: Quality Improvement Plan Selection

Selection	Strategy	Description (summary)
<input type="checkbox"/>	COALITION approved strategy	Description included in QIP Notice.
<input type="checkbox"/>	Certified Coaching Visits	Each selected classroom will participate in 20 hours of certified coaching provided by the ELC or its delegate.
<input checked="" type="checkbox"/>	CLASS Group Coaching (CGC) Training	Each selected instructor/director will complete either the CGC PreK 24-hour course or the CGC Infant/Toddler 24-hour course provided by the COALITION's or its delegate's CGC Specialist.
<input type="checkbox"/>	Early Childhood Training System (ECTS) Courses	Each selected instructor/director will successfully complete two Early Childhood Training System courses facilitated by the ELC. Course options include taking an online course alone, with TA coaching support and/or as a member of a COALITION-sponsored Community of Practice.
<input type="checkbox"/>	20-hours of IACET- or OEL-approved training	Each selected instructor/director will register for and successfully complete 20 hours of International Association for Continuing Education & Training (IACET) approved training (or other OEL-approved CEU training) provided by the ELC or their delegate.
<input type="checkbox"/>	Professional Development	Each selected instructor/director shall register in the Florida Early Care and Education Professional Development Registry, generate a professional development plan in the registry and complete the required progression along the career pathway.

The Exhibit 5 page for registration fee displays if the provider charges an annual registration fee. If a change is needed to the annual fee collection frequency, make a new selection (Month, Upon Enrollment, or Other).

If a new provider site is being added to the contract and they charge an annual registration fee, an annual collection frequency is required (Month, Upon Enrollment, or Other). Click **Next Step** to continue.

**Exhibit 5: Provider Reimbursement Rates**

Provider Name: [REDACTED]

**Registration Fee**

If PROVIDER charges a registration fee please check one and provide the amount: \$

One time fee upon enrollment.

Annual fee.  ▼

Other Describe: \_\_\_\_\_

The Exhibit 6: Holiday Schedule page displays. Click the **Edit** button to add or remove holidays, if applicable.

**NOTE:** Coalition paid holidays cannot be edited by the provider.

School Readiness (SR) Contract Preview Amendment

**Exhibit 6: Holiday Schedule**

Provider Name: _____		<a href="#">Edit</a>
	Holiday	Date Observed
1.	Day After Thanksgiving	11/25/2021
2.	Christmas Eve	12/24/2021
3.	Christmas Day Observed	12/27/2021
4.	New Years Eve	12/31/2021
5.	Good Friday	4/15/2022
6.	Easter Observed	4/15/2022
7.	Memorial Day	5/27/2022
8.	Independence Day Observed	7/5/2021
9.	Labor Day	9/8/2021
10.	Thanksgiving Day	11/25/2021
11.	Day Before Thanksgiving	11/24/2021
12.		

**Exhibit 6: Holiday Schedule**

Provider Name: _____		<a href="#">Edit</a>
	Holiday	Date Observed
1.	Independence Day Observed	7/5/2021
2.	Labor Day	9/8/2021
3.	Thanksgiving Day	11/25/2021
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		

[Previous Step](#) [Next Step](#)

**Paid Holidays for Multiple Sites**

All sites use this holiday schedule?

Provider Name: \_\_\_\_\_

	Holiday	Date	
1.	Independence Day Observed	7/5/2021	
2.	Labor Day	9/6/2021	
3.	Thanksgiving Day	11/25/2021	
4.	Christmas Eve	12/24/2021	+
5.	New Years Eve	12/31/2021	+
6.	Good Friday	4/15/2022	+
7.	Memorial Day	5/30/2022	+
8.	<input type="text"/>	<input type="text"/>	▼
9.	<input type="text"/>	<input type="text"/>	▼
10.	<input type="text"/>	<input type="text"/>	▼
11.	<input type="text"/>	<input type="text"/>	▼
12.	<input type="text"/>	<input type="text"/>	▼

[Save](#) [Close](#)



To save your changes, click **Save** in the edit window, then click **Close** to close the window. Click **Next Step** to proceed.

**Exhibit 6: Holiday Schedule**

Provider Name: _____		<a href="#">Edit</a>
	Holiday	Date Observed
1.	Independence Day Observed	7/5/2021
2.	Labor Day	9/6/2021
3.	Thanksgiving Day	11/25/2021
4.	Christmas Eve	12/24/2021
5.	New Years Eve	12/31/2021
6.	Good Friday	4/15/2022
7.	Memorial Day	5/30/2022
8.		
9.		
10.		
11.		
12.		

[← Previous Step](#)
[Next Step >](#)

On the Amendment Signatures page, click the **Preview** button to review the OEL-SR 20A form to verify changes before signing and submitting the amendment. Click the “By Electronic Signature” box to electronically sign the amendment

[Preview Amendment](#)

### Amendment Signatures

Click the check box to sign electronically. After signing, click Next to proceed to the submission page.

---

**Signature of President/Vice President/Secretary/Officer/Owner/Principal/or Other Authorized Representative**

By Electronic Signature Print Name \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

---

**Provider's Additional Signatory (if required by the Provider)**

By Electronic Signature Print Name \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.

---

**Signature of Authorized Coalition Representative**

By Electronic Signature Print Name \_\_\_\_\_

Title \_\_\_\_\_ Date \_\_\_\_\_

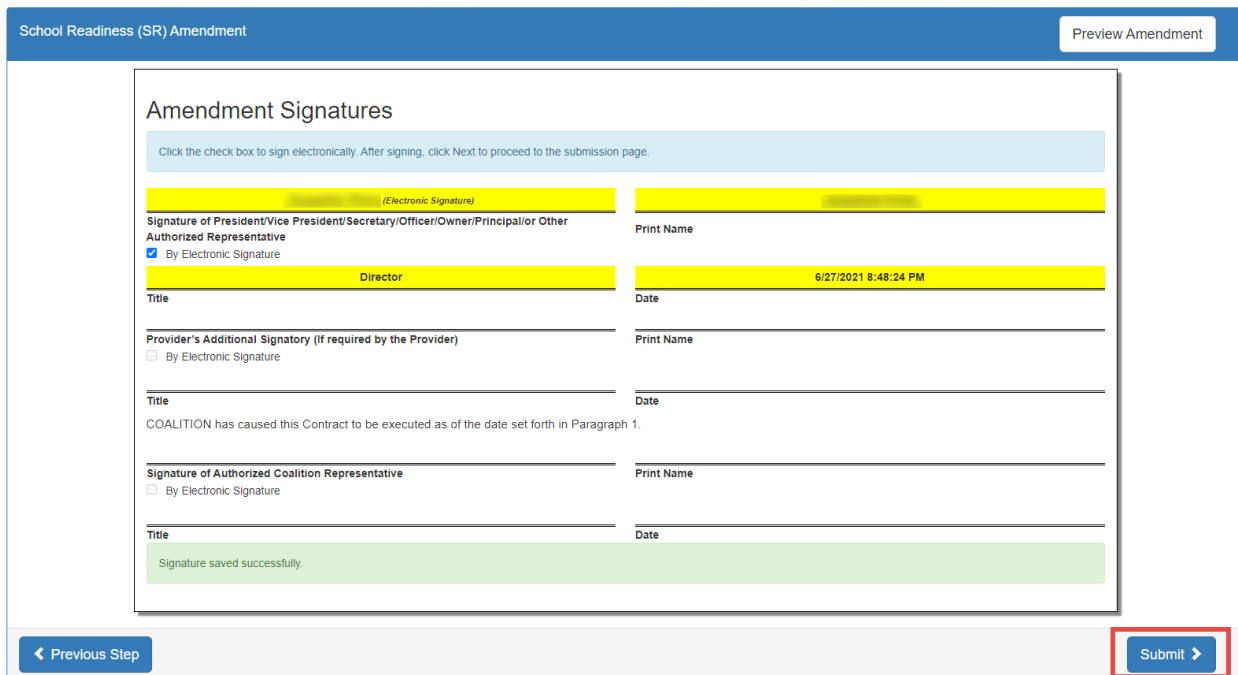
[← Previous Step](#)
[Submit >](#)

Enter the Title of Signator (NOT the Signator's name), then click **Yes** to proceed with electronically signing the amendment. Click **Cancel** to close the window without signing.



NOTE: To add an additional signature, click Cancel and have the other Signator log in with their username to sign the amendment before submitting. To remove the provider's signature before submitting the amendment, deselect the "By Electronic Signature" box and click **Yes** in the confirmation pop-up window.

When **Yes** is clicked in the pop-up window, the signator's signature, printed name, title and the date are populated and saved. Click **Submit** to proceed.



On the SR Amendment Certification page, enter Full Name and Title, then click the “Certified by electronic signature box.” Click **Submit** to submit the amendment to the coalition.

A message that you have successfully completed, signed, certified, and submitted your SR amendment displays.

Navigate to **Contracts > Manage Contracts** to view the submitted amendment. Click the plus “+” sign to the left of the OEL-SR 20 contract to expand the amendment section. The amendment is in **Submitted** status. Click the **View** button to preview the amendment in a new browser tab.

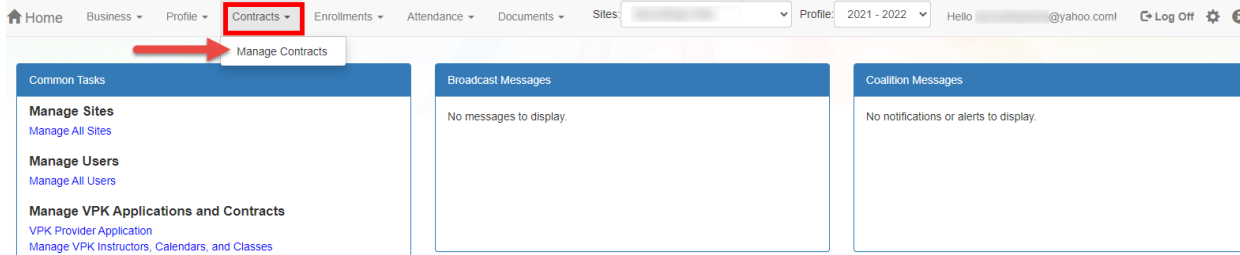
Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Action	View Contract	Effective Date	Termination Date	Program Year
83406	SR	OEL-SR 20		Certified	6/27/2021	View		7/1/2021		2021 - 2022

Amendment ID	Status	View	Document	Action
18461	Submitted	View		

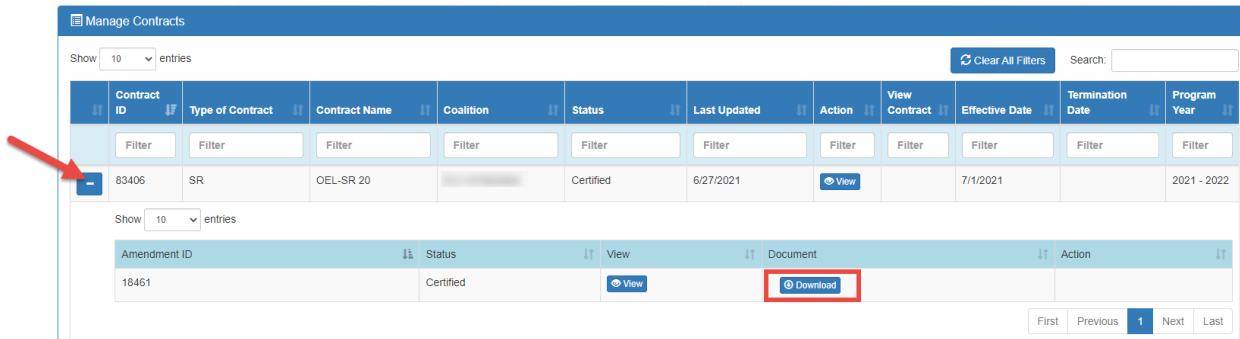
## Viewing a Certified SR Contract Amendment

After the coalition certifies the SR amendment, navigate to **Contracts > Manage Contracts**.



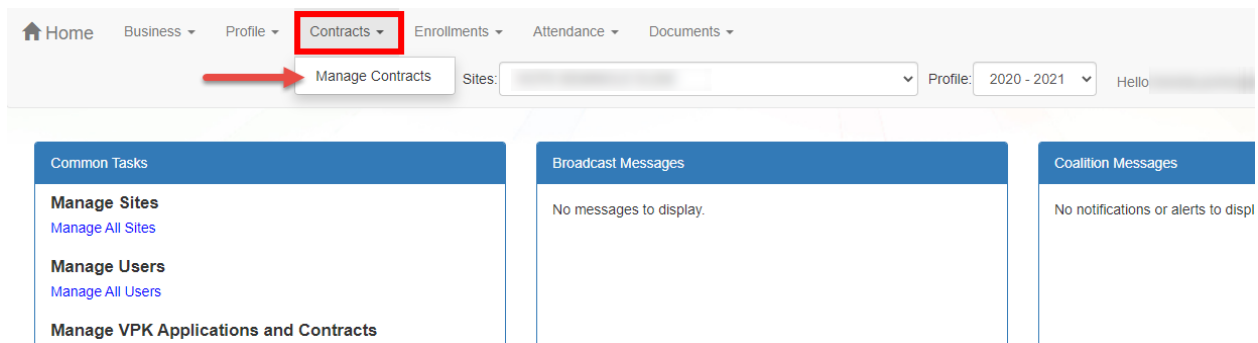
The Manage Contracts page displays. Click the plus “+” sign to the left of the OEL-SR 20 contract to expand the amendment section. The amendment is in **Certified** status.

To download a PDF of the certified OEL-SR 20A and any associated exhibits, click the **Download** button.

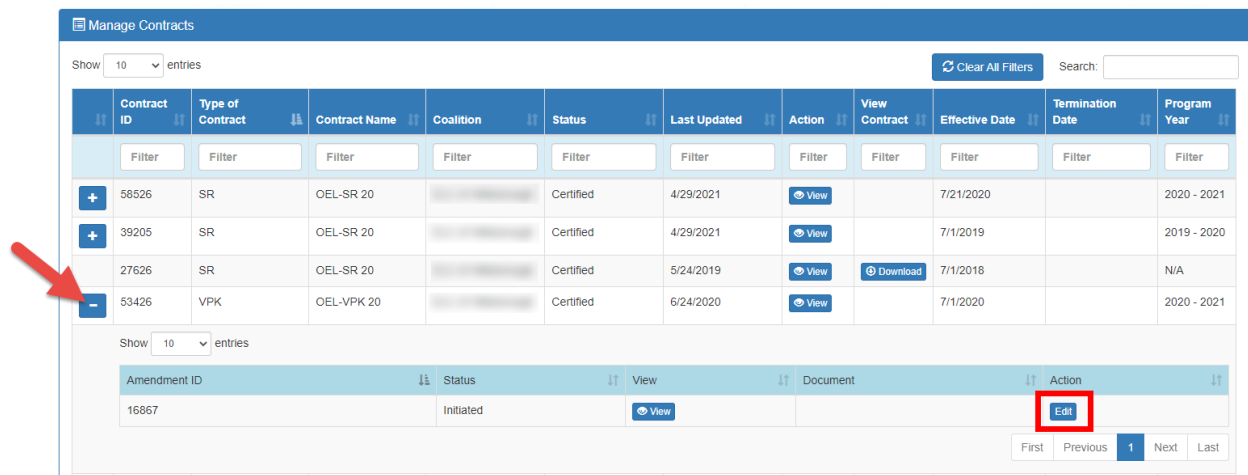


## Editing a VPK Contract Amendment

Navigate to **Contracts > Manage Contracts**.



The Manage Contracts page displays. Click the plus “+” sign to the left of the OEL-VPK 20 contract to be amended to expand the amendment section. The amendment is in **Initiated** status. Click the **Edit** button.



**NOTE:** The amendment status changes from **Initiated** to **Incomplete** while the amendment is being edited.

The Compensation and Funding page displays. The advance payment selections default to the selections on the VPK contract or latest amendment. If a change is needed, select the new advance payment option for the school year and/or summer programs. Click **Next Step** to continue.

Voluntary Prekindergarten (VPK) Contract Amendment Preview Amendment

Provider(s):

### VII COMPENSATION AND FUNDING

VII.40. **Advance Payment Option**

**School Year Program**  
 PROVIDER elects not to receive monthly advance payments for the school year program.

**Summer Program**  
 PROVIDER elects not to receive monthly advance payments for the summer program.

Selection applies to any site included in the contract

Changing the advance payment selection will affect all sites on the contract. If you are a provider on a multiple-site contract and you intend to change the advance payment selection(s) for this site (but not all sites), contact your coalition to be removed from the contract. A separate VPK contract will need to be executed for the site that is removed from this contract.

Save Next Step >

**NOTE:** For VPK contracts with multiple sites, changing the advance payment selection will affect all sites on the contract. If you are a provider on a multiple-site contract and you intend to change the advance payment selection(s) for specific sites, but not all, contact your coalition to remove those sites from the contract. A separate VPK contract will need to be executed for the provider sites that are removed from the contract.

If one or more provider is being added to the contract, the Exhibit 1: Provider Location List Attachment displays. Select the box for school year and/or summer if the provider will offer the session, then click **Next Step**.

Voluntary Prekindergarten (VPK) Amendment Preview Amendment

Exhibit 1 : Provider Location List Attachment

Location Number	Location Legal Name	Doing Business As	Physical Address	Employer ID Number(EIN)	School Year	Summer	Conducts Child Assessments (Yes/No)	Child Assessment tool used	Official Use Only
					<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>			

< Previous Step Save Next Step >

The Amendment Signatures page displays. To preview the DEL-VPK 20A form, click **Preview Amendment**.

Voluntary Prekindergarten (VPK) Amendment

**Preview Amendment**

---


### Amendment Signatures

Click the check box to sign electronically. After signing, click Next to proceed to the submission page.

Signature of President/Vice President/Secretary/Officer/Owner/Principal/Other Authorized Representative <input type="checkbox"/> By Electronic Signature	Print Name
Title	Date

The DEL-VPK 20A loads in a new browser tab.

1 of 3 100%



**STATE OF FLORIDA**  
**AMENDMENT TO STATEWIDE VOLUNTARY PREKINDERGARTEN**  
**PROVIDER CONTRACT**  
**Form DEL-VPK 20A**

**I. General Amendment Information**

<b>Amendment Number:</b>	28718
--------------------------	-------

**II. Parties and Terms of Contract Amendment**

This AMENDMENT to the Statewide Voluntary Prekindergarten (VPK) Provider Contract is entered into between the Early Learning Coalition of Alachua and INC, VPK provider (PROVIDER).

WHEREAS, on 7/1/2022 the Early Learning Coalition of Alachua entered into the Contract with this Provider to provide VPK services; and

WHEREAS, PROVIDER desires to amend this Contract to replace, delete, or supplement one of the following provisions of the existing Contract; and

WHEREAS, the Early Learning Coalition of Alachua agrees to amend the Statewide Voluntary Prekindergarten Provider Contract as indicated in Section III.

**III. Amendments**

The Contract is hereby amended to replace the following as noted below (check each applicable box for the modified term(s)).

**Location of the Provider's Principal Office. The deleted address is:**  
GAINESVILLE, FL 32609-2169

The replacement address is:  
GAINESVILLE, FL 32609-2169

Reason for modification:  
Removed duplicate Address 2.

**Provider Type (Modification to DEL-VPK 20PB). The original provider type selected is:**

To sign the amendment electronically, on the Amendment Signatures page, click the box for the provider authorized representative.

Voluntary Prekindergarten (VPK) Amendment Preview Amendment

### Amendment Signatures

Click the check box to sign electronically. After signing, click Next to proceed to the submission page.

Signature of President/Vice President/Secretary/Officer/Owner/Principal/ or Other Authorized Representative

By Electronic Signature

Print Name

Title

Date

Provider's Additional Signatory (If required by the Provider)

By Electronic Signature

Print Name

Title

Date

Provider's Additional Signatory (If required by the Provider)

By Electronic Signature

Print Name

Title

Date

When the electronic signature box is checked, a pop-up window displays. Enter the Signator's title (not the name), then click **Yes** to proceed with electronically signing the amendment, or click **Cancel** to close the window without signing.

Voluntary Prekindergarten (VPK) Amendment Preview Amendment

### Amendment Signatures

Click the check box to sign electronically. After signing, click Next to proceed to the submission page.

Signature of President/Vice President/Secretary/Officer/Owner/Principal/ or Other Authorized Representative

By Electronic Signature

Print Name

Title

Date

Provider's Additional Signatory (If required by the Provider)

By Electronic Signature

Print Name

Title

Date

VPK Amendment Electronic Signature

You are about to electronically sign the VPK Amendment.

Title of Signator: \* Director

Click "Yes" to confirm your electronic signature.

Yes Cancel



When **Yes** is clicked, the signator's signature, printed name, title and the date/time are populated and saved. Click **Submit**.

To remove the provider's signature before submitting the amendment, unselect the By Electronic Signature box and click **Yes** in the confirmation pop-up window.

**NOTE:** To add an additional signature, have the other Signator log in to sign the amendment before submitting.

When the **Submit** button is clicked on the signatures page, the VPK Amendment Certification page displays. Enter Full Name and Title, and click the "Certified by electronic signature box." Click **Submit**.

The successfully completed, signed, certified, and submitted message appears.

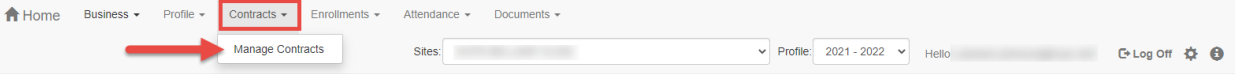
 You Have Successfully Completed, Signed, Certified and Submitted your VPK Amendment!


**Your early learning coalition will review and process your amendment.**  
**Please check your email for important information regarding your amendment.**

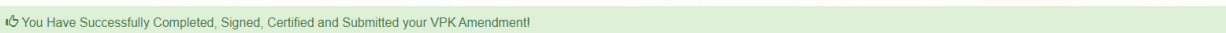
You can click on the button below to return to your home page.

[Return to home page](#)

Navigate to **Contracts > Manage Contracts**.

 Home Business Profile **Contracts** Enrollments Attendance Documents

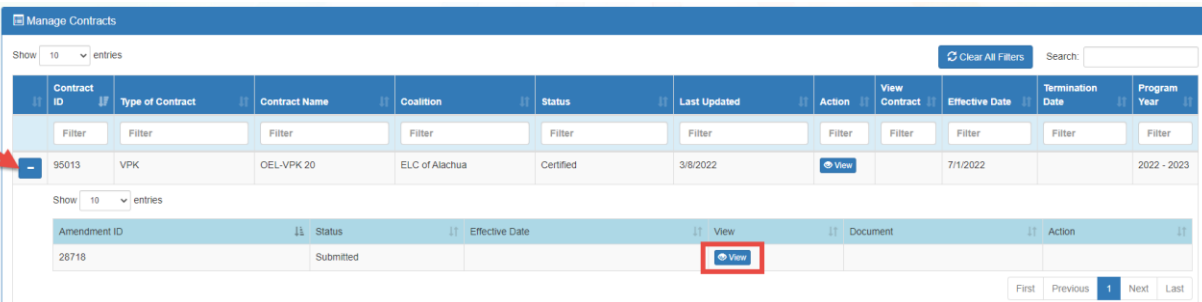
 Manage Contracts Sites: Profile: 2021 - 2022 Hello Log Off

 You Have Successfully Completed, Signed, Certified and Submitted your VPK Amendment!

**Your early learning coalition will review and process your amendment.**  
**Please check your email for important information regarding your amendment.**



The Manage Contracts page displays. Click the plus “+” sign to the left of the VPK contract that is being amended to expand the amendment section. The amendment is in **Submitted** status.

To preview the submitted DEL-VPK 20A form and any associated exhibits, click the **View** button.




Manage Contracts

Show 10 entries

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Action	View Contract	Effective Date	Termination Date	Program Year
95013	VPK	OEL-VPK 20	ELC of Alachua	Certified	3/8/2022			7/1/2022		2022 - 2023

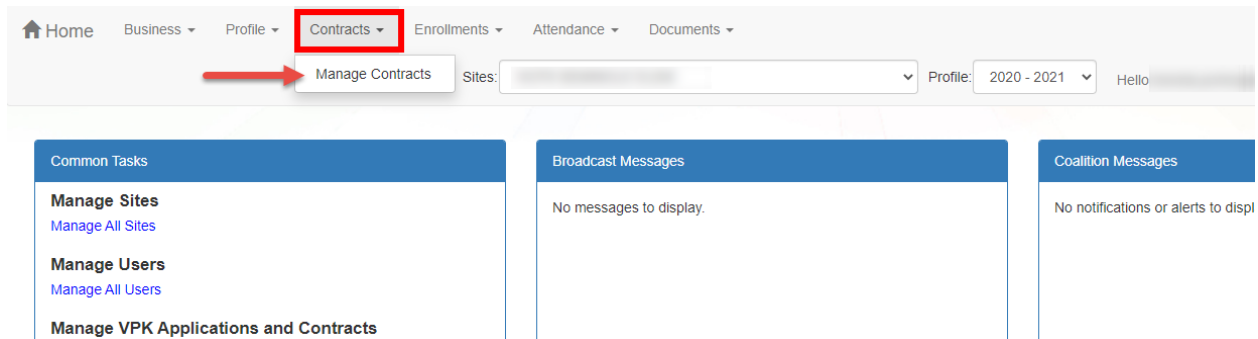
Show 10 entries

Amendment ID	Status	Effective Date	View	Document	Action
28718	Submitted				

First Previous 1 Next Last

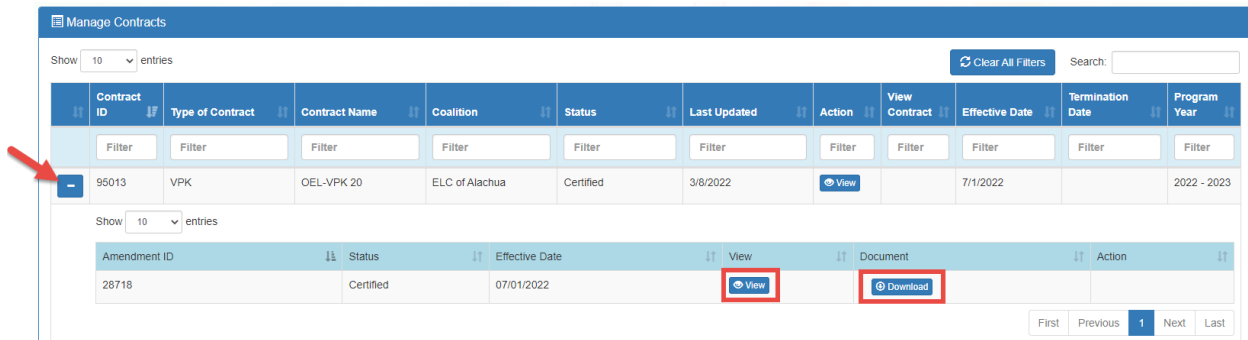
## Viewing a Certified VPK Contract Amendment

Navigate to **Contracts > Manage Contracts**.



The Manage Contracts page displays. Click the plus “+” sign to the left of the VPK contract to expand the amendment section. The amendment is in **Certified** status.

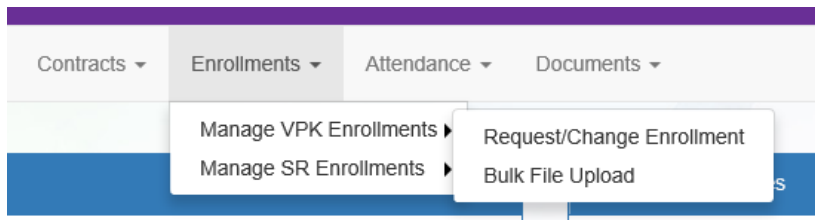
To preview the certified DEL-VPK 20A form and any associated exhibits, click the **View** button, or click the **Download** button to download the amendment as a PDF.



**NOTE:** The amendment status changes from **Initiated** to **Incomplete** while the amendment is being edited.

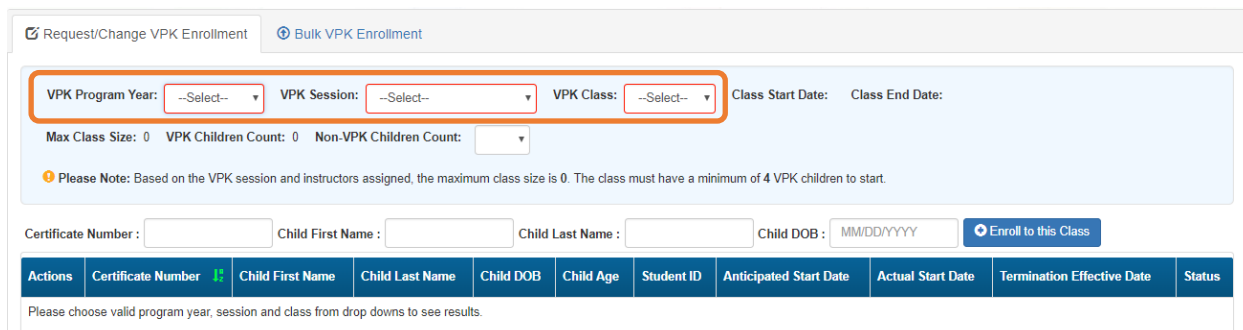
## Enrollments - VPK

VPK Providers may manage VPK enrollment online by going to **Enrollments > Manage VPK Enrollments**. Two options are available: Request/Change Enrollment and Bulk File Upload.



### Request/Change Enrollment

This feature allows VPK Providers to request or change enrollment for children in verified classes submitted through the VPK Provider Application. To begin, select the VPK Program Year, VPK Session, and VPK Class.



Request/Change VPK Enrollment Bulk VPK Enrollment

VPK Program Year: --Select-- VPK Session: --Select-- VPK Class: --Select-- Class Start Date: Class End Date:

Max Class Size: 0 VPK Children Count: 0 Non-VPK Children Count: 0

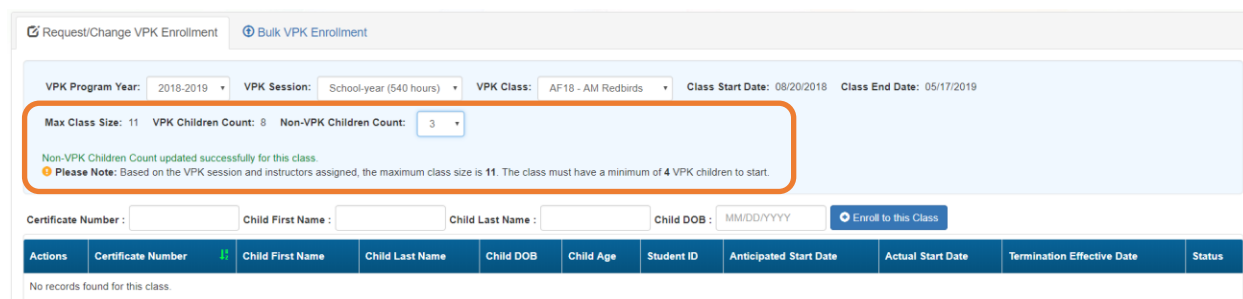
Please Note: Based on the VPK session and instructors assigned, the maximum class size is 0. The class must have a minimum of 4 VPK children to start.

Certificate Number: Child First Name: Child Last Name: Child DOB: MM/DD/YYYY Enroll to this Class

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
Please choose valid program year, session and class from drop downs to see results.										

With the VPK Program Year, VPK Session, and VPK Class selected, the class start date and end date appear as well as the max class size. This information is directly tied to the VPK Provider Application. For example, if there is one lead instructor for the school-year session submitted and verified on the VPK Provider Application, the max class size will be 11; if there are two instructors for the school-year session submitted and verified on the VPK Provider Application, the max class size will be 20.

Next, the VPK children count and Non-VPK children count are displayed. These two counts (summed together) cannot exceed the max class size. The Non-VPK children count is used to anonymously indicate private pay children participating in the VPK class. The Non-VPK children count defaults to zero. When the Non-VPK children count is used, the number of VPK children permitted in the class is reduced to maintain the max class size limit.



Request/Change VPK Enrollment Bulk VPK Enrollment

VPK Program Year: 2018-2019 VPK Session: School-year (540 hours) VPK Class: AF18 - AM Redbirds Class Start Date: 08/20/2018 Class End Date: 05/17/2019

Max Class Size: 11 VPK Children Count: 8 Non-VPK Children Count: 3

Non-VPK Children Count updated successfully for this class.

Please Note: Based on the VPK session and instructors assigned, the maximum class size is 11. The class must have a minimum of 4 VPK children to start.

Certificate Number: Child First Name: Child Last Name: Child DOB: MM/DD/YYYY Enroll to this Class

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
No records found for this class.										

The class roster records are also displayed. If there are no children enrolled in the class, a “No records found for this class” message displays.

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
No records found for this class.										

If there are/were children enrolled in the class, the records are listed with the current enrollment status (Enrolled, Enrolled-Change Requested, or Enrollment Ended (Terminated)).

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
Class change <span>Never Attended</span>	VPK1471369-2019				4y		09/19/2019			Enrolled
Class change <span>Never Attended</span>	VPK1464599-2019				4y		09/05/2019			Enrolled
Class change <span>Never Attended</span>	VPK1460740-2019				4y		09/06/2019			Enrolled
Class change	VPK1452929-2019				4y		08/28/2019	08/28/2019		Enrolled
Class change	VPK1448191-2019				4y		08/12/2019	08/13/2019		Enrolled
Class change	VPK1445936-2019				4y		08/13/2019	08/13/2019		Enrolled
Class change	VPK1442765-2019				4y		08/21/2019	08/21/2019		Enrolled
Class change	VPK1435887-2019				4y		08/12/2019	08/12/2019		Enrolled
Class change	VPK1427725-2019				4y		08/12/2019	08/12/2019		Enrolled
Class change	VPK1426560-2019				4y		08/12/2019	08/12/2019		Enrolled
Class change	VPK1402097-2019				4y		08/12/2019	08/12/2019		Enrolled
Class change	VPK1303954-2019				4y		08/12/2019	08/12/2019		Enrolled
Class change	VPK1303410-2019				4y		08/12/2019	08/14/2019		Enrolled
Class change	VPK1288701-2019				4y		08/12/2019	08/12/2019		Enrolled
Class change	VPK1239250-2019				4y		08/12/2019	08/12/2019		Enrolled
Class change	VPK1224958-2019				4y		08/12/2019	08/12/2019		Enrolled
Class change	VPK1219810-2019				4y		08/12/2019	08/12/2019		Enrolled
Class change	VPK1211989-2019				4y		08/12/2019	08/12/2019		Enrolled
Class change	VPK1175497-2019				4y		08/12/2019	08/12/2019		Enrolled
	VPK1193793-2019				4y		10/01/2019	10/01/2019		Enrolled - Change Requested
	VPK1278073-2019				4y		08/12/2019	08/12/2019	09/03/2019	Enrollment Ended (Terminated)
	VPK1249244-2019				4y		08/26/2019	08/26/2019	09/03/2019	Enrollment Ended (Terminated)

### Enrolling a VPK Child

Using the child’s approved Certificate of Eligibility (COE) provided by the family, enter the Certificate Number, Child First Name, Child Last Name, and Child DOB. Then, click **Enroll to this Class**.

**NOTE:** The fields are not case sensitive; however, the certificate number must be entered exactly as it appears on the COE (i.e. VPK####-YYYY).

Request/Change VPK Enrollment Bulk VPK Enrollment

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VPK Program Year: 2018-2019    VPK Session: School-year (540 hours)    VPK Class: AF-18 - AM Redbirds    Class Start Date: 08/20/2018    Class End Date: 05/17/2019

Max Class Size: 11    VPK Children Count: 8    Non-VPK Children Count: 3


Please Note: Based on the VPK session and instructors assigned, the maximum class size is 11. The class must have a minimum of 4 VPK children to start.

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Certificate Number: vpk737-2018    Child First Name: apple    Child Last Name: latham    Child DOB: 09/09/2013    **Enroll to this Class**

---

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
No records found for this class.										



**STATE OF FLORIDA**  
**VOLUNTARY PREKINDERGARTEN (VPK) EDUCATION PROGRAM**  
**Child Certificate of Eligibility**

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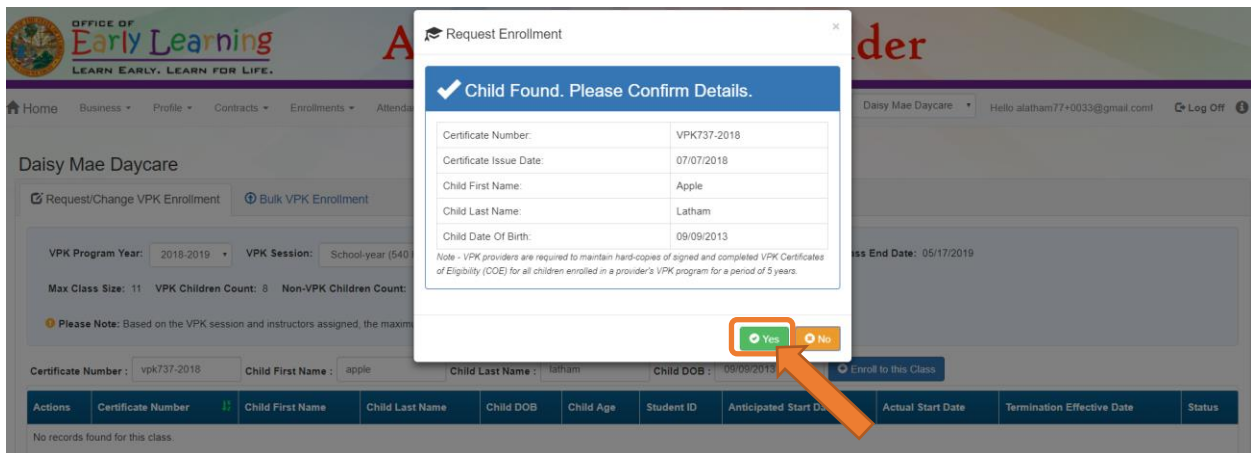
**I. CHILD CERTIFICATE OF ELIGIBILITY** *(Issued by Early Learning Coalition, through the Family Portal)*

<b>1. VPK program year</b> 2018-2019	<b>2. Certificate number</b> VPK737-2018	<b>3. Certificate issue date</b> 7/7/2018	<b>4. Parent email address</b> 
<b>5. Parent name</b> 	<b>6. Primary contact number</b> 		<b>7. Secondary contact number</b> 
<b>8. Child's full name</b> Apple Latham		<b>9. Child's date of birth</b> 09/09/2013	<b>10. County</b> Clay

The system verifies that the information entered matches a child with an approved COE for the VPK program year selected and that the child is not already enrolled (or in a non-eligible status for enrollment).

**NOTE:** The county on the COE does not have to match the provider's county because the child has been deemed eligible to participate in the VPK program. The enrollment process automatically updates the child's county for service to the provider's county so the corresponding early learning coalition may manage the child's enrollment with the provider.

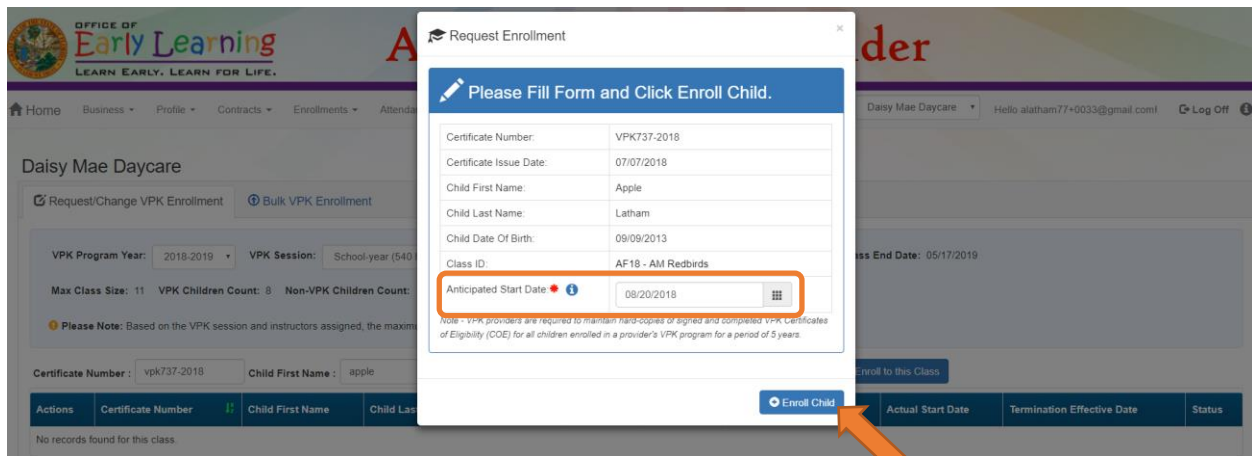
When a matching child is found and validations checks are successful, a confirmation message appears. To continue, click Yes.



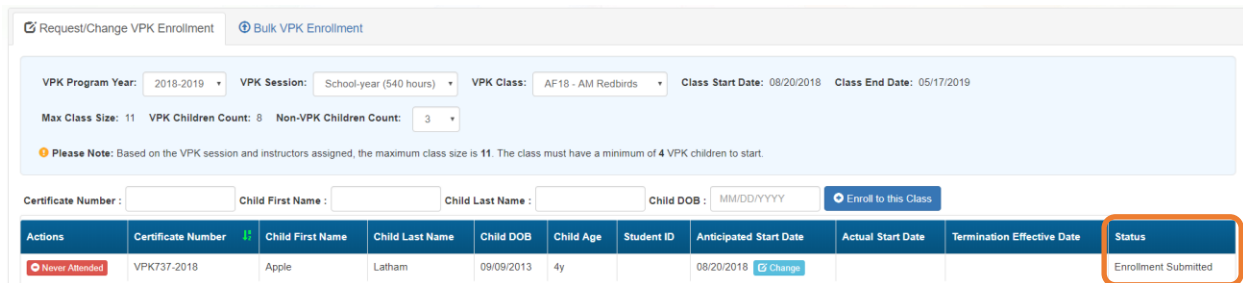
Next, the system asks for the Anticipated Start Date. This is the date the child will begin attending class. Typically, this is the class start date unless the child is starting after the class begins.

**NOTE:** An anticipated start date cannot be before the class start date or after the class end date. And, an anticipated start date cannot be before the child's COE issue date (as displayed on the child's COE and listed in the enrollment window).

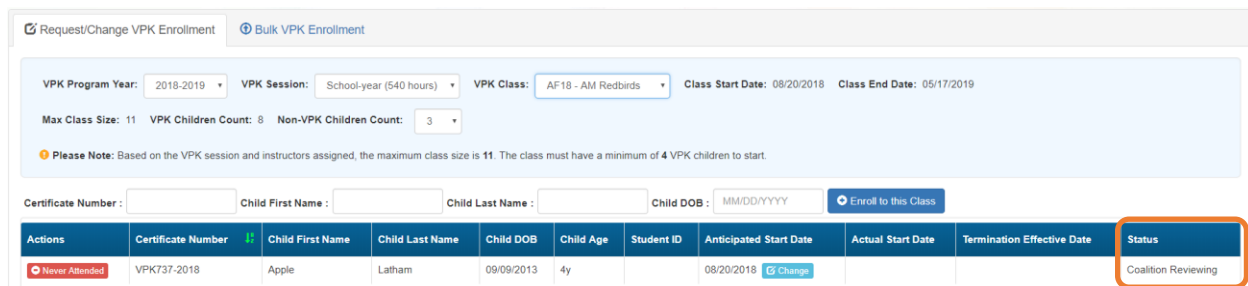
The system validates each enrollment request to make sure the max class size is not exceeded (based on the number of instructors assigned, the VPK session type, and current class enrollment count). To continue, click **Enroll Child**.



When the enrollment request is successful, the child appears on the class's enrollment roster as "Enrollment Submitted" and the coalition receives the enrollment request for review/approval/rejection. In addition, the family receives a notification that their child's enrollment is in progress.



While the enrollment request is being processed by the coalition, the status is updated on the enrollment roster. For example, the coalition has changed the status to Coalition Reviewing.



If the coalition rejects or cancels the enrollment request, the child will no longer appear on the class roster. The VPK Director and family will receive an email notification. The family is instructed to download their child's COE from the Family Portal and re-start the enrollment process.

When the enrollment process is approved by the coalition, the child's status is Enrolled.

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
<a href="#">Class change</a> <a href="#">Never Attended</a>	VPK737-2018	Apple	Latham	09/09/2013	4y		08/20/2018		<a href="#">Change</a> <a href="#">Terminate</a>	Enrolled

## Managing VPK Enrollment

The class roster has several features for managing enrollment. Providers may change the anticipated start date, request to move the child to another class, remove the child entirely from the roster because they never attended, or request a termination of services.

### Change Anticipated Start Date

To change the child's anticipated state date, click **Change** within the Anticipated State Date column. A window displays. The current start date populates in the *From* field; enter the new start date in the *To* field. This feature does not require coalition approval. Click **Save** to commit the new date or click **Close** to abandon the date change and close the window. This feature is available until the actual start date is recorded through the attendance process. When the actual start date is populated in the column, the **Change** button is no longer available.

Change Child Enrollment

Certificate Number: VPK737-2018 Certificate Issue Date: 07/07/2018

Child Name: Apple Latham Child Date Of Birth: 09/09/2013

Anticipated Start Date: 08/20/2018 Class ID: AF18 - AM Redbirds

Change Anticipated Start Date

From: 08/20/2018 To: 08/21/2018

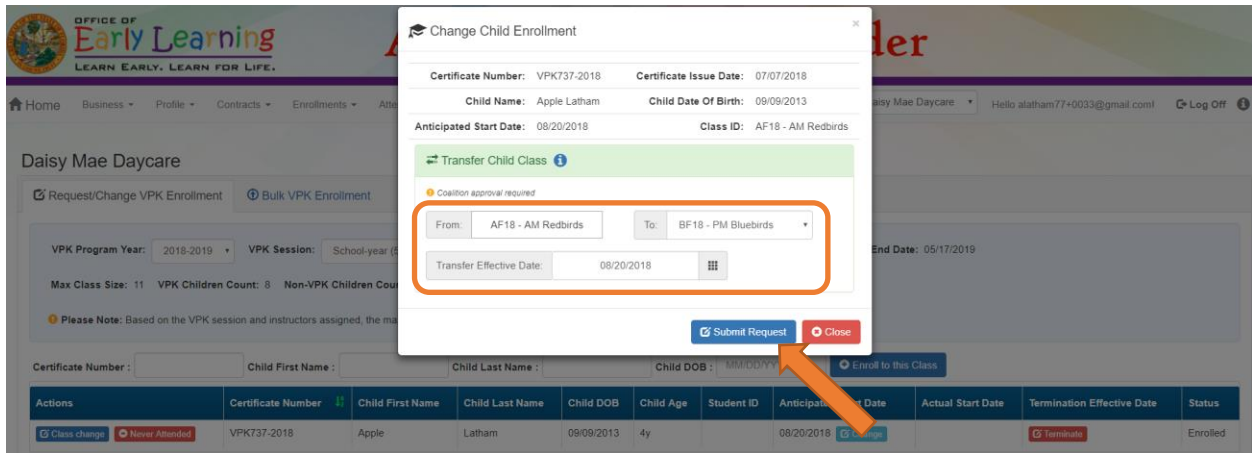
[Save](#) [Close](#)

### Class Change

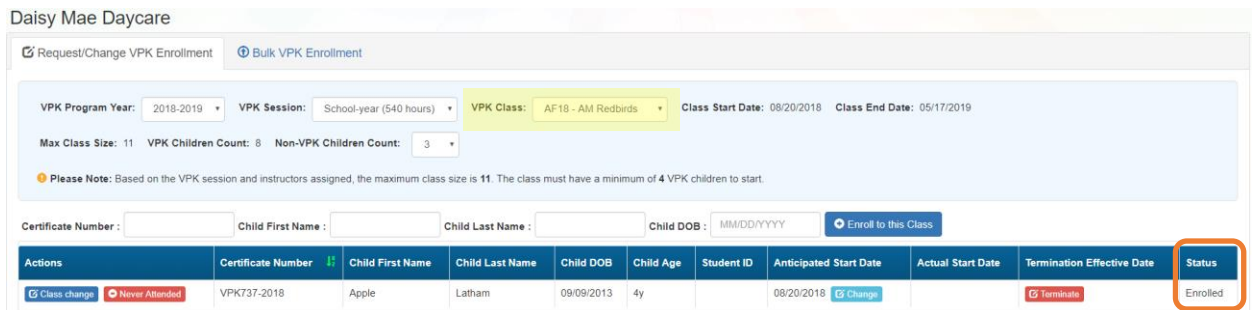
Once the child's status is *Enrolled*, a class change may be requested. To change the child's class, click **Class Change** within the Actions column. A window displays. The current class populates in the *From* field; select the new class in the *To* field and enter the Transfer Effective Date. The Transfer Effective Date should be the first day the child will attend the new class. This feature requires coalition approval. Click **Submit Request** to send the request to the coalition or click **Close** to abandon the class change and close the window.

**NOTE:** Once a class change request is submitted to the coalition, a subsequent class change request for the same child is not allowed until the initial class change request is processed by the coalition.

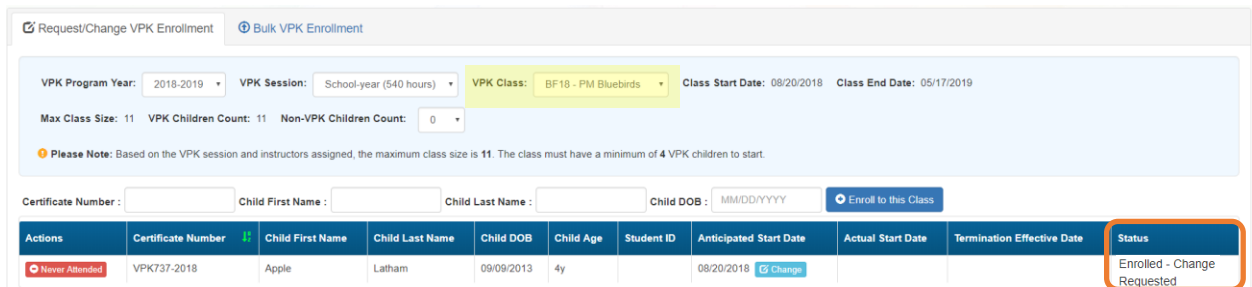




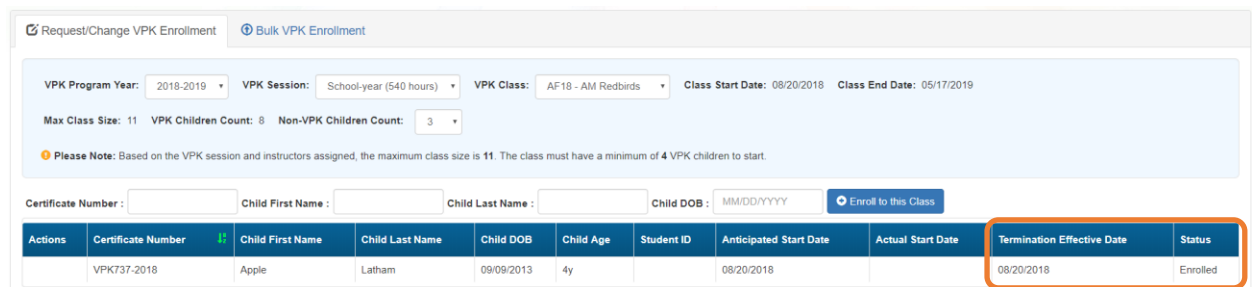
Now that the class transfer request is submitted, the child appears on the roster for both classes. In the *From* class, the child's status is Enrolled.



In the *To* class, the child's status is Enrolled - Change Requested.



When approved, the *From* class has a termination effective date (same as the transfer effective date). If the termination effective date has not passed, the status is Enrolled. When the termination effective date occurs, the status will be Enrollment Ended. No further actions can be taken on this enrollment.



When approved, the *To* class is Enrolled with an anticipated start date and actual start date (same as the transfer effective date).

Request/Change VPK Enrollment **Bulk VPK Enrollment**

VPK Program Year: 2018-2019 VPK Session: School-year (540 hours) VPK Class: BF18 - PM Bluebirds Class Start Date: 08/20/2018 Class End Date: 05/17/2019

Max Class Size: 11 VPK Children Count: 11 Non-VPK Children Count: 0

**Please Note:** Based on the VPK session and instructors assigned, the maximum class size is 11. The class must have a minimum of 4 VPK children to start.

Certificate Number: Child First Name: Child Last Name: Child DOB: MM/DD/YYYY **Enroll to this Class**

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
<a href="#">Class change</a> <a href="#">Name Attached</a>	VPK737-2018	Apple	Latham	08/08/2013	4y		08/20/2018 <a href="#">Change</a>	08/20/2018	<a href="#">Terminate</a>	Enrolled

**NOTE:** A class transfer request cannot be submitted for a child if the transfer effective date overlaps an existing enrollment period for that child. If the transfer effective date is BEFORE the termination effective date of the last enrollment, an error message appears, "The class transfer effective date overlaps an existing enrollment period for this child."

When rejected, the request no longer appears in the *To* class. The child remains enrolled in the *From* class.

### Class Change to a Full Class

If a provider wants to move a child from class BF18 to class AF18, but class AF18 is full, the class change can still be done.

Class BF18 is not full.

Daisy Mae Daycare

Request/Change VPK Enrollment **Bulk VPK Enrollment**

VPK Program Year: 2018-2019 VPK Session: School-year (540 hours) VPK Class: BF18 - Forest Room Class Start Date: 08/13/2018 Class End Date: 05/03/2019

Max Class Size: 11 VPK Children Count: 11 Non-VPK Children Count: 0

**Please Note:** Based on the VPK session and instructors assigned, the maximum class size is 11. The class must have a minimum of 4 VPK children to start.

Certificate Number: Child First Name: Child Last Name: Child DOB: MM/DD/YYYY **Enroll to this Class**

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age
<a href="#">Class change</a>	VPK752-2018	Blue Fairy	Latham	08/08/2013	5y
<a href="#">Class change</a>	VPK754-2018	Cinderella	Latham	07/07/2013	5y
<a href="#">Class change</a>	VPK756-2018	Cruella deVil	Latham	02/02/2013	5y
<a href="#">Class change</a>	VPK823-2018	Snow White	Latham	01/01/2014	4y
<a href="#">Class change</a>	VPK830-2018	Doc	Latham	09/09/2013	5y
<a href="#">Class change</a>	VPK831-2018	Sleepy	Latham	10/12/2013	5y
<a href="#">Class change</a>	VPK832-2018	Happy	Latham	08/08/2013	5y
<a href="#">Class change</a>	VPK838-2018	Sneezy	Latham	11/11/2013	5y

Class AF18 is full.

Daisy Mae Daycare

Request/Change VPK Enrollment   
 [Bulk VPK Enrollment](#)

VPK Program Year: 2018-2019   
 VPK Session: School-year (540 hours)   
 VPK Class: AF18 - Flower Room   
 Class Start Date: 08/13/2018   
 Class End Date: 05/03/2019

Max Class Size: 11   
 VPK Children Count: 11   
 Non-VPK Children Count: 0

**Please Note:** Based on the VPK session and instructors assigned, the maximum class size is 11. The class must have a minimum of 4 VPK children to start.

Certificate Number :    
 Child First Name :    
 Child Last Name :    
 Child DOB :    

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age
<input checked="" type="checkbox"/> Class change	VPK748-2018	Ariel	Latham	02/02/2014	4y
<input checked="" type="checkbox"/> Class change	VPK751-2018	Bambi	Latham	01/01/2014	4y
<input checked="" type="checkbox"/> Class change <input checked="" type="checkbox"/> Never Attended	VPK753-2018	Pinocchio	Latham	12/12/2013	5y
<input checked="" type="checkbox"/> Class change <input checked="" type="checkbox"/> Never Attended	VPK820-2018	Turtle	Latham	04/04/2014	4y
<input checked="" type="checkbox"/> Class change	VPK832-2018	Happy	Latham	08/08/2013	5y
<input checked="" type="checkbox"/> Class change <input checked="" type="checkbox"/> Never Attended	VPK833-2018	Bashful	Latham	01/01/2014	5y
<input checked="" type="checkbox"/> Class change <input checked="" type="checkbox"/> Never Attended	VPK834-2018	Grumpy	Latham	02/12/2014	4y
<input checked="" type="checkbox"/> Class change	VPK835-2018	Dopey	Latham	02/14/2014	4y
	VPK836-2018	Sneezy	Latham	11/11/2013	5y
<input checked="" type="checkbox"/> Class change <input checked="" type="checkbox"/> Never Attended	VPK883-2018	Seahorse	Latham	01/01/2014	4y
<input checked="" type="checkbox"/> Class change <input checked="" type="checkbox"/> Never Attended	VPK884-2018	Dolphin	Latham	01/01/2014	4y

The provider wants to move Blue Fairy Latham to AF18 from BF18.

**Change Child Enrollment** x

---

**Certificate Number:** VPK752-2018      **Certificate Issue Date:** 07/29/2018

---

**Child Name:** Blue Fairy Latham      **Child Date Of Birth:** 08/08/2013

---

**Anticipated Start Date:** 12/10/2018      **Class ID:** BF18 - Forest Room

---

**Transfer Child Class** i

**Coalition approval required**

**From:**       **To:**

**Transfer Effective Date:**  iii

---


The provider selects AF18 in the *To* field and enters the Transfer Effective Date. Once the **Submit Request** button is clicked, the provider receives a red message.

### Change Child Enrollment x

---

Certificate Number:	VPK752-2018	Certificate Issue Date:	07/29/2018
Child Name:	Blue Fairy Latham	Child Date Of Birth:	08/08/2013
Anticipated Start Date:	12/10/2018	Class ID:	BF18 - Forest Room

#### Transfer Child Class i

 Coalition approval required

From: BF18 - Forest Room	To: AF18 - Flower Room <span style="float: right;">v</span>
Transfer Effective Date: 02/27/2019 <span style="float: right;">iii</span>	

Swap spot with enrolled child from selected class.

Target class is full. Please choose a valid class or select the swap child feature.

Submit Request Close

Now, the provider can either select a class that is not full, or select a child to swap with in the full class. Click the **Submit Request** button to complete the class change.

### Change Child Enrollment x

Certificate Number:	VPK752-2018	Certificate Issue Date:	07/29/2018
Child Name:	Blue Fairy Latham	Child Date Of Birth:	08/08/2013
Anticipated Start Date:	12/10/2018	Class ID:	BF18 - Forest Room

**Transfer Child Class** i

Coalition approval required

From:  To:

Transfer Effective Date:  ☰

Swap spot with enrolled child from selected class.

Swap spot with:

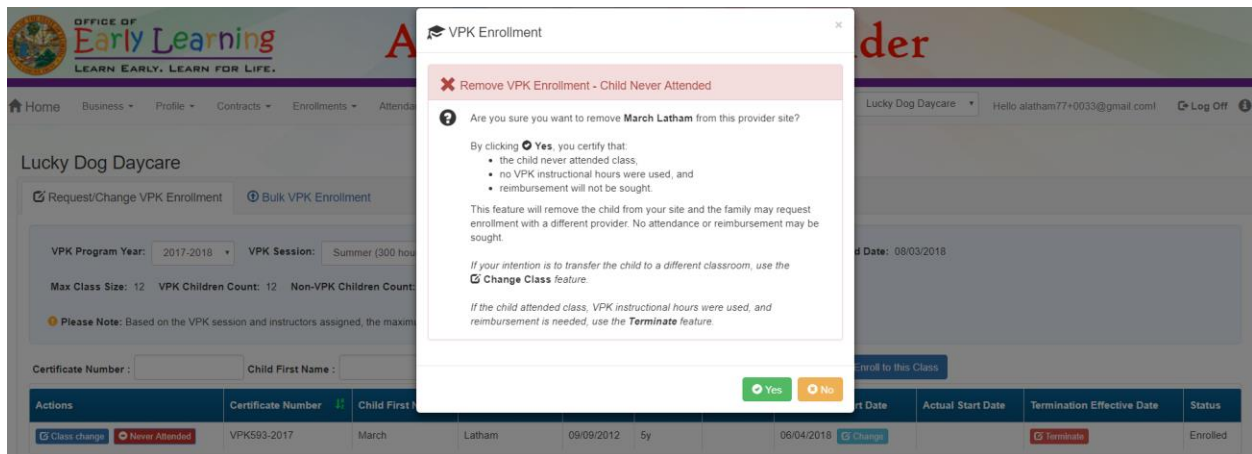
Target class is full. Please choose a valid class or select the swap child feature.

Submit RequestClose

### Never Attended

To remove a child from a class completely because they never attended, click **Never Attended** within the Actions column. A window displays. This feature does not require coalition approval. Click **Yes** to remove the child or click **No** to abandon the removal and close the window. Removing an enrollment changes the record's status to *Enrollment Cancelled* and the enrollment process starts over for the family. The provider's VPK Director will receive an email notification to inform them the enrollment is removed; no attendance or reimbursement may be sought. The child's record is no longer listed on the class enrollment roster or attendance roster in the Provider Portal. The family will receive an email notification to inform them the enrollment for their child was cancelled; instructions are provided to log into the Family Portal to download the child's COE and select another VPK provider.

This feature is available until the actual start date is recorded through the attendance process. When the actual start date is populated in the column, the **Never Attended** button is no longer available.



**NOTE:** Be very careful with the **Never Attended** feature. If the intention is to transfer the child to a different classroom, use the **Class Change** feature. If the child attended class, VPK instructional hours were used, and reimbursement is needed, use the **Terminate** feature.

## Terminate

To terminate a child's enrollment, click **Terminate** within the Termination Effective Date column. A window displays. Enter the last day that services will be/were rendered and select the reason for termination. The Termination Effective Date is displayed below the Last Day of Services as one day after the last day of services. Therefore, the Termination Effective Date is the first day the child is NOT attending class. This feature requires coalition approval. Click **Submit Request** to send the request to the coalition or click **Close** to abandon the termination request and close the window.

**NOTE:** A child's enrollment cannot be terminated before the class start date. If the provider enters a date in the Last Day of Services that is BEFORE the class start date, an error message appears, "Termination effective date cannot be prior to the class start date. If the child never attended, click the **Never Attended** button to cancel the enrollment." Either enter a termination date that is after the class start date (and on or after the COE issue date), or click **Close** to abandon the termination request and close the window.

When the termination request is submitted, the child appears on the class's enrollment roster as "Enrolled - Change Requested." The coalition will receive the termination request for review/approval/rejection.

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
	VPK670-2018	Baloo	Latham	02/02/2014	4y	05/04/2018	11/16/2018		12/10/2018	Enrolled - Change Requested

When the termination request is approved and the termination effective date has not passed, the status is Enrolled. When the termination effective date occurs, the status will be Enrollment Ended. No further actions can be taken on this enrollment.

Request/Change VPK Enrollment Bulk VPK Enrollment

VPK Program Year: 2018-2019 VPK Session: School-year (540 hours) VPK Class: BF18 - Tomorrowland Room Class Start Date: 08/13/2018 Class End Date: 05/31/2019

Max Class Size: 11 VPK Children Count: 11 Non-VPK Children Count: 0

Please Note: Based on the VPK session and instructors assigned, the maximum class size is 11. The class must have a minimum of 4 VPK children to start.

Certificate Number: Child First Name: Child Last Name: Child DOB: MM/DD/YYYY Enroll to this Class

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
	VPK670-2018	Baloo	Latham	02/02/2014	4y		11/16/2018		12/10/2018	Enrolled

When rejected, the child remains enrolled in the class.

Request/Change VPK Enrollment Bulk VPK Enrollment

VPK Program Year: 2017-2018 VPK Session: Summer (300 hours) VPK Class: BS17 - Giraffes Class Start Date: 06/04/2018 Class End Date: 08/03/2018

Max Class Size: 12 VPK Children Count: 12 Non-VPK Children Count: 0

Please Note: Based on the VPK session and instructors assigned, the maximum class size is 12. The class must have a minimum of 4 VPK children to start.

Certificate Number: Child First Name: Child Last Name: Child DOB: MM/DD/YYYY Enroll to this Class

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
Class change Never Attended	VPK593-2017	March	Latham	09/09/2012	5y		06/04/2018 Change		Terminate	Enrolled

## VPK Bulk Enrollment Process

In addition to the enrollment method described in “Enrolling a VPK Child,” providers may submit enrollment requests to the coalition via a file process. To begin, click the **Bulk VPK Enrollment** tab. The bulk file processing page displays.

Request/Change VPK Enrollment Bulk VPK Enrollment

Download CSV file template, add child details, and click the Upload button. Note: The MSID column is for public school use only. See the Provider Portal User Guide for more information. Upload Refresh

Actions	Uploaded On	Document Type	File Name	File Size	Total Records Count	Committed Records Count	Failed Records Count	Processed Time	Status	Final Results
No records found.										

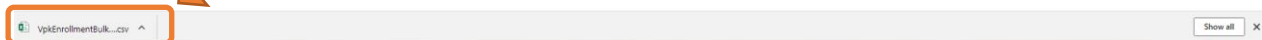
Next, click on the link to download the **CSV file template**. The file may appear at the bottom of the computer screen depending on the user’s browser.

Request/Change VPK Enrollment Bulk VPK Enrollment

Download CSV file template, add child details, and click the Upload button. Note: The MSID column is for public school use only. See the Provider Portal User Guide for more information. Upload Refresh

Actions	Upload	Document Type	File Name	File Size	Total Records Count	Committed Records Count	Failed Records Count	Processed Time	Status	Final Results
No records found.										

Please contact your early learning coalition for immediate assistance.  
 This site is best viewed with Internet Explorer version 10 or higher. Download the latest version of Internet Explorer.  
 If you are using an Apple device (iPad, iPhone, Mac computer, MacBook), please download and use Google Chrome, instead of Safari, to complete your application.



Open the file and expand the columns. Each column is explained below.



	A	B	C	D	E	F	G	H	I
1	Provider ID	Certification Number	Child First Name	Child Last Name	Child DOB (MM/DD/YYYY)	VPK Program Year	Class ID	Anticipated Start Date (MM/DD/YYYY)	MSID (XX-XXXX)
2									
3									
4									

A. **Provider ID** = this is the provider ID for the site displayed on the Provider Portal home page/dashboard.

**Provider Site Summary**

Business name: Growing Up Strong, LLC

Doing business as: Growing Up Strong

**Provider ID:** 19449

License number: [REDACTED]

SSN / Federal ID number: [REDACTED]

**Frequently-Used Links**

- [Bright Beginnings](#)
- [Core Competencies](#)
- [DCF Provider Training](#)
- [Early Learning Performance Funding Project](#)
- [Provider Portal User Guide](#)
- [VPK Provider Readiness Rate Website](#)

B. **Certification Number** = this is the child’s certificate number listed on their COE. The field is not case sensitive, however, the certificate number must be entered exactly as it appears on the COE (i.e. VPK####-YYYY).

**STATE OF FLORIDA**  
**VOLUNTARY PREKINDERGARTEN (VPK) EDUCATION PROGRAM**  
**Child Certificate of Eligibility**

**I. CHILD CERTIFICATE OF ELIGIBILITY** *(Issued by Early Learning Coalition, through the Family Portal)*

<b>1. VPK program year</b> 2017-2018 <b>F</b>	<b>2. Certificate number</b> VPK1095621-2017 <b>B</b>	<b>3. Certificate issue date</b> 6/30/2018	<b>4. Parent email address</b> [REDACTED]
<b>5. Parent name</b> [REDACTED]	<b>6. Primary contact number</b> [REDACTED]	<b>7. Secondary contact number</b> [REDACTED]	
<b>8. Child's full name</b> KitKat Latham <b>C D</b>		<b>9. Child's date of birth</b> 09/09/2012 <b>E</b>	<b>10. County</b> [REDACTED]

C. **Child First Name** = this is the child’s first name listed on their COE. The field is not case sensitive.

D. **Child Last Name** = this is the child’s last name listed on their COE. Do not include a suffix (if any). The field is not case sensitive.

E. **Child DOB (MM/DD/YYYY)** = this is the child’s date of birth listed on their COE. The field will accept M/D/YYYY as well.

F. **VPK Program Year** = this is the child’s approved VPK program year listed on their COE. The field is looking for the first 4-digit year only. For example, if the VPK program year is 2017-2018, the entry would be

2017. Generally, the 4-digit VPK program year matches the year included at the end of the child's COE number.

- G. **Class ID** = this is the desired class's 4-digit ID. The class ID must be entered as the 4-digit assigned ID. Do not include the class name (if any). Looking at the example below, the entry would be "AS17" not "Songbirds" or "AS17-Songbirds."

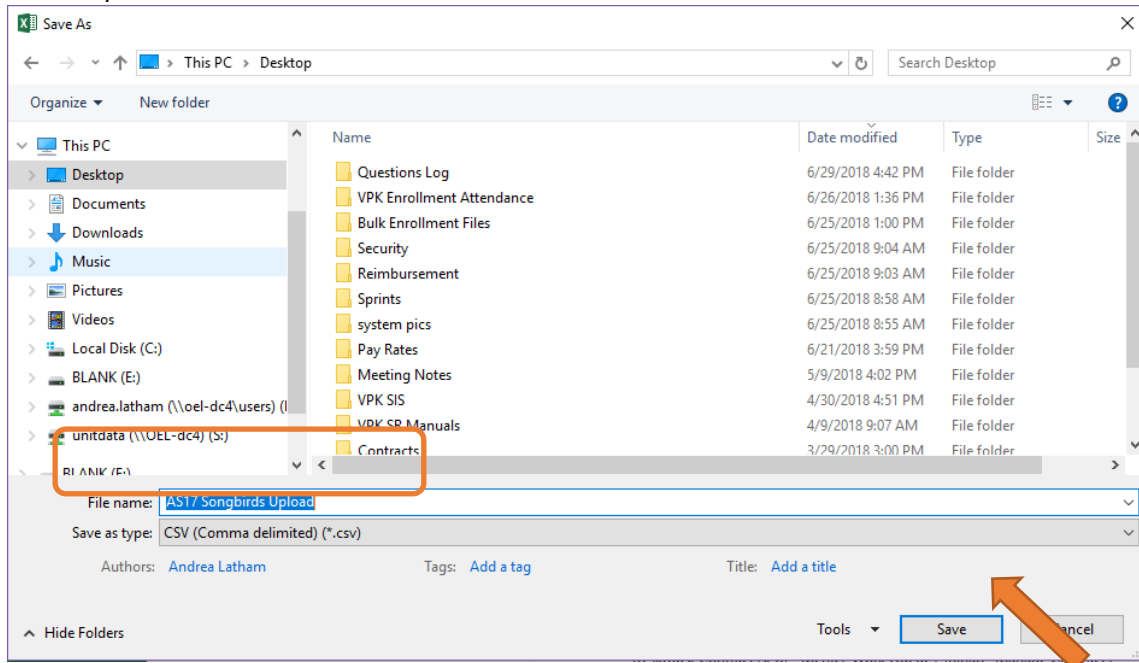
Request/Change VPK Enrollment | Bulk VPK Enrollment

VPK Program Year: 2017-2018 | VPK Session: Summer (300 hours) | **VPK Class: AS17 - Songbirds** | Class Start Date: 06/04/2018 | Class End Date: 07/26/2018

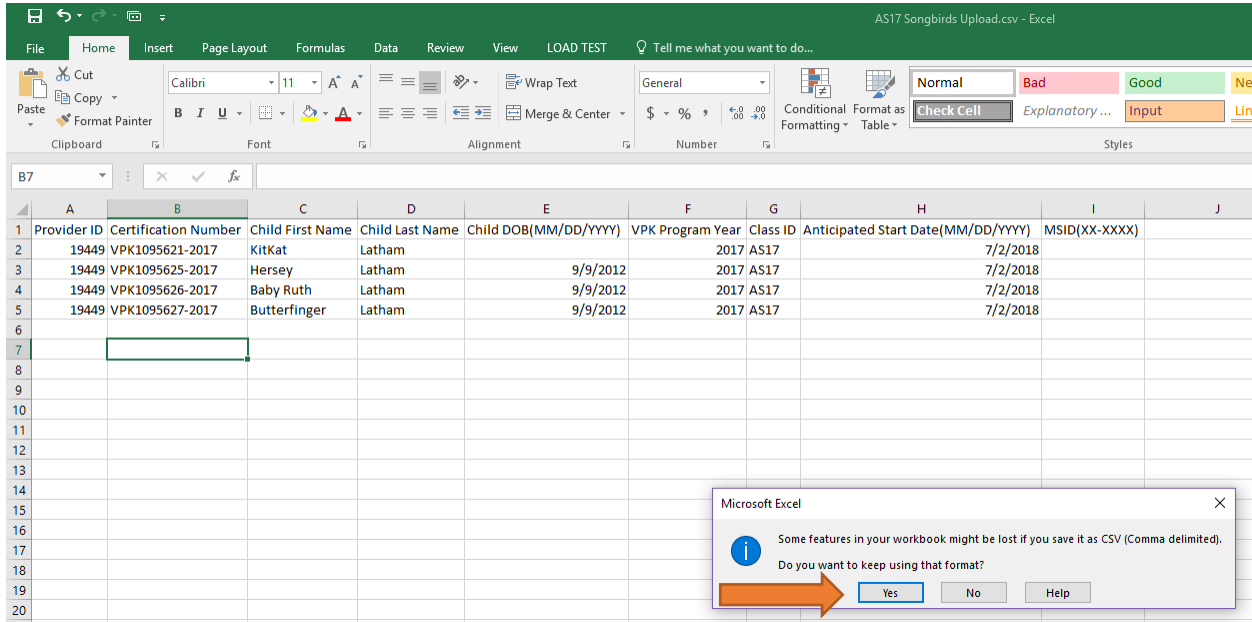
- H. **Anticipated Start Date (MM/DD/YYYY)** = this is the date the child will begin attending class. Typically, this is the class start date unless the child is starting after the class begins.  
**NOTE:** An anticipated start date cannot be before the class start date or after the class end date. And, an anticipated start date cannot be before the child's COE issue date. The field will accept M/D/YYYY as well.
- I. **MSID (XX-XXXX)** = this field is for public schools only. Public schools may enter their Master School Identification (MSID) number in a 6-digit format, where the first 2 digits are the district number followed by a hyphen and 4-digit school number. The MSID number can be used in lieu of the Provider ID in column A. Both IDs are accepted.

When the file is complete, name it and save it as a CSV file type.

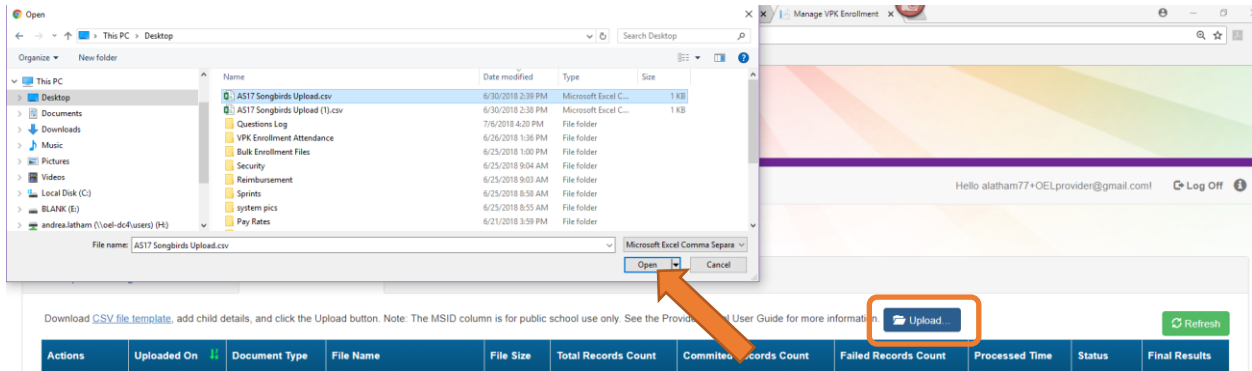
**NOTE:** It may be helpful to include the provider name and class in the file name if troubleshooting is ever necessary.



When changing the file format to CSV, Excel often displays a message to ask if you want to keep using that format. If this message appears, click **Yes**.



Click the **Upload** button. A window displays. Select your file and click **Open**.



The file upload will begin. The file details will populate on a row and turn green. Click the **Refresh** button to populate the results.



The file details will be updated. The file size, total records count, committed records count, failed records count, processed time, status, and final results are updated. The file results are also returned and can be downloaded by clicking on the **Download** button.



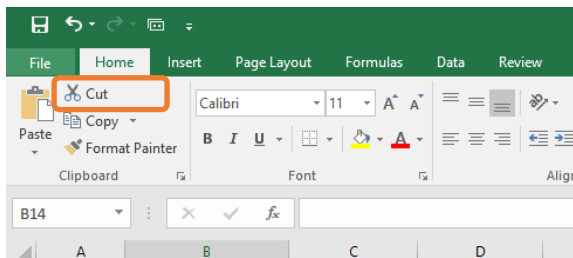
In this example, there is one failed record and three committed records. The file download will include the error message and status for each record submitted. The three committed records are now “Enrollment Submitted” and the failed record was not included because of an invalid date of birth. The same validations that occur with a manual child enrollment occur with the bulk enrollment file process.

Provider ID	Certification Number	Child First Name	Child Last Name	Child DOB(MM/DD/YYYY)	VPK Program Year	Class ID	Anticipated Start Date(MM/DD/YYYY)	MSID(XX-XXXX)	Error or Status
19449	VPK1095621-2017	KitKat	Latham		2017	AS17	7/2/2018		Error or Status
19449	VPK1095625-2017	Hersey	Latham	9/9/2012	2017	AS17	7/2/2018		Enrollment Submitted
19449	VPK1095626-2017	Baby Ruth	Latham	9/9/2012	2017	AS17	7/2/2018		Enrollment Submitted
19449	VPK1095627-2017	Butterfinger	Latham	9/9/2012	2017	AS17	7/2/2018		Enrollment Submitted

The three committed records are displayed on the class’s enrollment roster as “Enrollment Submitted” and the coalition receives the enrollment requests for review/approval/rejection. In addition, the family receives a notification that their child’s enrollment is in progress. The same processes that occur with a manual child enrollment occur with the bulk enrollment file process.

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date	Actual Start Date	Termination Effective Date	Status
Never Attended	VPK1095625-2017	Hersey	Latham	09/09/2012	5y		07/02/2018			Enrollment Submitted
Never Attended	VPK1095626-2017	Baby Ruth	Latham	09/09/2012	5y		07/02/2018			Enrollment Submitted
Never Attended	VPK1095627-2017	Butterfinger	Latham	09/09/2012	5y		07/02/2018			Enrollment Submitted

**NOTE:** When correcting records and re-uploading the file, be sure to remove the “Error or Status” column as it is not accepted for the upload. Also, it is best to NOT include records that have already been submitted successfully as they will now error as having been processed. When removing successful records and the Error or Status column, it is best to highlight the row/column and use the cut/delete option instead of just deleting the information. Excel often retains formats even if the cells are now empty.



## VPK-20 Contract Verification

A provider must have a Certified VPK-20 contract on the Anticipated Start Date before an enrollment can be added. In the below example, the VPK application information is entered by the provider, and the **+ Enroll to this Class** button is clicked.

### BOCC SOUTH COUNTY HEAD START CENTER

Request/Change VPK Enrollment  Bulk VPK Enrollment

VPK Program Year: 2020-2021 VPK Session: School-year (540 hours) VPK Class: AF20 - AF20 Class Start Date: 01/26/2021 Class End Date: 06/30/2021

Max Class Size: 20 VPK Children Count: 20 Non-VPK Children Count: 0

**Please Note:** Based on the VPK session and instructors assigned, the maximum class size is 20. The class must have a minimum of 4 VPK children to start.

Certificate Number: VPK-2020 Child First Name: Child Last Name: A Child DOB: **+ Enroll to this Class**

Actions	Certificate Number	Child First Name	Child Last Name	Child DOB	Child Age	Student ID	Anticipated Start Date
---------	--------------------	------------------	-----------------	-----------	-----------	------------	------------------------

In this example, the provider does not have a Certified VPK-20 contract, so an error message displays, alerting the provider that the enrollment cannot be submitted.

Request Enrollment ×

---

Enrollment cannot be submitted without a certified VPK-20 contract. Please contact your early learning coalition for assistance.

---

Ok

## Enrollments - SR

### Pending Family Acceptance Status

When a new School Readiness enrollment is created for an eligible child, families must accept the terms and conditions, establish their consent for developmental screening and/or child assessment, and sign the payment certificate. Families receive an email notification from OEL every five days until these steps are completed and the enrollment status changes from **Pending Family Acceptance** to **Enrolled**.

New enrollments in **Pending Family Acceptance** will not be visible on provider attendance rosters and will only appear once the family signs the payment certificate; however, there are exceptions.

- New enrollments for at-risk children (BG1) or at-risk children in relative care (BG3R) billing groups in **Pending Family Acceptance** will populate on attendance rosters
- Existing enrollments in **Pending Family Acceptance** that have already been submitted for attendance in previous months will continue to populate on attendance rosters

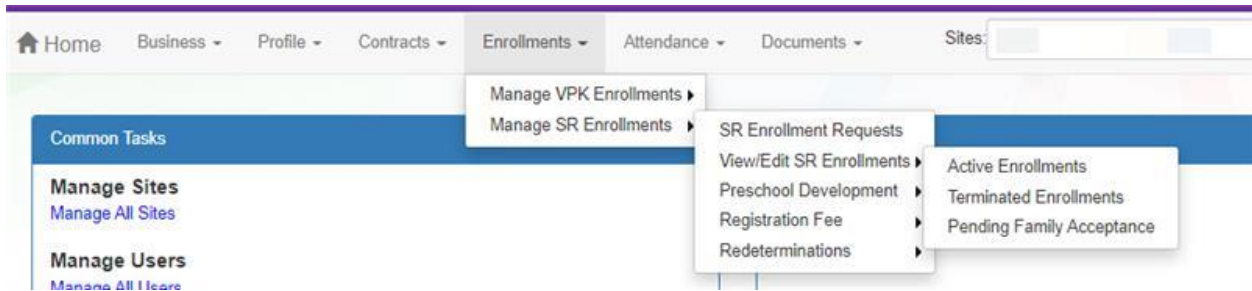
Providers will be able to process attendance and be paid for these enrollments, but not until the payment certificate is signed by the family.

If a provider has new enrollments in **Pending Family Acceptance**, when the provider accesses SR attendance, a pop-up window will display with a count of those new enrollments and a link to the Manage SR Enrollment queue.



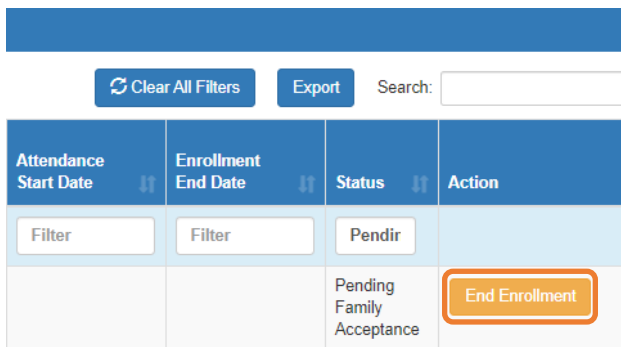
## Viewing Enrollments in Pending Family Acceptance

To view enrollments in **Pending Family Acceptance**, navigate to **Enrollments > Manage SR Enrollments > View/Edit SR Enrollments > Pending Family Acceptance**.

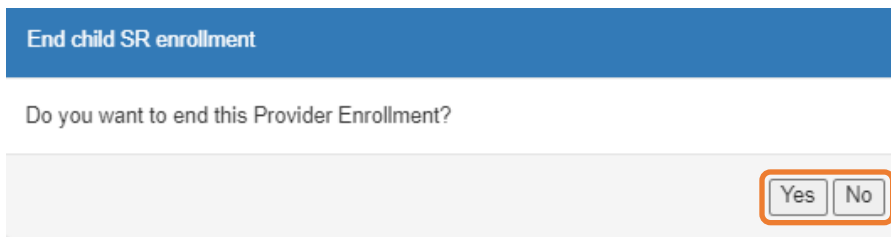


## Ending Enrollments in Pending Family Acceptance

Providers can end enrollments in **Pending Family Acceptance**. Navigate to **Enrollments > Manage SR Enrollments > View/Edit SR Enrollments > Pending Family Acceptance**. Find the enrollment, then click the **End Enrollment** button.



A confirmation pop-up window displays. Click **Yes** to continue or **No** to stop the End Enrollment process.



After clicking the **Yes** button, the following pop-up window displays. Complete the required information and click **Save**.

End SR Enrollment

You have chosen to end enrollment for this child.

End Enrollment Reason\*

-- Select a Termination Reason --

Last Attendance Date\*

MM/DD/YYYY

Is there a past due parent fee?\*

Yes  No

Past Due Parent Fee

\$

Is there a payment plan in place?

Yes  No

Please attach payment plan document.

Choose File No file chosen

Save Cancel

After clicking **Save**, a confirmation pop-up window displays. Click **Yes** to end the enrollment or **Cancel** to cancel the End Enrollment process.

End SR Enrollment

Confirm End Enrollment

Ending the enrollment on this day means that reimbursements will not be provided for services after this date. End this enrollment with the specified dates?

Yes Cancel

After clicking the **Yes** button, a pop-up window displays a message that the enrollment is ended. Click **Ok** to continue.

End Enrollment

Child enrollment was successfully ended.

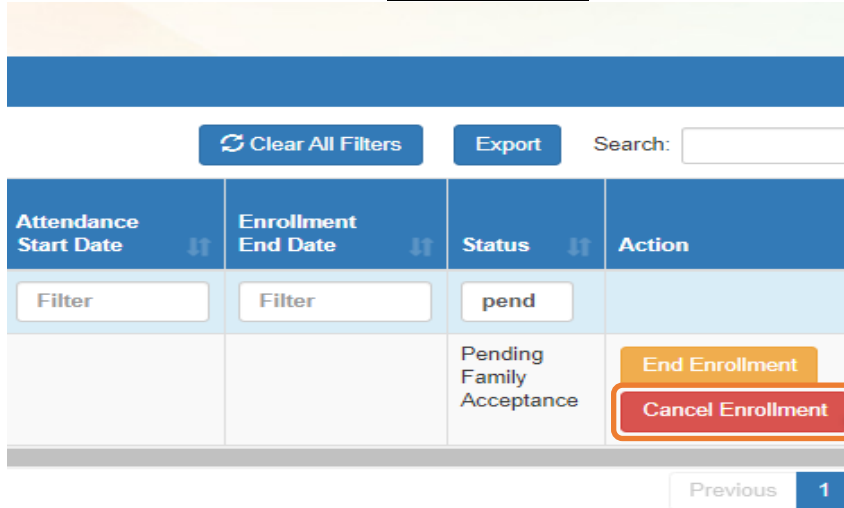
Ok



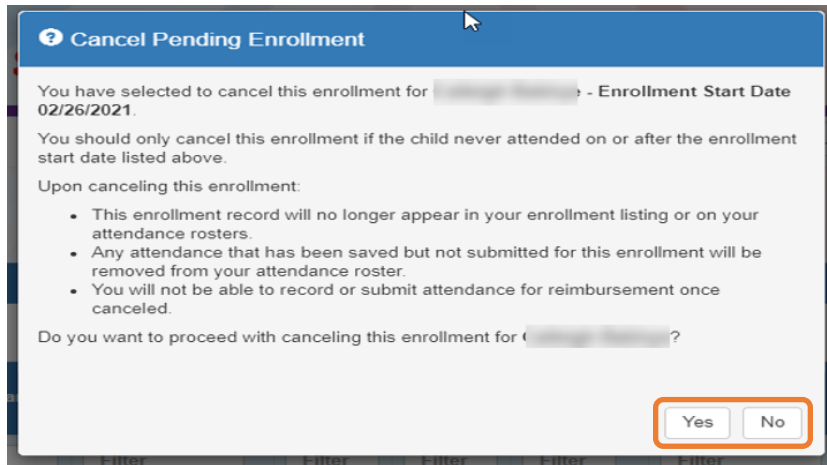
## Cancelling Enrollments in Pending Family Acceptance

Providers can cancel enrollments in **Pending Family Acceptance**, but only if the enrollment is not for an at-risk child (BG1) or at-risk child in relative care (BG3R) and attendance has not been submitted for the enrollment.

Navigate to **Enrollments > Manage SR Enrollments > View/Edit SR Enrollments > Pending Family Acceptance**. Find the enrollment, then click the **Cancel Enrollment** button.



A confirmation pop-up window displays. Click **Yes** to cancel the enrollment and remove it from the SR Enrollment queue. Click **No** to stop the Cancel Enrollment process.

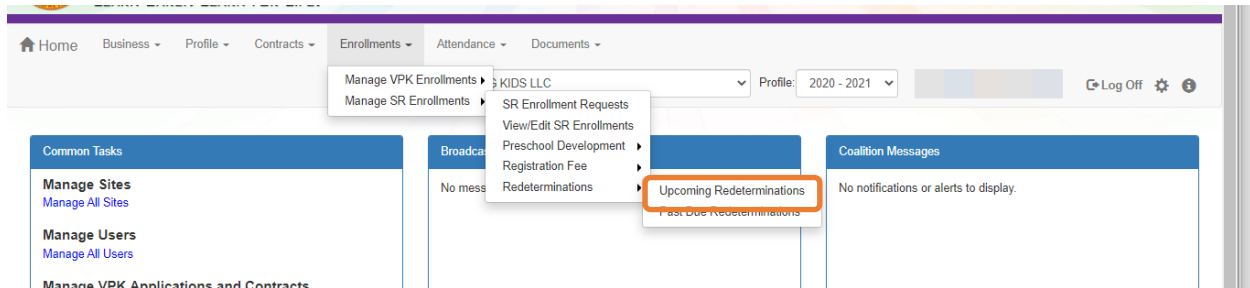


## SR Eligibility Redeterminations

The SR Eligibility Redetermination menu allows providers to view enrollments with “upcoming” or “past due” redeterminations. These queues are for informational purposes only and aid providers in knowing when an enrolled child is reaching the end of their School Readiness eligibility.

### Upcoming Eligibility Redeterminations

To see the enrollments with upcoming eligibility redeterminations, navigate to **Enrollments > Manage SR Enrollments > Redeterminations > Upcoming Redeterminations**.

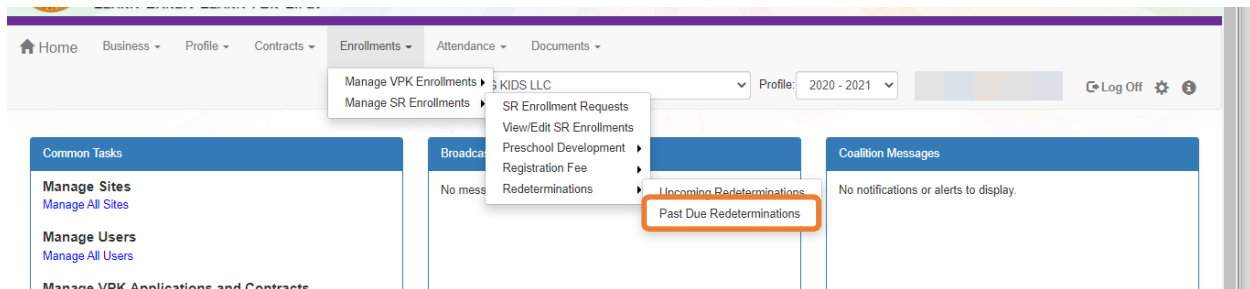


Redetermination records will only appear in the Provider Portal Upcoming Redetermination queue when:

- Child eligibility status is Eligible
- Child enrollment status is Enrolled or Pending Family Acceptance
- The redetermination is within 45 days from the due date

### Past Due Eligibility Redeterminations

To see the enrollments with past due eligibility redeterminations, navigate to **Enrollments > Manage SR Enrollments > Redeterminations > Past Due Redeterminations**.



Redetermination records will only appear in the Provider Portal Past Due Redetermination queue when:

- Child eligibility status is Eligible
- Child enrollment status is Enrolled or Pending Family Acceptance
- The redetermination is at least one day past the redetermination due date

After clicking the **Upcoming Redeterminations** or **Past Due Redeterminations** link, the following appears.

Click Here For Filtering Tips

Show 10 entries Clear All Filters Export Search:

Child Name	Eligibility Assignment Start Date	Eligibility Assignment End Date	Payment Certificate
<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	<input type="text" value="Filter"/>	
Etti	08/03/2020	03/11/2021	<a href="#">View</a>
Flo	12/05/2020	03/11/2021	<a href="#">View</a>
Ge	12/07/2020	03/08/2021	<a href="#">View</a>
Gie	09/03/2020	02/26/2021	<a href="#">View</a>
Jyc	02/26/2020	02/26/2021	<a href="#">View</a>
Na	11/09/2020	02/26/2021	<a href="#">View</a>

Showing 1 to 6 of 6 entries Previous 1 Next

Click the link for a child name in the Child Name column, and a pop-up message displays child eligibility and enrollment details for the child.

Click [View](#) in the Payment Certificate column, and a pop-up message displays the payment certificate for the enrollment. If the payment certificate does not exist, the [View](#) button will not be active, but hovering over the button displays a message: "The payment certificate is not viewable until signed by the parent."

**NOTE:** If the ELC changes the Household Eligibility Status from **Redetermination** to **Active** or **Inactive**, the child's eligibility will be removed from Redetermination status and the record(s) will be removed from the Provider Portal Redetermination queues.

Child Eligibility Details

Child Information		
Name	Date of Birth	Age
Etti		1

Parent Contact Information		
Name	Telephone	
Mrs. M.	(555) 555-5555	
Address		
2		
City	State	Zip Code
Mount Dora	FL	32757

Eligibility Information		
EV Number	Billing Group	Co-Payment
EV_0000437	BG8	\$4.25
Eligibility Status	Eligibility Start Date	Eligibility End Date
COALITION REVIEWING	08/03/2020	03/11/2021
Enrollment Status	Redetermination Due Date	
Enrolled	03/11/2021	

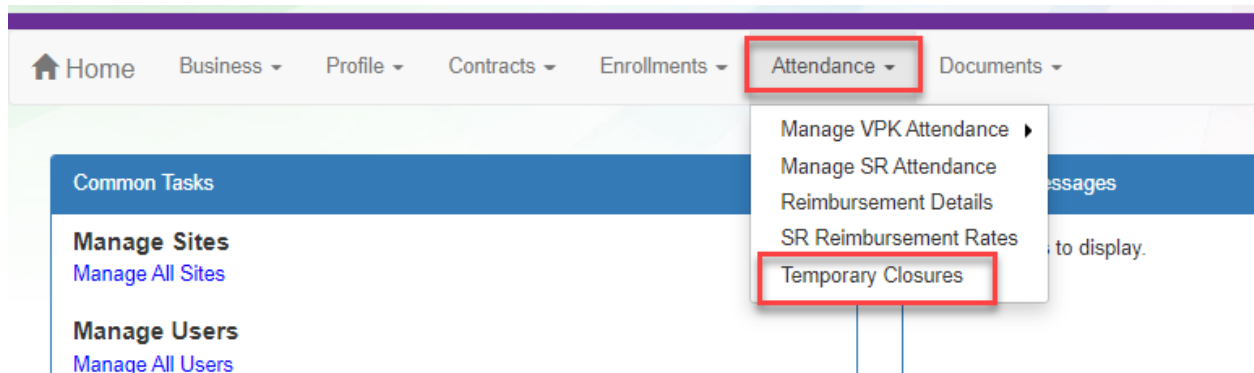
[Close](#)

## Temporary Closures

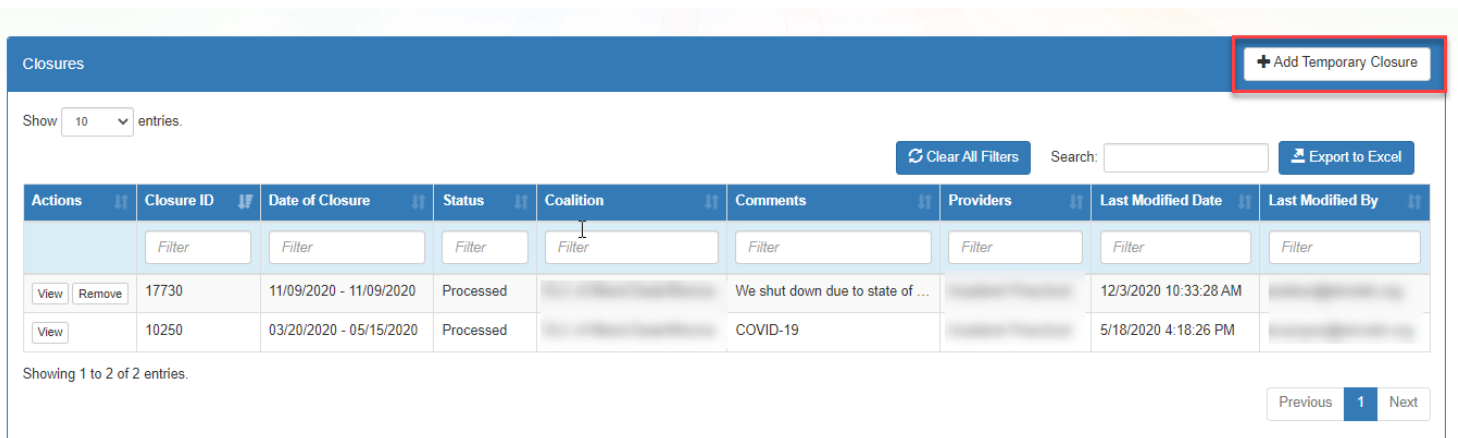
Temporary closures must be created when the whole site or program or specific classroom is temporarily closed due to emergency circumstances. Provider and Coalition users can initiate temporary closures.

**NOTE:** Temporary closures must be created BEFORE attendance is submitted for the month in which the closure occurs.

To add a closure, navigate to **Attendance > Temporary Closures**.



Click the **Add Temporary Closure** button.



The Report Temporary Closure pop-up window opens.

Report Temporary Closure

Closed Provider Site(s)

Select Providers \*

Closure Details

Closed From \* Closed To \*

Closure Reasons (select all that apply) \*

Exposure to COVID-19

Scheduled deep-cleaning due to COVID-19

Lack of child attendance

Lack of staff availability

Declared state of emergency other than COVID-19 (such as a hurricane)

Other

Documentation

Attach the documentation necessary to establish proof of site closure.


Closure Documents

Upload Document...

Comments (limit 1000 characters)

Save Cancel Submit to Coalition

## Creating a Temporary Closure for a Whole Site Closure

Complete the form. Hover over the information icons  for additional information.

- **Closed Provider Site(s)** – Select the site(s) that were temporarily closed due to emergency circumstances. Each site that the user has access to is listed. Only providers with VPK or SR enrollments display in the dropdown list.  
**NOTE:** If providers were closed for different dates, they should be unchecked and have separate closure events created.
- **Closure Details** – Enter the closure date range. The “Closed From” date is the first day of the closure and the “Closed To” date is the last day of the closure. A single day closure would have the same “Closed From” and “Closed To” date. No services are available on dates included in the closure date range.  
**NOTE:** The closure date range is limited to a single month. If the closure crosses into the next month, an additional closure is needed to cover that time period.

**Report Temporary Closure**

Closed Provider Site(s)

Select Providers\*

Closure Details

Closed From\* 08/03/2022

Closed To\* 08/03/2022

Reimbursement Requests\*

For each provider, indicate whether all services were stopped, and then select one or more classes and care levels involved in the closure, along with the corresponding reimbursement request per closure day. If VPK classes were involved in the closure, please review the corresponding VPK provider applications.

Providers

No Services  Provider

VPK Classes (0 of 0) SR Care Levels (7 of 7)

- INF - < 12 Months
- TOD - 12 < 24 Months
- 2YR - 24 < 36 Months
- PR3 - 36 < 48 Months
- PR4 - 48 < 60 Months
- PR5 - 60 < 72 Months
- SCH - In School

INF August 2022

Sun	Mon	Tue	Wed	Thu	Fri	Sat
31	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	1	2	3

Total Processed Closure Reimbursable (CR) Days in Program Year: 0

CR = Closure Reimbursable. CCR = Closure Non-Reimbursable.

Save Cancel Submit to Coalition

Clicking the No Services checkbox will select multiple providers with whole site closures and a pop-up will indicate that all classes and care levels are selected for all providers

**Report Temporary Closure**

Reimbursement Requests\*

For each provider, indicate whether all services were stopped, and then select one or more classes and care levels involved in the closure, along with the corresponding reimbursement request per closure day. If VPK classes were involved in the closure, please review the corresponding VPK provider applications.

Providers

No Services  Provider

VPK Classes (0 of 0) SR Care Levels (7 of 7)

- INF - < 12 Months
- TOD - 12 < 24 Months
- 2YR - 24 < 36 Months
- PR3 - 36 < 48 Months
- PR4 - 48 < 60 Months
- PR5 - 60 < 72 Months
- SCH - In School

INF August 2022

Sun	Mon	Tue	Wed	Thu	Fri	Sat
31	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20

All Classes and Care Levels Were Selected

By selecting "No Services" for all providers, all classes and care levels have been automatically selected for the closure.

OK

Unchecking the No Services checkbox will deselect all providers, but all classes and care levels for each provider are still selected. The user will need to deselect classes and care levels for each provider that should not be included in the closure.

**Report Temporary Closure**

Reimbursement Requests\*

For each provider, indicate whether all services were stopped, and then select one or more classes and care levels involved in the closure, along with the corresponding reimbursement request per closure day. If VPK classes were involved in the closure, please review the corresponding VPK provider applications.

Providers

No Services  Provider

VPK Classes (0 of 0) SR Care Levels (7 of 7)

- INF - < 12 Months
- TOD - 12 < 24 Months
- 2YR - 24 < 36 Months
- PR3 - 36 < 48 Months
- PR4 - 48 < 60 Months
- PR5 - 60 < 72 Months
- SCH - In School

INF August 2022

Sun	Mon	Tue	Wed	Thu	Fri	Sat
31	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27

Class and Care Levels Selections Need Review

Although the "No Services" checkbox has been deselected for all providers, existing class and care level selections were not modified. Please deselect the classes and care levels that should not be included in the closure.

OK

- **Closure Reasons** – Select the applicable reason(s) for closure. If ‘Other’ is selected as the closure reason, then a comment is required.
- **Documentation** – Click the **Upload Document** button to upload necessary documents (optional).
- **Comments** – Enter comments related to the closure. If no comments are entered when the form is saved or submitted, the system will enter “Closure added by provider user” in the comments.

Clicking the **Save** button on the Report Temporary Closure form saves the record in “Incomplete” status. Incomplete closure forms can be seen by the coalition for assistance. To edit a temporary closure record, click the **Edit** button on the incomplete record.

Closures + Add Temporary Closure

Show 10 entries.

Clear All Filters Search: Export to Excel

Actions	Closure ID	Date of Closure	Status	Coalition	Comments	Providers	Last Modified Date	Last Modified By
<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>	<a href="#">Filter</a>
<a href="#">Edit</a> <a href="#">Remove</a>	34974	08/29/2022 - 08/29/2022	Incomplete		Closure added by provider user		8/25/2022 8:20:59 AM	
<a href="#">View</a> <a href="#">Remove</a>	27791	08/23/2021 - 08/27/2021	Processed		Closure added by provider user		9/7/2021 8:35:45 AM	

Edit the closure details and click **Submit to Coalition**. After clicking the **Submit to Coalition** button, the Sign and Certify message appears. Complete the authorized electronic signature fields, then click **Submit**.

**Temporary Closure ~ Sign and Certify**

By signing this form I certify that:

- I certify that the temporary closure was due to the circumstances as described above and the information provided is true and correct.
- I understand the coalition will determine reimbursement eligibility based on 6M-8.204 Uniform Attendance Policy for Funding the VPK Program and 6M-4.501 Reimbursement During Emergency Closures for the SR program.
- I understand child attendance records will not be collected for closure days.
- I understand the VPK Provider Application classroom calendars must be modified to restore instructional hours in excess of the allotted emergency closure days in order to receive reimbursement.

**Authorized Electronic Signature**

**Full Name \***

Certify by Electronic Signature \*

**Submission Date**

Submit

Cancel

The temporary closure is submitted to the coalition. The record appears in the Submitted closures queue in “Submitted” status.

## Creating a Temporary Closure for all or some SR Care Levels.

Report Temporary Closure

**Closure Details**

Closed From ❗  Closed To ❗

**Reimbursement Requests** ❗

For each provider, indicate whether all services were stopped, and then select one or more classes and care levels involved in the closure, along with the corresponding reimbursement request per closure day. If VPK classes were involved in the closure, please review the corresponding VPK provider applications. ❗

Providers		Reimbursement Requests (08/03/2022)		PR5 August 2022						
No <span style="color: red;">❗</span>	Provider	VPK Classes (0 of 0)	SR Care Levels (5 of 7)	Sun	Mon	Tue	Wed	Thu	Fri	Sat
<input type="checkbox"/>			<input checked="" type="checkbox"/> INF - < 12 Months <input checked="" type="checkbox"/> TOD - 12 < 24 Months <input checked="" type="checkbox"/> 2YR - 24 < 36 Months <input type="checkbox"/> PR3 - 36 < 48 Months <input checked="" type="checkbox"/> PR4 - 48 < 60 Months <input checked="" type="checkbox"/> PR5 - 60 < 72 Months <input checked="" type="checkbox"/> SCH - In School	31	1	2	3 CR	4	5	6
				7	8	9	10	11	12	13
				14	15	16	17	18	19	20
				21	22	23	24	25	26	27
				28	29	30	31	1	2	3

Total Processed Closure Reimbursable (CR) Days in Program Year: ❗ 0

CR = Closure Reimbursable. CN = Closure Non-Reimbursable.

**Closure Reasons** (select all that apply) ❗

Exposure to COVID-19

Scheduled deep-cleaning due to COVID-19

Complete the form. Hover over the information icons ❗ for additional information.

- Closed Provider Site(s)** – Select the site(s) that were completely, temporarily closed due to emergency circumstances. Each site that the user has access to is listed. Only providers with a certified contract display in the dropdown list.  
**NOTE:** If providers were closed for different dates, they should be unchecked and have separate closure events created.
- Closure Details** – Enter the closure date range. The “Closed From” date is the first day of the closure and the “Closed To” date is the last day of the closure. A single day closure would have the same “Closed From” and “Closed To” date. No services are available on dates included in the closure date range.  
**NOTE:** The closure date range is limited to a single month. If the closure crosses into the next month, additional closure is needed to cover that time period.
- Reimbursement Requests** – Select the care level(s) impacted by the closure. Check the checkbox for the care levels to include it in the closure.  
**NOTE:** The days default to ‘CR’.



**VPK Classes (0 of 0)**

**SR Care Levels (5 of 7)**

- INF - < 12 Months
- TOD - 12 < 24 Months
- 2YR - 24 < 36 Months
- PR3 - 36 < 48 Months
- PR4 - 48 < 60 Months
- PR5 - 60 < 72 Months
- SCH - In School

### PR5 August 2022

Sun	Mon	Tue	Wed	Thu	Fri	Sat
31	1	2	3 CR	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	1	2	3

Total Processed Closure Reimbursable (CR) Days in Program Year: **0** ⓘ

CR = Closure Reimbursable. 
 CN = Closure Non-Reimbursable.

- Clicking on CR changes the value to CN and vice versa.
- Closure Reasons** – Select the applicable reason(s) for closure. If ‘Other’ is selected as the closure reason, then a comment is required.
- Documentation** – Click the **Upload Document** button to upload necessary documents (optional).
- Comments** – Enter comments related to the closure.
- Clicking the **Submit** button submits the closure to the coalition. The record appears in the Closures grid with “Submitted” status. It is available in Coalition’s ‘Submitted’ queue.  
**NOTE:** **Save** button saves the record in ‘Incomplete’ status.
- Complete the authorized electronic signature fields, then check the Certify by Electronic signature box, then click the **Submit** button.

Temporary Closure – Sign and Certify

By signing this form I certify that:

- I certify that the temporary closure was due to the circumstances as described above and the information provided is true and correct.
- I understand the coalition will determine reimbursement eligibility based on 6M-8.204 Uniform Attendance Policy for Funding the VPK Program and 6M-4.501 Reimbursement During Emergency Closures for the SR program.
- I understand child attendance records will not be collected for closure days.
- I understand the VPK Provider Application classroom calendars must be modified to restore instructional hours in excess of the allotted emergency closure days in order to receive reimbursement.

Authorized Electronic Signature

**Full Name \***

Certify by Electronic Signature \*

**Submission Date**

Submit

- Clicking the **Submit** button submits the closure to the coalition. The record appears in the grid with “Submitted” status. It is available in Coalition’s ‘Submitted’ queue.

Actions	Closure ID	Date of Closure	Status	Coalition	Comments	Providers	Last Modified Date	Last Modified By
View	34984	10/01/2022 - 10/02/2022	Submitted		Closure added by provider user		8/25/2022 4:55:43 PM	
View	34983	09/01/2022 - 09/30/2022	Submitted		Closure added by provider user		8/25/2022 4:55:21 PM	

Once the submitted record is processed by the coalition, the record changes to **Processed** status.

**NOTE:**

- When the status of the record is submitted, there is only a **View** button. The provider cannot edit or delete a temporary closure record that is in **Submitted** or **Coalition Reviewing** status.
- Incomplete** and **Processed** records can be deleted.
- If a coalition adds more providers to the closure that the provider user does not have access to, there will not be a **Remove** button.

Actions	Closure ID	Date of Closure	Status	Coalition	Comments	Providers	Last Modified Date	Last Modified By
View	34984	10/01/2022 - 10/02/2022	Submitted		Closure added by provider user		8/25/2022 4:55:43 PM	
View	34983	09/01/2022 - 09/30/2022	Submitted		Closure added by provider user		8/25/2022 4:55:21 PM	
View	34982	08/22/2022 - 08/31/2022	Submitted		Closure added by provider user		8/25/2022 4:54:58 PM	
View Remove	34475	08/01/2022 - 08/21/2022	Processed		Closure added by provider user		8/15/2022 12:02:34 PM	

- Individual students, not affected by a temporary closure, may be edited in SR attendance. For example, a 2 Year Old class has 6 children showing a CR for the temporary closure, but 3 of them were present on the CR days. The provider can change the CR days to an X to mark the 3 children present.

## Creating a Temporary Closure for all or some VPK Classes.

**Edit Temporary Closure**

**Closed Provider Site(s)**

Select Providers \*

**Closure Details**

Closed From \*  Closed To \*

**Reimbursement Requests \***

For each provider, indicate whether all services were stopped, and then select one or more classes and care levels involved in the closure, along with the corresponding reimbursement request per closure day. If VPK classes were involved in the closure, please review the corresponding VPK provider applications. ⓘ

Providers		SELECT THE SERVICES INVOLVED IN THIS CLOSURE	
No ⓘ Services	Provider	VPK Classes (3 of 3)	SR Care Levels (0 of 0)
<input checked="" type="checkbox"/>		<input checked="" type="checkbox"/> AF20 - Class A	
<input type="checkbox"/>		<input type="checkbox"/> BF20 - Class B	
<input type="checkbox"/>		<input type="checkbox"/> CF20 - Class C	

**AF20 November 2020**

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1	2	3	4	5	6	7
8	9 CR	10	11	12	13	14
15	16	17	18	19	20	21
22	23	24	25	26	27	28
29	30	1	2	3	4	5

Total Processed Closure Reimbursable (CR) Days in Class: 2 ⓘ

CR = Closure Reimbursable. CN = Closure Non-Reimbursable.

Complete the form. Hover over the information icons ⓘ for additional information.

- **Closed Provider Site(s)** – Select the site where some or all VPK classes were temporarily closed due to emergency circumstances. Each site that the user has access to is listed. Only providers with enrollments display in the dropdown list.
- **Closure Details** – Enter the closure date range. The “Closed From” date is the first day of the closure and the “Closed To” date is the last day of the closure. A single day closure would have the same “Closed From” and “Closed To” date. No services are available on dates included in the closure date range.  
**NOTE:** The closure date range is limited to a single month. If the closure crosses into the next month, an additional closure is needed to cover that time period.

- **Classes and Reimbursement Requests** – Select the class(es) impacted by the closure using the checkbox.
  - The Missed Instructional Hours pop-up window opens.
    - Selecting ‘Yes’, marks the day as ‘Closure Non-Reimbursable’ (CN) in the calendar.
    - Selecting ‘No’, marks the days as ‘Closure Reimbursable’ (CR) in the calendar.

The screenshot displays the 'Report Temporary Closure' interface. A modal window titled 'Missed Instructional Hours' is centered, asking 'Do you plan to make up any of the missed instructional hours?' with 'Yes', 'No', and 'Cancel' buttons. The background shows the provider details for 'EASTER SEALS- JACKSON DADE (17668)'. The 'VPK Classes' section lists 'AF20 - Class A', 'BF20 - Class B', and 'CF20 - Class C'. A calendar for 'AF20 June 2021' is visible, showing dates from 30 to 3. A legend at the bottom indicates 'CR = Closure Reimbursable' and 'CN = Closure Non-Reimbursable'. The 'Total Processed Closure Reimbursable (CR) Days in Class: 2' is also shown.

- The days populate as CN – Closure Non-Reimbursable or as CR – Closure Reimbursable.
- Clicking on CN changes the value to CR and vice versa.

**Report Temporary Closure**

**Closed Provider Site(s)**

Select Providers\*

Closure Details

Closed From\* 06/01/2021

Closed To\* 06/03/2021

Reimbursement Requests\*

For each provider, indicate whether all services were stopped, and then select one or more classes and care levels involved in the closure, along with the corresponding reimbursement request per closure day. If VPK classes were involved in the closure, please review the corresponding VPK provider applications.

**Providers**

No Services	Provider
<input type="checkbox"/>	
<input checked="" type="checkbox"/>	

VPK Classes (1 of 3) SR Care Levels (0 of 0)

- AF20 - Class A
- BF20 - Class B
- CF20 - Class C

**AF20 June 2021**

Sun	Mon	Tue	Wed	Thu	Fri	Sat
30	31	1 CN	2 CN	3 CN	4	5
6	7	8	9	10	11	12
13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	1	2	3

Total Processed Closure Reimbursable (CR) Days in Class: 2

CR = Closure Reimbursable. CN = Closure Non-Reimbursable.

Save Cancel Submit to Coalition

- **Closure Reasons** – Select the applicable reason(s) for closure. If “Other” is selected as the closure reason, then a comment is required.
- **Documentation** – Click the **Upload Document** button to upload necessary documents (optional).
- **Comments** – Enter comments related to the closure. If no comments are entered when the form is saved or submitted, the system will enter “Closure added by provider user” in the comments.
- After clicking the **Submit to Coalition** button, the **Sign and Certify** message appears.  
**NOTE:** Clicking the **Save** button saves the record in “Incomplete” status. The coalition can view incomplete forms.

Report Temporary Closure

CF20 - Class C

13	14	15	16	17	18	19
20	21	22	23	24	25	26
27	28	29	30	1	2	3

Total Processed Closure Reimbursable (CR) Days in Class: **2**

**CR** = Closure Reimbursable. **ENR** = Closure Non-Reimbursable.

**Closure Reasons** (select all that apply) \*

Exposure to COVID-19

Scheduled deep-cleaning due to COVID-19

Lack of child attendance

Lack of staff availability

Declared state of emergency other than COVID-19 (such as a hurricane)

Other

**Documentation**

Attach the documentation necessary to establish proof of site closure.

**Closure Documents**

Upload Document...

**Comments** (limit 1000 characters)

Save Cancel **Submit to Coalition**

- Complete the authorized electronic signature information, then click the **Submit** button.

Temporary Closure ~ Sign and Certify

By signing this form I certify that:

- I certify that the temporary closure was due to the circumstances as described above and the information provided is true and correct.
- I understand the coalition will determine reimbursement eligibility based on 6M-8.204 Uniform Attendance Policy for Funding the VPK Program and 6M-4.501 Reimbursement During Emergency Closures for the SR program.
- I understand child attendance records will not be collected for closure days.
- I understand the VPK Provider Application classroom calendars must be modified to restore instructional hours in excess of the allotted emergency closure days in order to receive reimbursement.

**Authorized Electronic Signature**

**Full Name** \*

Certify by Electronic Signature \*

**Submission Date**

10/22/2020

**Submit**

Cancel

- Clicking the **Submit** button submits the closure to the coalition. The record appears in the grid with "Submitted" status. It is available in Coalition's 'Submitted' queue.

## VPK Non-Reimbursable Temporary Closures

After the coalition approves a temporary closure that has non-reimbursable (CN) days, VPK providers must take additional steps to complete the process. When the temporary closure with non-reimbursable days is set to “Processed”:

1. The provider’s VPK provider application (VPK-APP) is changed to “Incomplete” status.
2. If the class(es) associated with the non-reimbursable closure shares a calendar with another class, the system separates the calendar so that each class that shared the calendar will have its own calendar. In other words, the original class calendar is cloned as many times as needed and each cloned calendar is assigned to a class so that all classes involved in the closure have its own calendar. (One of the classes will keep the original calendar.)
  - A new cloned calendar’s name consists of the word “Revised:” followed by the original calendar’s name and the associated class’s name in parenthesis.
  - If the original calendar does not have a name, the cloned calendar’s name will only consist of “Revised:” and the associated class’s name in parenthesis.

Example:

### Original Calendar:

The screenshot shows a calendar interface for August 2021. On the left, there are three buttons: a calendar icon with 'A', 'Edit', and 'Remove'. Below these buttons, the calendar name is 'M - F 8:30 - 11:30', the program type is 'School Year (540 hours)', the start date is '08/10/2021', and the end date is '05/27/2022'. On the right, the title is 'Non-Instructional, Site Closures and Exceptional Instructional Days:' followed by 'August 2021' and a right arrow. Below this is a table with columns for Sun, Mon, Tue, and Wed, and rows for days 1, 2, 3, and 4.

Sun	Mon	Tue	Wed
1	2	3	4

### Cloned Calendar assigned to class AF21:

The screenshot shows a cloned calendar interface for August 2021. On the left, there are three buttons: a calendar icon with 'A', 'Edit', and 'Remove'. Below these buttons, the calendar name is 'Revised: M - F 8:30 - 11:30 (AF21)', the program type is 'School Year (540 hours)', the start date is '08/10/2021', and the end date is '05/27/2022'. On the right, the title is 'Non-Instructional, Site Closures and Exceptional Instructional Days:' followed by 'August 2021' and a right arrow. Below this is a table with columns for Sun, Mon, Tue, and Wed, and rows for days 1, 2, 3, and 4.

Sun	Mon	Tue	Wed
1	2	3	4

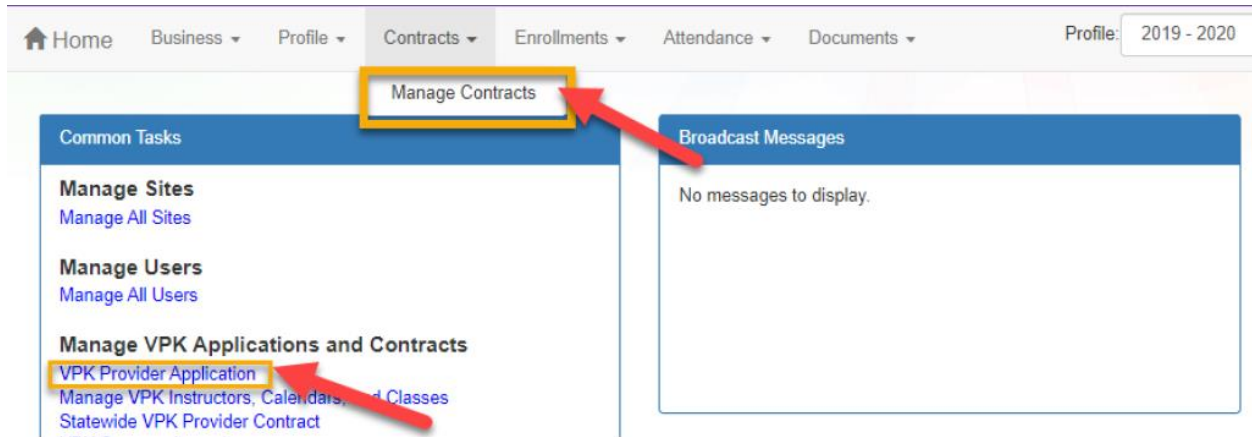
3. The non-reimbursable temporary closures for each class are automatically written to the original and/or cloned calendar as “**Non-Instructional: Temporary Closure Added**” in the correct service period month.

**NOTE:** When non-instructional temporary closure days are added to a VPK calendar, the Total Calculated Hours are reduced, so the provider must adjust the calendar to restore the calculated hours to “540”.

4. An email notification is sent to the provider advising that their VPK-APP is in non-certified status due to a temporary closure. The provider is instructed to log into the account to update and submit the VPK-APP to the coalition.

## Update VPK Class Calendar

Providers must revise their VPK class calendar(s) in their VPK-APP to make up the hours for the non-instructional day(s) due to temporary closure (CN days). In the Provider Portal, navigate to the **Contracts > Manage Contracts**. Or, on the home page Common Tasks section, click the VPK Provider Application link.

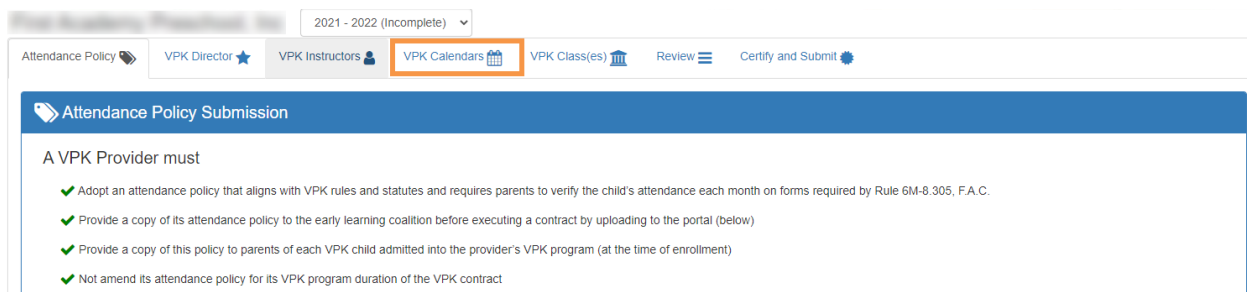


On the Manage Contracts page, click the **Edit** button for the incomplete VPK-APP.

The screenshot shows the 'Manage Contracts' page. At the top, there is a search bar and a 'Clear All Filters' button. Below that, there is a table with columns: Contract ID, Type of Contract, Contract Name, Coalition, Status, Last Updated, Action, View Contract, Effective Date, Termination Date, and Program Year. The table contains 5 entries. The first entry has a status of 'Incomplete' and an 'Edit' button highlighted with a red box. The other entries have a status of 'Certified' and 'Download' buttons.

Contract ID	Type of Contract	Contract Name	Coalition	Status	Last Updated	Action	View Contract	Effective Date	Termination Date	Program Year
29683	VPK-APP	VPK 10,11A,11B		Incomplete	8/29/2021	<a href="#">Edit</a>				2021 - 2022
24341	VPK-APP	VPK 10,11A,11B		Certified	6/30/2021	<a href="#">Edit</a>	<a href="#">Download</a>	8/10/2020		2020 - 2021
16030	VPK-APP	VPK 10,11A,11B		Certified	6/24/2020	<a href="#">Edit</a>	<a href="#">Download</a>	8/12/2019		2019 - 2020
7313	VPK-APP	VPK 10,11A,11B		Certified	7/11/2019	<a href="#">Edit</a>	<a href="#">Download</a>	8/13/2018		2018 - 2019
7110	VPK-APP	VPK 10,11A,11B		Certified	7/11/2019	<a href="#">Edit</a>	<a href="#">Download</a>	5/29/2018		2017 - 2018

Click the **VPK Calendars** tab to open the calendars page.





Identify the calendar(s) with the non-instructional temporary closure days. Click the **Edit** button to make changes to a calendar. The system defaults to the first calendar month of the class. Click the forward arrow if needed to view the month with the closure.

Calendar Name: 3hr AM  
 Program Type: School Year (540 hours)  
 Calendar Start Date: 08/10/2021  
 Calendar End Date: 05/27/2022

Day	Start Time	End Time	Total Hours
Monday	08:15 AM	11:15 AM	3
Tuesday	08:15	11:15	3

The Totaled Calculated Hours will be reduced for each non-instructional day based on the hours defined for the day.

Calendar Name: 3hr AM  
 Program Type: School-Year (540 hours)  
 Calendar Start Date: 08/10/2021  
 Calendar End Date: 05/27/2022

Day	Start Time	End Time	Total Hours
<input checked="" type="checkbox"/> Monday	08:15 AM	11:15 AM	3
<input checked="" type="checkbox"/> Tuesday	08:15 AM	11:15 AM	3
<input checked="" type="checkbox"/> Wednesday	08:15 AM	11:15 AM	3
<input checked="" type="checkbox"/> Thursday	08:15 AM	11:15 AM	3
<input checked="" type="checkbox"/> Friday	08:15 AM	11:15 AM	3
<input type="checkbox"/> Saturday			0
<input type="checkbox"/> Sunday			0

Total Calculated Hours: 537.00

The Total Calculated Hours are less than the hours allotted for the VPK Program Type selected. Please correct if needed.  
 Total VPK Instructional Days: 179

Make adjustments to the calendar to restore the hours to 540. This can be accomplished in a variety of ways such as:

- Canceling previously identified future non-instructional days
- Extending the class end date
- Extending the time on instructional days by creating Instructional Day Exceptions with different class hours

When the changes are done and the calculated hours are restored, click the **Save** button.

**NOTE:** These steps must be completed for each impacted calendar.

When all impacted calendars are updated, click on the **Certify and Submit** tab. Complete the signature information, then click the **Submit VPK Provider Application** button.

The screenshot shows the 'Certify and Submit' interface. At the top, a navigation bar includes 'Attendance Policy', 'VPK Director', 'VPK Instructors', 'VPK Calendars', 'VPK Class(es)', 'Review', and 'Certify and Submit' (highlighted with an orange box). Below this is a blue header with a gear icon and the text 'Certify and Submit'. The main content area has a yellow background with the heading 'By signing this form I certify that:' followed by a list of certification points. Below the text is a white box titled 'Provider Signature' containing the following fields: 'Signer's Name' (with a blurred input), 'Day Time Phone Number' (with '5555555555' entered), 'Electronic Signature' (with a checked checkbox and the text 'Check this box to certify by electronic signature'), and 'Application Completion Date' (with '08/29/2021' entered). At the bottom of this box is a green button labeled 'Submit VPK Provider Application', which is pointed to by an orange arrow.

After clicking **Submit VPK Provider Application**, the VPK-APP status changes to “Submitted” and the application is available for the coalition to review.

**NOTE:** Since reimbursable temporary closure (CR) days do not reduce the total class hours, they will not be added to the VPK calendar.

## Attendance Rosters

After the temporary closure is processed by the coalition, the temporary closure days will show on SR and/or VPK attendance rosters as CR or CN.

**NOTE:** For VPK, if there were any CN days, the coalition must review the provider's updates to the VPK calendar and set the VPK-APP status to Certified before attendance can be done.

In the blue header, the temporary closure details display the closure dates.

### SR Attendance Roster:

A "⊗" symbol indicates that the child's care level is impacted by a temporary closure during the service period.

VPK Attendance Roster:

PreKindergarten (VPK)

Due Date : 9/3/2021

Summary

**Class attendance has NOT been submitted to Coalition at this time.**

<b>Class</b>	AF21-3hr AM	<b>Max Class Size</b>	20
<b>Start Date</b>	8/10/2021	<b>End Date</b>	5/27/2022
<b>Curriculum</b>	Mother Goose Time	<b>Edition</b>	2017

**Temporary Closure (ID: 25242) 08/13/2021 - 08/20/2021**

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

Attendance Calendar

August 2021

Sun	Mon	Tue	Wed	Thu	Fri	Sat
1 *	2 *	3 *	4 *	5 *	6 *	7 *
8 *	9 *	10 X	11 X	12 X	13 CR	14 *
15 *	16 CR	17 CR	18 CR	19 CR	20 CN	21 *
22 *	23 X	24 X	25 X	26 X	27 X	28 *
29 *	30	31	1	2	3	4

**Child's Current Information**

**Name** [REDACTED]

**DOB** [REDACTED]      **Age** 4

**Status** Enrolled      **BGrp** VPK

**Cert** VPK [REDACTED]-2021

**Class** AF21-3hr AM

**Monthly Attendance Summary**

**Days Present** 8

**Days absent** 0

**Reject Reason**

N/A

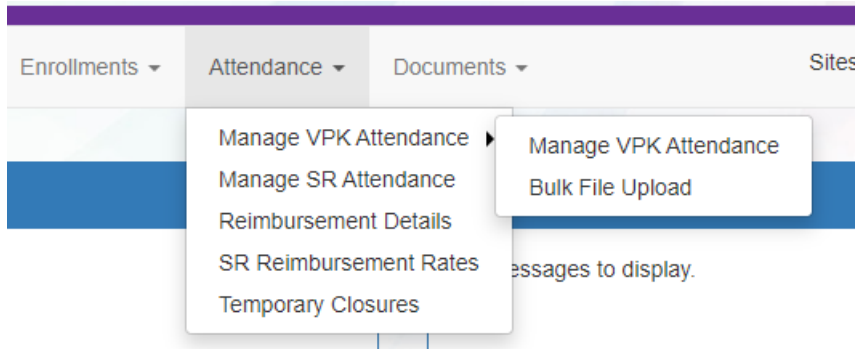
**Reject Comment**

N/A

After each child's attendance for the month is reviewed, it can be submitted to the coalition.

## Attendance - VPK

Providers manage VPK attendance online by navigating to the Attendance menu item and selecting **Manage VPK Attendance**. Providers may submit their attendance through the web page or using a bulk file upload, similar to the bulk enrollment file upload. It is important to note that changes to enrollment, such as entering a termination date, or changes to the class schedule, such as reporting a site closure, cannot be performed in attendance. Enrollment information must be corrected in the Enrollments area. Class schedule information must be corrected in the **Contracts > VPK Provider Application** area. Any changes to source data should be done prior to submitting attendance. Coalitions may assist as needed.



## Submitting Attendance Online

Select the **Manage VPK Attendance** menu item. The VPK Attendance Roster displays, defaulting to the current service period and first class. The blue summary box to the right contains class details such as the class full name, start and end dates, and max class size. If necessary, use the drop downs to select a different service period and/or class.

**VPK Attendance Roster**

Program Type\*:  Voluntary PreKindergarten (VPK)

Service Period\*:  Due Date: ! 11/5/2018

Class ID\*:

Search:

! Class attendance has NOT been submitted to Coalition at this time.

Class	AF18-Purple Room	Max Class Size	11
Start Date	7/2/2018	End Date	5/31/2019
Curriculum	Scholastic Big Day for Pre-K-English	Edition	1st edition/2010

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

Child Name	DOB	Age	Billing Group	Status
1. Cunch Latham	9/9/2013	5y	VPK	
2. Goodbar Latham	9/9/2013	5y	VPK	
3. Krackel Latham	9/9/2013	5y	VPK	
4. Mentos Latham	9/9/2013	5y	VPK	
5. Milky Way Latham	9/9/2013	5y	VPK	
6. Nestle Latham	1/1/2014	4y	VPK	
7. Payday Latham	9/9/2013	5y	VPK	
8. Reese's Pieces Latham	9/9/2013	5y	VPK	
9. Snickers Latham	9/9/2013	5y	VPK	
10. Three Musketeers Latham	9/9/2013	5y	VPK	
11. Twix Latham	9/9/2013	5y	VPK	
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

**Attendance Calendar**

October 2018

Sun	Mon	Tue	Wed	Thu	Fri	Sat
30	1	2	3	4	5	6
7	8	9	10	11	12	13
14	15	16	17	18	19	20
21	22	23	24	25	26	27
28	29	30	31	1	2	3

Select a child to edit attendance

Enrolled/Present

**NOTE:** A service period is the month in which services were rendered. Child absences for the service period must be marked, saved, and submitted to the coalition for payment. A due date is displayed for each service period. Providers with multiple classes must submit an attendance roster for each class for payment.

The search feature may be used to search for any criteria included in the roster (i.e. a name, DOB, age, billing group, or status). The summary feature shows the current/saved attendance information for all children in one view.

To record attendance, click on a child’s name to view their attendance for the month.

The screenshot displays a web-based attendance management system. On the left, a search bar is positioned above a roster table listing 11 children with columns for Child Name, DOB, Age, Billing Group, and Status. The main area features an 'Attendance Calendar' for October 2018, where days are marked with 'X' for present, 'A' for absent, and '\*' for closed days. A legend in the bottom left explains these codes. On the right, a 'Child's Current Information' box for Crunch Latham shows details like Name, DOB, Age, Status, Cert, and Class, along with a 'Monthly Attendance Summary' indicating 19 days present and 0 days absent. At the bottom, there are buttons for 'Save', 'Save & Exit', 'Cancel', and 'Submit to Coalition'.

- Days the site is closed are marked with an asterisk “\*.”
- Days the child is scheduled to attend are marked with an “X” for present.
- A legend is provided in the bottom right for more code descriptions.

To change a present day to absent, click on the “X.” The “X” for present will now appear as an “A” for absent.

**NOTE:** Absences entered by mistake can be changed back to present by clicking on the “A.”

While not required, it is recommended to click **Save** (below the calendar) before moving on to another child. When all child absences are marked for the month, click **Save** and then click the **Submit to Coalition** button. A window may appear if the attendance is being submitted early or late, or if no absences have been recorded. To continue to the *Sign & Certify* page, click **Continue**.

Service Period\*: 10/1/2018 to 10/31/2018 Due Date: 11/5/2018

Class ID\*: AF18

Class: AF18-Purple Room Max Class Size: 11  
 Start Date: 7/2/2018 End Date: 5/31/2019  
 Curriculum: Scholastic Big Day for Pre-K English Edition: 1st edition/2010

1 to 11 of 11 enrolled

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

**Submit Attendance**

The due date for this service period has passed. Late attendance records may be processed in the next reporting period.

Clicking Continue will move to Sign & Certify.

Cancel Continue

**Child's Current Information**

Name: Three Musketeers Latham  
 DOB: 9/9/2013 Age: 5  
 Status: Enrolled BGrp: VPK  
 Cert: VPK1109732-2018  
 Class: AF18-Purple Room

**Monthly Attendance Summary**

Absences

10/11/2018  
 10/15/2018

Days Present: 17  
 Days absent: 2

Save Save & Exit Cancel Submit to Coalition

X Enrolled/Present  
 A Absent  
 N Non-Reimbursable/Non-Scheduled Days  
 H Paid Holiday Days

The *Sign and Certify* page displays the class summary with the total number of days absent and days present. At this point, providers may want to print this page using the browser print function. When ready, review the certification statements and complete the Authorized Electronic Signature portion by entering the user's **Full Name**, checking the box for **Certify by electronic signature**, and clicking **Submit**. To abandon the submission, click **Cancel**.

Attendance - Sign and Certify

Funder Type: VPK Service Period: 10/1/2018 to 10/31/2018 Due Date: 11/5/2018 Coalition: ELC of TALLAHASSEE  
 Provider ID: 19449 Site: Growing Up Strong Site Address: 205 MARRIOTT DR TALLAHASSEE, FL 32301 County: KREPS ISLAND  
 Class ID-Name: AF18-Purple Room Class Start Date: 7/2/2018 Class End Date: 5/31/2019

Child Name	DOB	Age	Billing Group	Mon 10/1	Tue 10/2	Wed 10/3	Thu 10/4	Fri 10/5	Sat 10/6	Sun 10/7	Mon 10/8	Tue 10/9	Wed 10/10	Thu 10/11	Fri 10/12	Sat 10/13	Sun 10/14	Mon 10/15	Tue 10/16	Wed 10/17	Thu 10/18	Fri 10/19	Sat 10/20	Sun 10/21	Mon 10/22	Tue 10/23	Wed 10/24	Thu 10/25	Fri 10/26	Sat 10/27	Sun 10/28	Mon 10/29	Tue 10/30	Wed 10/31	Days Absent	Days Present
1. Crunch Latham	9/9/2013	5y	VPK	X	X	X	X				X	X	X	X				X	X	A	X				X	X	X	X				X	X	X	1	18
2. Goodbar Latham	9/9/2013	5y	VPK	X	X	X	X				X	X	X	X				X	X	X	X				X	X	X	X				X	X	X	0	19
3. Krackel Latham	9/9/2013	5y	VPK	X	X	X	X				X	X	X	X				X	X	X	X				X	X	X	X				X	X	X	0	19
4. Mentos Latham	9/9/2013	5y	VPK	X	X	X	X				X	X	X	X				X	X	X	X				X	X	X	X				X	X	X	0	19
5. Milky Way Latham	9/9/2013	5y	VPK	X	X	X	X				X	X	X	X				X	X	X	X				X	X	X	X				X	X	X	0	19
6. Nestle Latham	1/1/2014	4y	VPK																																0	8
7. Payday Latham	9/9/2013	5y	VPK	X	X	X	X				X	X	X	X				X	X	X	X				X	X	X	X				X	X	X	0	19
8. Reese's Pieces Latham	9/9/2013	5y	VPK	X	X	X	X				X	X	X	X				A	X	X	X				X	X	X	X				X	X	X	1	18
9. Snickers Latham	9/9/2013	5y	VPK	X	X	X	X				X	X	X	X				X	X	X	X				X	X	X	X				X	X	X	0	19
10. Three Musketeers Latham	9/9/2013	5y	VPK	X	X	X	X				X	X	X	A				A	X	X	X				X	X	X	X				X	X	X	2	17
11. Twix Latham	9/9/2013	5y	VPK	X	X	X	X				X	X	X	X				X	X	X	A				A	A	A	A				X	X	X	5	14

X: Enrolled/Present A: Absent T: Terminated/Enrollment Ended \* Closed

By signing this form I certify that:

- I have examined this VPK monthly attendance for payment reimbursement and, to the best of my knowledge and belief, the information provided is true and correct.
- I understand sign in/out sheets must be maintained for monitoring purposes and may be uploaded to the Document Library.

Authorized Electronic Signature

Full Name: \*

Certify by electronic signature \*

Submission Date: 12/8/2018

Submit

Cancel

## Submitted Attendance

Upon submission, the screen returns to the VPK Attendance Roster view with the current service period displayed. Select the submitted service period from the drop down. The submitted roster now has a submitted message and each child shows "SUB" for submitted in the status column. This status will change as the child attendance is processed by the coalition.

The screenshot shows the VPK Attendance Roster interface. At the top, it displays 'Program Type: VPK', 'Service Period: 10/1/2018 to 10/31/2018', and 'Due Date: 11/5/2018'. A blue notification box states: 'Class attendance was submitted to Coalition on 12/8/2018 by alatham77+OEL.provider@gmail.com'. Below this, class details are shown: 'Class: AF18-Purple Room', 'Max Class Size: 11', 'Start Date: 7/2/2018', 'End Date: 5/31/2019', 'Curriculum: Scholastic Big Day for Pre-K English', and 'Edition: 1st edition/2010'. A table lists 11 enrolled children, all with a status of 'SUB'. An 'Attendance Calendar' for October 2018 is displayed, with a button to 'Select a child to edit attendance'.

Child Name	DOB	Age	Billing Group	Status
1. Crunch Latham	9/9/2013	5y	VPK	⊙ SUB
2. Goodbar Latham	9/9/2013	5y	VPK	⊙ SUB
3. Krackel Latham	9/9/2013	5y	VPK	⊙ SUB
4. Mentos Latham	9/9/2013	5y	VPK	⊙ SUB
5. Milky Way Latham	9/9/2013	5y	VPK	⊙ SUB
6. Nestle Latham	9/1/2014	4y	VPK	⊙ SUB
7. Pawley Latham	9/9/2013	5y	VPK	⊙ SUB
8. Reese's Pieces Latham	9/9/2013	5y	VPK	⊙ SUB
9. Snickers Latham	9/9/2013	5y	VPK	⊙ SUB
10. Three Musketeers Latham	9/9/2013	5y	VPK	⊙ SUB
11. Twix Latham	9/9/2013	5y	VPK	⊙ SUB

## Rejected Attendance

Coalition staff may reject submitted attendance. In this case, the individual that submitted the roster will receive an email notification. Instructions are provided to log in to the Provider Services Portal, review the roster, make necessary changes to rejected records, and re-submit. The rejected child records are displayed at the top of the roster list in red and show "REJ" for rejected in the status column. Only records with "REJ" may be edited.

The screenshot shows the VPK Attendance Roster interface. At the top, it displays 'Program Type: VPK', 'Service Period: 9/1/2018 to 9/30/2018', and 'Due Date: 10/3/2018'. A blue notification box states: 'Class attendance was submitted to Coalition on 12/8/2018 by alatham77+OEL.provider@gmail.com'. Below this, class details are shown: 'Class: AF18-Purple Room', 'Max Class Size: 11', 'Start Date: 7/2/2018', 'End Date: 5/31/2019', 'Curriculum: Scholastic Big Day for Pre-K English', and 'Edition: 1st edition/2010'. A table lists 11 enrolled children, with the first two (Crunch and Goodbar Latham) having a status of 'REJ' and the others having a status of 'APP'. An 'Attendance Calendar' for September 2018 is displayed, with a button to 'Select a child to edit attendance'.

Child Name	DOB	Age	Billing Group	Status
1. Goodbar Latham	9/9/2013	5y	VPK	⊙ REJ
2. Krackel Latham	9/9/2013	5y	VPK	⊙ REJ
3. Crunch Latham	9/9/2013	5y	VPK	✓ APP
4. Mentos Latham	9/9/2013	5y	VPK	✓ APP
5. Milky Way Latham	9/9/2013	5y	VPK	✓ APP
6. Pawley Latham	9/9/2013	5y	VPK	✓ APP
7. Reese's Pieces Latham	9/9/2013	5y	VPK	✓ APP
8. Snickers Latham	9/9/2013	5y	VPK	✓ APP
9. Three Musketeers Latham	9/9/2013	5y	VPK	✓ APP
10. Twix Latham	9/9/2013	5y	VPK	✓ APP
11.				

To edit, click the name of a rejected record. Any absences previously recorded appear. Make changes as needed. After the last record is corrected, click **Save**. Then, click the **Submit to Coalition** button and continue to the *Sign & Certify* page. This time, the *Sign & Certify* page only shows the rejected records that are being re-submitted to the coalition. Complete the Authorized Electronic Signature portion and click Submit.



**Attendance - Sign and Certify**

Funder Type: VPK      Service Period: 9/1/2018 to 9/30/2018      Due Date: 10/3/2018      Coalition: ELC of TALLAHASSEE  
 Provider ID: 19449      Site: Growing Up Strong      Site Address: 205 MARRIOTT DR TALLAHASSEE, FL 32301      County: KREPS ISLAND  
 Class ID-Name: AF18-Purple Room      Class Start Date: 7/2/2018      Class End Date: 5/31/2019

Child Name	DOB	Age	Billing Group	Sat 9/1	Sun 9/2	Mon 9/3	Tue 9/4	Wed 9/5	Thu 9/6	Fri 9/7	Sat 9/8	Sun 9/9	Mon 9/10	Tue 9/11	Wed 9/12	Thu 9/13	Fri 9/14	Sat 9/15	Sun 9/16	Mon 9/17	Tue 9/18	Wed 9/19	Thu 9/20	Fri 9/21	Sat 9/22	Sun 9/23	Mon 9/24	Tue 9/25	Wed 9/26	Thu 9/27	Fri 9/28	Sat 9/29	Sun 9/30	Days Absent	Days Present
1 Goodbar Latham	9/9/2013	5y	VPK			X	X	X	X				A	A	X	X				X	X		A				X	X	X	X				3	12
2 Krackel Latham	9/9/2013	5y	VPK			X	X	X	X				X	X	X	X				X	X		X				X	X	X	X				0	15

X: Enrolled/Present    A: Absent    T: Terminated/Enrollment Ended    \* Closed

By signing this form I certify that:

- I have examined this VPK monthly attendance for payment reimbursement and, to the best of my knowledge and belief, the information provided is true and correct.
- I understand sign in/out sheets must be maintained for monitoring purposes and may be uploaded to the Document Library.

Authorized Electronic Signature

Full Name:

Certify by electronic signature \*

Submission Date: 12/9/2018

Upon submission, the rejected "REJ" records appear on the roster as submitted "SUB."

**Approved Attendance**

Coalition staff will continue to work submitted attendance until the records are approved for payment. Approved records appear on the attendance roster as "APP" for approved in the status column.

**VPK Attendance Roster**

Program Type: VPK      Voluntary PreKindergarten (VPK)  
 Service Period: 8/1/2018 to 8/31/2018      Due Date: 9/6/2018  
 Class ID: AF18     

Class: AF18-Purple Room      Max Class Size: 11  
 Start Date: 7/2/2018      End Date: 5/31/2019  
 Curriculum: Scholastic Big Day for Pre-K English      Edition: 1st edition/2010

Class attendance was submitted to Coalition on 12/8/2018 by alatham77+OELprovider@gmail.com.

Search:

1 to 10 of 10 enrolled

Child Name	DOB	Age	Billing Group	Status
1. Crunch Latham	9/9/2013	5y	VPK	✓APP
2. Goodbar Latham	9/9/2013	5y	VPK	✓APP
3. Krackel Latham	9/9/2013	5y	VPK	✓APP
4. Mentos Latham	9/9/2013	5y	VPK	✓APP
5. Milky Way Latham	9/9/2013	5y	VPK	✓APP
6. Payday Latham	9/9/2013	5y	VPK	✓APP
7. Reese's Pieces Latham	9/9/2013	5y	VPK	✓APP
8. Snickers Latham	9/9/2013	5y	VPK	✓APP
9. Three Musketeers Latham	9/9/2013	5y	VPK	✓APP
10. Twix Latham	9/9/2013	5y	VPK	✓APP
11.				

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

Attendance Calendar

August 2018

Sun	Mon	Tue	Wed	Thu	Fri	Sat
29	30	31	1	2	3	4
5	6	7	8	9	10	11

Select a child to edit attendance

When records are paid by the coalition, the reimbursement details are posted on the Provider Portal under **Attendance > Reimbursement Details.**

Enrollments ▾    Attendance ▾    Documents ▾

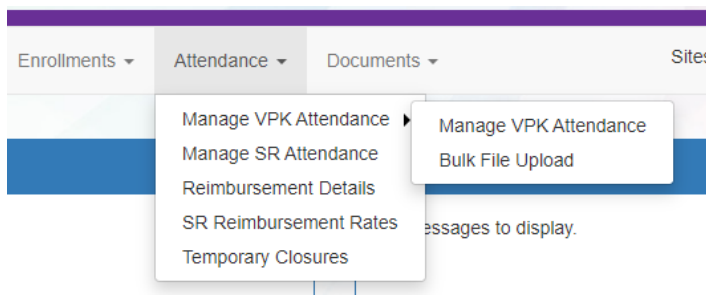
- Manage VPK Attendance ▶
- Manage SR Attendance
- Reimbursement Details
- SR Reimbursement Rates
- Temporary Closures

Providers can run a Payment Period or Service Period Reimbursement Report.

Report Name	Action
Payment Period Report	<a href="#">Run Report</a>
Service Period Report	<a href="#">Run Report</a>

## Uploading Bulk Attendance File

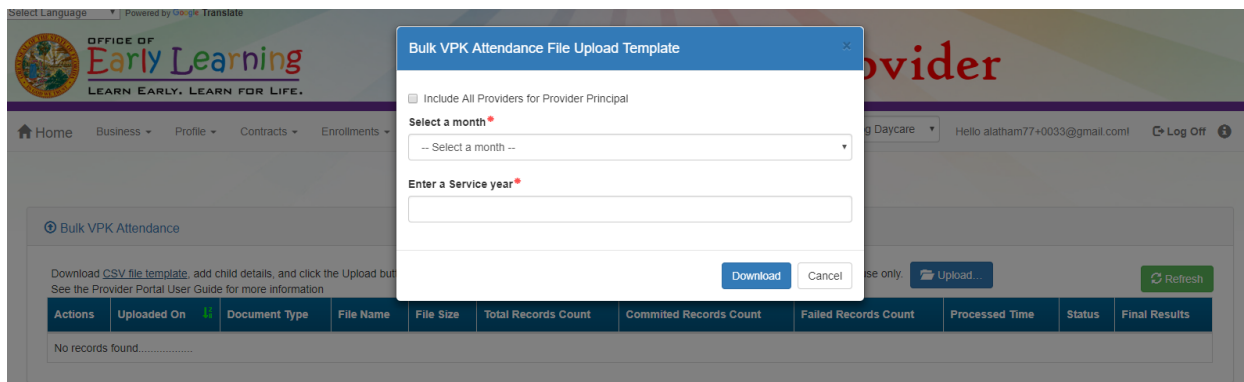
Providers may submit their attendance via a bulk file upload (similar to the enrollment bulk file upload process). To begin, go to the Attendance menu item, choose Manage VPK Attendance, and then select **Bulk File Upload**.



The Bulk VPK Attendance page displays.

Actions	Uploaded On	Document Type	File Name	File Size	Total Records Count	Committed Records Count	Failed Records Count	Processed Time	Status	Final Results
No records found.....										

Click the **CSV file template** link. A window appears. From this window, select the service month and year to generate a file for all of the enrollments (for all classes) at the site that month. Alternatively, multi-site providers may check the "Include all providers for provider principal" box to generate a file for all of the enrollments (for all classes) at all sites associated to the account for that month. Then, click the **Download** button.



Open the downloaded file. The enrollment information for each class is pre-populated. Each instructional day during the student's enrollment defaults to present (X).

	A	B	C	D	E	F	G	H	I	J	K	L	M	N	O	P	Q	R	S
1	ProviderID	MSID	ProviderName	COENumber	FLEID	ChildLastName	ChildFirstName	ChildDateOfBirth	AttendanceMonth	AttendanceYear	Day_1	Day_2	Day_3	Day_4	Day_5	Day_6	Day_7	Day_8	Day_9
2	8433		Daisy Mae Daycare	VPK748-2018		Latham	Ariel	2/2/2014 0:00	8	2018	*	*	*	*	*	*	*	*	*
3	8433		Daisy Mae Daycare	VPK751-2018		Latham	Bambi	1/1/2014 0:00	8	2018	*	*	*	*	*	*	*	*	*
4	8433		Daisy Mae Daycare	VPK752-2018		Latham	Blue Fairy	8/8/2013 0:00	8	2018	*	*	*	*	*	*	*	*	*
5	8433		Daisy Mae Daycare	VPK753-2018		Latham	Pinocchio	12/12/2013 0:00	8	2018	*	*	*	*	*	*	*	*	*
6	8433		Daisy Mae Daycare	VPK747-2018		Latham	Aladin	1/1/2014 0:00	8	2018	*	*	*	*	*	*	*	*	*
7	8433		Daisy Mae Daycare	VPK757-2018		Latham	Chip	2/2/2013 0:00	8	2018	*	*	*	*	*	*	*	*	*
8	8433		Daisy Mae Daycare	VPK754-2018		Latham	Cinderella	7/7/2013 0:00	8	2018	*	*	*	*	*	*	*	*	*
9	8433		Daisy Mae Daycare	VPK756-2018		Latham	Cruella deVil	2/2/2013 0:00	8	2018	*	*	*	*	*	*	*	*	*
10	8433		Daisy Mae Daycare	VPK758-2018		Latham	Dale	1/1/2014 0:00	8	2018	*	*	*	*	*	*	*	*	*
11	8433		Daisy Mae Daycare	VPK749-2018		Latham	Hercules	1/1/2014 0:00	8	2018	*	*	*	*	*	*	*	*	*

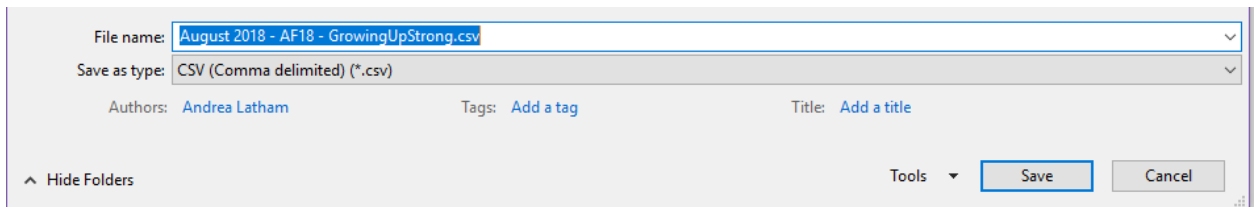
T	U	V	W	X	Y	Z	AA	AB	AC	AD	AE	AF	AG	AH	AI	AJ	AK	AL	AM	AN	AO	AP	AQ	AR	AS	AT
Day_10	Day_11	Day_12	Day_13	Day_14	Day_15	Day_16	Day_17	Day_18	Day_19	Day_20	Day_21	Day_22	Day_23	Day_24	Day_25	Day_26	Day_27	Day_28	Day_29	Day_30	Day_31	ClassroomID	ClassroomName	CountyID	EnrollmentVPKID	ProviderRosterID
*	*	*	X	X	X	X	X	*	*	X	X	X	X	X	*	*	X	X	X	X	X	1130	AF18	37	271	397
*	*	*	X	X	X	X	X	*	*	X	X	X	X	X	*	*	X	X	X	X	X	1130	AF18	37	272	398
*	*	*	X	X	X	X	X	*	*	X	X	X	X	X	*	*	X	X	X	X	X	1130	AF18	37	273	399
*	*	*	X	X	X	X	X	*	*	X	X	X	X	X	*	*	X	X	X	X	X	1130	AF18	37	274	400
*	*	*	-	-	-	X	X	*	*	X	X	X	X	X	*	*	X	X	X	X	X	1131	BF18	37	279	450
*	*	*	X	X	X	X	X	*	*	X	X	X	X	X	*	*	X	X	X	X	X	1131	BF18	37	277	448
*	*	*	X	X	X	X	X	*	*	X	X	X	X	X	*	*	X	X	X	X	X	1131	BF18	37	275	446
*	*	*	X	X	X	X	X	*	*	X	X	X	X	X	*	*	X	X	X	X	X	1131	BF18	37	276	447
*	*	*	X	X	X	X	X	*	*	X	X	X	X	X	*	*	X	X	X	X	X	1131	BF18	37	278	449
*	*	*	X	X	X	X	X	*	*	X	X	X	X	X	*	*	X	X	X	X	X	1131	BF18	37	284	451

- Legend: present (X), site closed (\*), student not started (\_), student terminated (T).
- Day\_1 = first of attendance month, Day\_2 = second day of attendance month, Day\_3 = third day of attendance month, etc. In this example, Day\_1 = August 1, Day\_2 = August 2, and Day\_3 = August 3.
- Regardless of the month/year, columns for Day\_1 to Day\_31 are included in the file and are necessary for the upload; none should be removed.
- It is critical that only the content of "Day\_#" columns are changed (i.e. changing an X to an A). Attempting to add students or edit/remove system generated columns will cause errors. The file is a reflection of the enrollment information for the class when downloaded. If issues are identified, please contact the local early learning coalition for assistance.

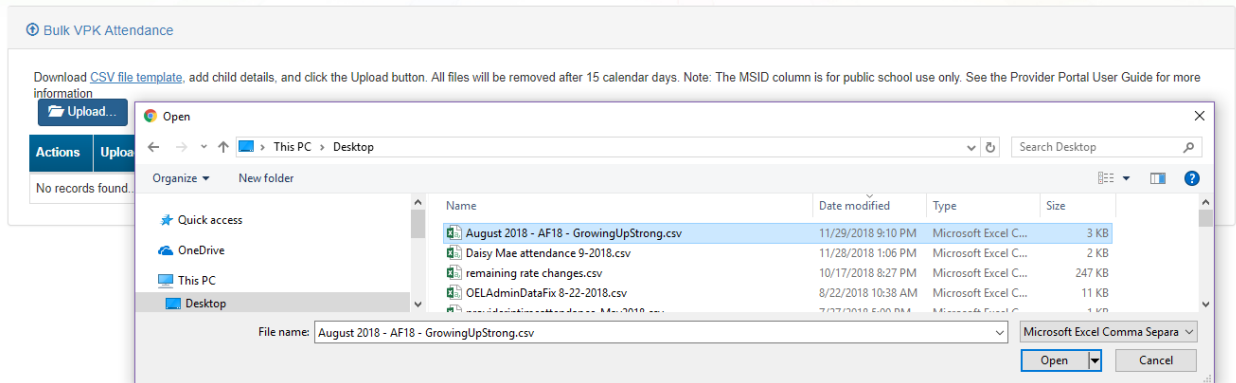
Scroll over to the days and record absences by changing a present day (X) to absent (A). Tip: (In Excel) Open the **View** menu, select column H, and click **Freeze Panes**. This will keep the student's name and demographic information in view while scrolling through days.

	F	H	I	J	K	L	M	N	O	P	Q	R	S	T	U	V	W	X	Y	Z	AA	AB	AC
1	ChildFirstName	AttendanceMonth	AttendanceYear	Day_1	Day_2	Day_3	Day_4	Day_5	Day_6	Day_7	Day_8	Day_9	Day_10	Day_11	Day_12	Day_13	Day_14	Day_15	Day_16	Day_17	Day_18	Day_19	Day_20
2	Crunch	8	2018	-	-	-	*	*	-	-	-	-	-	*	*	X	X	X	X	X	*	*	X
3	Goodbar	8	2018	-	-	-	*	*	-	-	-	-	-	*	*	X	X	X	X	X	*	*	X
4	Krackel	8	2018	-	-	-	*	*	-	-	-	-	-	*	*	X	X	X	X	X	*	*	X
5	Mentos	8	2018	-	-	-	*	*	-	-	-	-	-	*	*	X	X	X	X	X	*	*	X
6	Milky Way	8	2018	-	-	-	*	*	-	-	-	-	-	*	*	X	X	X	X	X	*	*	X
7	Payday	8	2018	-	-	-	*	*	-	-	-	-	-	*	*	X	X	X	X	X	*	*	X
8	Reese's Pieces	8	2018	-	-	-	*	*	-	-	-	-	-	*	*	X	X	X	X	X	*	*	X
9	Snickers	8	2018	-	-	-	*	*	-	-	-	-	-	*	*	X	X	X	X	X	*	*	X
10	Three Musketeers	8	2018	-	-	-	*	*	-	-	-	-	-	*	*	X	X	X	X	X	*	*	X
11	Twix	8	2018	-	-	-	*	*	-	-	-	-	-	*	*	X	X	X	X	X	*	*	X

(In Excel) When complete, un-hide and/or un-freeze any columns. Click File > Save As. Re-name file and save locally. Be sure the file type is .csv.



On the Provider Portal, click the **Upload** button. A file manager window opens. Locate the saved file and click **Open**.



The uploaded file displays in the Bulk VPK Attendance log.

Bulk VPK Attendance

Download [CSV file template](#), add child details, and click the Upload button. All files will be removed after 15 calendar days. Note: The MSID column is for public school use only. See the Provider Portal User Guide for more information.

[Upload...](#) [Refresh](#)

Actions	Uploaded On	Document Type	File Name	File Size	Total Records Count	Committed Records Count	Failed Records Count	Processed Time	Status	Final Results
	11/29/2018	VPK Roster	August 2018 - AF18 - GrowingUpStrong.csv	2 KB	null	null	null		Submitted	Not Available

Click the **Refresh** button to get final results.

Bulk VPK Attendance

Download [CSV file template](#), add child details, and click the Upload button. All files will be removed after 15 calendar days. Note: The MSID column is for public school use only. See the Provider Portal User Guide for more information.

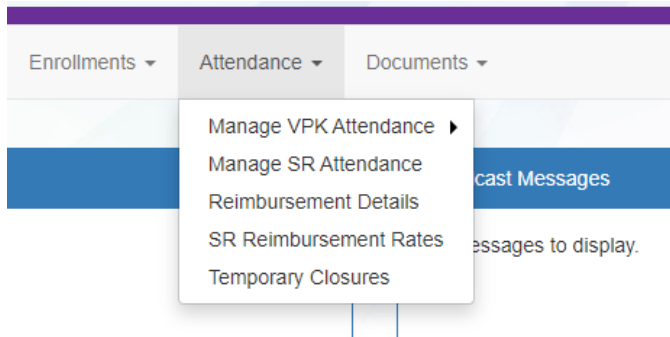
[Upload...](#) [Refresh](#)

Actions	Uploaded On	Document Type	File Name	File Size	Total Records Count	Committed Records Count	Failed Records Count	Processed Time	Status	Final Results
<a href="#">Download</a>	12/09/2018	VPK Roster	November 2018 - GrowingUpStrong.csv	2 KB	11	11	0		Completed	Completed

The successfully submitted attendance is now reflected on the class attendance roster. Each record shows "SUB" for submitted.

## Attendance - SR

Providers manage SR attendance online by navigating to the Attendance menu item and selecting **Manage SR Attendance**. Providers may submit their attendance through the web page. It is important to note that changes to enrollment, such as entering a termination date, cannot be performed in the attendance module but rather the Manage SR Enrollment area. Also, when issues appear on the attendance roster (such as incorrect enrollment information, missing children, duplicate children, missing paid holidays, duplicate absences on the same day, etc.), the issues should be communicated to the coalition before submitting the attendance roster. Coalitions may assist in addressing the issues so that the attendance records have accurate information.



## Submitting Attendance Online

Select the **Manage SR Attendance** menu item. The SR Attendance Roster displays, defaulting to the current service period. The blue summary box to the right contains provider details and paid holiday information for the service period.

Program Type\*:

Service Period\*:

Coalition\*:

Search:

1 to 6 of 6 enrolled

Child Name	DOB	Age	Billing Group	Status
1. Daphne Latham	3/3/2018	1y	BG8	
2. Fred Latham	3/3/2018	1y	BG8	
3. Scooby-Doo Latham	7/7/2015	3y	CCEP	
4. Scrappy-Doo Latham	8/8/2017	1y	CCEP	
5. Shaggy Latham	11/11/2014	4y	BG3	
6. Velma Latham	5/5/2016	2y	33-ALF	
7.				
8.				
9.				
10.				
11.				
12.				
13.				
14.				
15.				
16.				
17.				
18.				
19.				
20.				

Previous Next

School Readiness (SR)

Due Date: 9/6/2018

[Summary](#)

! Attendance has NOT been submitted to ELC of the Big Bend Region.

Care Level: INF, TOD, 2YR, PR3, PR4

Hours Of Operation: M-F 6:00am-6:30pm

SR/Local Funding Students: 6

Paid Holidays

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

Select a child from enrollees to edit attendance

### Attendance Calendar

## August 2018

Sun	Mon	Tue	Wed	Thu	Fri	Sat
29	30	31	1	2	3	4
5	6	7	8	9	10	11
12	13	14	15	16	17	18
19	20	21	22	23	24	25
26	27	28	29	30	31	1

**NOTE:** A service period is the month in which services were rendered. Child absences for the service period must be marked, saved, and submitted to the coalition. A due date is displayed for each service period. Providers that contract with multiple coalitions must submit an attendance roster to each coalition.

Children that are "Enrolled" are included on the SR attendance roster.

New enrollments in “Pending Family Acceptance” will not be visible on attendance rosters and will only appear once the family signs the payment certificate; however, there are exceptions.

- New enrollments for at-risk children (BG1) or at-risk children in relative care (BG3R) billing groups in Pending Family Acceptance will populate on attendance rosters
- Existing enrollments in Pending Family Acceptance that have already been submitted for attendance in previous months will continue to populate on attendance rosters

If a provider has new enrollments in “Pending Family Acceptance”, when the provider clicks the **Manage SR Attendance** menu item, a pop-up window will display with a count of those new enrollments and a link to the Manage SR Enrollment queue.



See the Pending Family Acceptance Status section in this user guide for more information.

The search feature may be used to search for any criteria included in the roster (i.e. a name, DOB, age, billing group, or status). The summary feature shows the current/saved attendance information for all children in one view.

To record attendance, click on a child’s name to view their attendance for the month.

The screenshot displays the 'Attendance Calendar' interface. On the left is a roster table with columns for Child Name, DOB, Age, Billing Group, and Status. The main area shows a calendar for August 2018 with days marked as 'X' (Enrolled/Present) or 'FT' (Full Time). A legend in the bottom left explains the codes: X for Enrolled/Present, A for Absent, NS for Non-Reimbursable/Non-Scheduled Days, H for Paid Holiday Days, T for Terminated/Enrollment Ended, \* for Closed, and a blue box for Attendance has not started. On the right, a 'Child's Current Information' box for Daphne Latham shows her DOB (3/3/2018), Age (1), Copay (\$1.25), BGrp (BG8), and Status (Enrolled). Below this is a 'Monthly Attendance Summary' for August 2018, showing an Anticipated Start Date of 7/1/2018, 0 Days Absent, 23 Days Present, 0 Reimbursed Holidays, and 0 Non-Reimbursable Days. At the bottom right are buttons for Save, Save & Exit, Cancel, and Submit to Coalition.

- Days the site is closed are marked with an asterisk “\*”
- Days the child is not scheduled to attend are marked with “NS”. If the entire month for a child is marked “NS”, contact the local early learning coalition to correct the care days.
- Days the child is scheduled to attend are marked with an “X” for present along with his/her scheduled unit of care
- Paid holidays where a child is also scheduled to attend are marked with an “H”
- A legend is provided in the bottom right for more code descriptions

**NOTE:** The “Child’s Current Information” displayed on the right is current as of today. When working prior months, the information displayed may not align. For example, if a child’s enrollment was terminated in February 2019, the current enrollment status is *Enrollment Ended*. Each month (prior to February) will also display *Enrollment Ended* in the “Child’s Current Information” area because it is the current enrollment status. This does not impact the ability to record attendance for those prior months. Enhancements are planned to address the display.

To change a present day to absent, click on the “X.” A pop-up message appears to collect more information.

- Select an absent reason from the dropdown.
- Include a message to the coalition regarding the absence in the Note area. *(optional for most reasons)*
- Attach a file for supporting documentation by clicking **Choose File**. *(optional)*
- Click **Save** when done and the pop-up message will close.
- The “X” for present will now appear as an “A” for absent.

- f. Consecutive absences can be entered by using a date range. A document can be attached to the absence range and the document will be associated to every day entered in the date span.
- g. Absences entered by mistake can be changed back to present by clicking on the “A.” The below pop-up message appears. To undo the absence, click the **Remove Absence** button. That day will show an “X”, the absence reason is removed, and the attachment is removed.

Absence From: 10/08/2021      Absence To: 10/08/2021

**Enzo Celestino**

Reason: Military Deployment

Note:   
 Max length allowed is 500 characters: 500 remaining.

Attach your document:   
 PayStub2.docx      Remove

Remove Absence      Save      Cancel

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

**Attendance Calendar**

**October 2021**

Sun	Mon	Tue	Wed	Thu	Fri	Sat
26	27	28	29	30	31	1
					X FT	*
* 3	X FT	A	A	A	X FT	* 9
* 10	X FT	X FT	X FT	X FT	X FT	* 16
* 17	X FT	X FT	X FT	X FT	X FT	* 23
* 24	X FT					* 30
* 31						* 6

**Child's Current Information**

Name: ██████████  
 DOB: 3/9/2018      Age: 3  
 Copay: \$2.15      BGrp: BG8  
 Status: Enrolled

**Monthly Attendance Summary**

Anticipated Start Date: 8/5/2021

**Absences**

10/05/2021    10/07/2021  
 10/06/2021

Days Absent: 3  
 Days Present: 14  
 Reimbursed Holidays: 0  
 Non-Reimbursable Days: 0  
 RWA: No  
 Schedule Note: N/A

**Note:**

- X** - Enrolled/Present – **Allows Date Span Absence**
- A** - Absent – **Allows Date Span Absence**
- CR** - Reimbursable Temporary Closure Day - Partial – **Allows Date Span Absence**
- CN** - Non-Reimbursable Temporary Closure Day – Partial – **Allows Date Span Absence**
- N** - Non-Reimbursable Day – **Does Not Allow Date Span Absence**
- NS** - Non-Scheduled Day – **Does Not Allow Date Span Absence**
- H** - Paid Holiday – **Does Not Allow Date Span Absence**
- T** - Terminated/Enrollment Ended – **Do Not Allow Date Span Absence**
- \*** - Closed – **Does Not Allow Date Span Absence**
- CR** - Reimbursable Temporary Closure Day - Whole Site – **Does Not Allow Date Span Absence**
- CN** - Non-Reimbursable Temporary Closure Day - Whole Site – **Does Not Allow Date Span Absence**
- Attendance has not started** – **Does Not Allow Date Span Absence**



While not required, it is recommended to click **Save** (below the calendar) before moving on to another child. When all child absences are marked for the month, click **Save** and then click the **Submit to Coalition** button. A window may appear if the attendance is being submitted early or late, or if no absences have been recorded. To continue to the *Sign & Certify* page, click **Continue**.

The *Sign and Certify* page summarizes the information for each child and an electronic signature is required.

## Submitted Attendance

Upon submission, the screen returns to the SR Attendance Roster view with the current service period displayed. Select the submitted service period from the drop down. The submitted roster now has a submitted message and each child shows "SUB" for submitted in the status column. This status will change as the child attendance is processed by the coalition.

SR Attendance Roster

Program Type\*: SR

Service Period\*: 8/1/2018 to 8/31/2018

Coalition\*: ELC of the Big Bend Regic

Search:

School Readiness (SR)

Due Date: 9/6/2018

[Summary](#)

✓ Roster was submitted to ELC of the Big Bend Region on 3/9/2019 by alatham77+testcenters@gmail.com.

Care Level: INF, TOD, 2YR, PR3, PR4

Hours Of Operation: M-F 6:00am-6:30pm

SR/Local Funding Students: 6

Paid Holidays

1 to 6 of 6 enrolled

Child Name	DOB	Age	Billing Group	Status
1. Daphne Latham	3/3/2018	1y	BG8	⊗ SUB
2. Fred Latham	3/3/2018	1y	BG8	⊗ SUB
3. Scooby-Doo Latham	7/7/2015	3y	CCEP	⊗ SUB
4. Scrappy-Doo Latham	8/8/2017	1y	CCEP	⊗ SUB
5. Shaggy Latham	11/11/2014	4y	BG3	⊗ SUB
6. Velma Latham	5/5/2016	2y	33-ALF	⊗ SUB

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

Attendance Calendar

### August 2018

Sun	Mon	Tue	Wed	Thu	Fri	Sat
29	30	31	1	2	3	4

Select a child from enrollees to edit attendance

## Rejected Attendance

Coalition staff may reject submitted attendance. In this case, the individual that submitted the roster will receive an email notification. Instructions are provided to log in to the Provider Services Portal, review the roster, make necessary changes to rejected records, and re-submit. The rejected child records are displayed at the top of the roster list in red and show "REJ" for rejected in the status column. Only records with "REJ" may be edited.

SR Attendance Roster

Program Type\*: SR

Service Period\*: 8/1/2018 to 8/31/2018

Coalition\*: ELC of the Big Bend Regic

Search:

School Readiness (SR)

Due Date: 9/6/2018

[Summary](#)

⚠ This roster has rejected attendance from ELC of the Big Bend Region. Attendance was last submitted on 3/9/2019.

Care Level: INF, TOD, 2YR, PR3, PR4

Hours Of Operation: M-F 6:00am-6:30pm

SR/Local Funding Students: 6

Paid Holidays

1 to 6 of 6 enrolled

Child Name	DOB	Age	Billing Group	Status
1. Fred Latham	3/3/2018	1y	BG8	⊗ REJ
2. Daphne Latham	3/3/2018	1y	BG8	✓ APP
3. Scooby-Doo Latham	7/7/2015	3y	CCEP	✓ APP
4. Scrappy-Doo Latham	8/8/2017	1y	CCEP	✓ APP
5. Shaggy Latham	11/11/2014	4y	BG3	✓ APP
6. Velma Latham	5/5/2016	2y	33-ALF	✓ APP

Indicate the child's attendance below. Supporting documentation may be uploaded to the Document Management Library as needed.

Attendance Calendar

### August 2018

Sun	Mon	Tue	Wed	Thu	Fri	Sat
29	30	31	1	2	3	4

Select a child from enrollees to edit attendance

To edit, click the name of a rejected record. Any absences previously recorded appear. Make changes as needed. After the last record is corrected, click **Save**. Then, click the **Submit to Coalition** button and continue to the *Sign & Certify* page. This time, the *Sign & Certify* page only shows the rejected records that are being re-submitted to the coalition. Complete the Authorized Electronic Signature portion and click **Submit**.

**Attendance - Sign and Certify**

<b>Funder Type</b> SR	<b>Service Period</b> 8/1/2018 to 8/31/2018	<b>Due Date</b> 9/6/2018	<b>Coalition</b> ELC of the Big Bend Region
<b>Provider ID</b> 9504	<b>Site</b> Florida ChildCare Center A	<b>Site Address</b> 6753 BRADFORDVILLE RD TALLAHASSEE, FL 32309	<b>County</b> Leon

Child Name	DOB	Age	Billing Group	Wed 8/1	Thu 8/2	Fri 8/3	Sat 8/4	Sun 8/5	Mon 8/6	Tue 8/7	Wed 8/8	Thu 8/9	Fri 8/10	Sat 8/11	Sun 8/12	Mon 8/13	Tue 8/14	Wed 8/15	Thu 8/16	Fri 8/17	Sat 8/18	Sun 8/19	Mon 8/20	Tue 8/21	Wed 8/22	Thu 8/23	Fri 8/24	Sat 8/25	Sun 8/26	Mon 8/27	Tue 8/28	Wed 8/29	Thu 8/30	Fri 8/31	A	X	H	N	
1. Fred Latham	3/3/2018	1y	BG8	X	X	X	*	*	X	X	A	A	X	*	*	X	X	X	X	X	*	*	X	X	X	X	X	*	*	X	X	X	X	X	X	2	21	0	0

**X:** Enrolled/Present   
**A:** Absent   
**N:** Non-Reimbursable Days   
**NS:** Non-Scheduled Days   
**H:** Paid Holiday Days   
**T:** Terminated/Enrollment Ended   
\* Closed

By signing this form I certify that:

- I have examined this SR monthly attendance for payment reimbursement and, to the best of my knowledge and belief, the information provided is true and correct.
- I understand sign in/out sheets must be maintained for monitoring purposes and may be uploaded to the Document Library.

**Authorized Electronic Signature**

**Full Name:**

**Certify by electronic signature**

**Submission Date** 3/9/2019

**Submit**

Upon submission, the rejected "REJ" records appear on the roster as submitted "SUB."

## Approved Attendance

Coalition staff will continue to work submitted attendance until the records are approved for payment. Approved records appear on the attendance roster as "APP" for approved in the status column.

**SR Attendance Roster**

Program Type\*: SR  
 Service Period\*: 8/1/2018 to 8/31/2018  
 Coalition\*: ELC of the Big Bend Regic

School Readiness (SR)  
 Due Date: 9/6/2018

**Warning:** This roster has rejected attendance from ELC of the Big Bend Region. Attendance was last submitted on 3/9/2019.

Care Level: INF, TOD, 2YR, PR3, PR4  
 Hours Of Operation: M-F 6:00am-6:30pm  
 SR/Local Funding Students: 6  
 Paid Holidays:

Search:

1 to 6 of 6 enrolled

Child Name	DOB	Age	Billing Group	Status
1. Fred Latham	3/3/2018	1y	BG8	REJ
2. Daphne Latham	3/3/2018	1y	BG8	APP
3. Scooby-Doo Latham	7/7/2015	3y	CCEP	APP
4. Scrappy-Doo Latham	8/8/2017	1y	CCEP	APP
5. Shaggy Latham	11/11/2014	4y	BG3	APP
6. Velma Latham	5/5/2016	2y	33-ALF	APP

Attendance Calendar: August 2018

Select a child from enrollees to edit attendance

When records are paid by the coalition, the reimbursement details are posted on the Provider Portal under **Attendance > Reimbursement Details**.

Enrollments | **Attendance** | Documents

- Manage VPK Attendance
- Manage SR Attendance
- Reimbursement Details
- SR Reimbursement Rates
- Temporary Closures

Providers can run a Payment Period or Service Period Reimbursement Report.

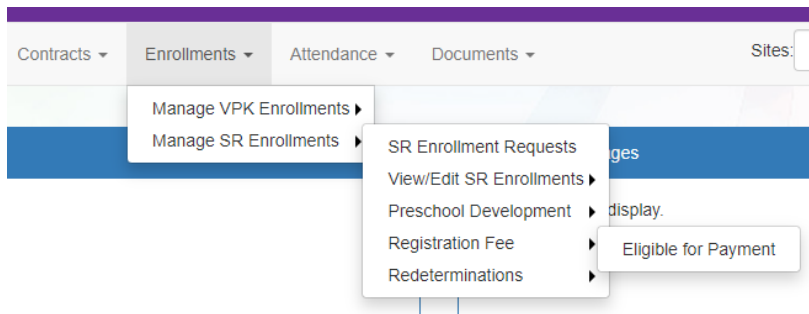
**Final Reimbursement Report**

Report Name	Action
Payment Period Report	Run Report
Service Period Report	Run Report

**NOTE:** These reports have been enhanced to include children who are dismissed to get the registration fee. A dismissed child will show as \$0.00 in the reports.

## Request for Registration Fee Payment

Registration Fee Payments can only be requested by a provider. To request a Registration Fee, navigate to **Enrollments > Manage SR Enrollments > Registration Fees > Eligible for Payment**



Eligibility Rules for Registration Fee payments:

- Children are/were enrolled during the 2020-2021 program year.
- Children have not been paid more than 2 times in 5 years (or three with a hardship). Payments from 2019-2020 are excluded.
- Children with the BG1-ESS billing group and eligibility code are not eligible.
- Children “dismissed” by the provider for payment for the program year are not eligible.
- Children enrolled 3 months or less with expulsion reasons (Safety of Other Children or Behavior Problems) are not eligible.

The Registration Fee Payments screen lists children who are eligible for Registration Fee payments. To request a payment, check the checkboxes and click **Request Payment** button.

The screenshot displays the 'Registration Fee Payments' interface for Program Year 2020 - 2021 and Payment Period March 2021. It includes a list of criteria for eligibility and a table of children with checkboxes for selection. The 'Request Payment' button is highlighted with a red box.

Program Year: 2020 - 2021      Payment Period: March 2021

The children below are eligible for registration fee payments based on the following criteria:

- The Provider has an online SR-20 contract/amendment with a registration fee greater than \$0.00 for the current program year.
- The child is in the SR Program.
- The child has not had more than two registration fee payments in the last 5 years (or three with a hardship).
- The provider may only receive one registration fee payment per eligible child per program year.

Showing 10 of 40 entries.      Clear All Filters      Search: [ ]

<input type="checkbox"/>	Child ID	Child Name	Child Date of Birth	Household ID	Parent Name	Assessed Fee
<input type="checkbox"/>	Filter	Filter	Filter	Filter	Filter	\$75.00
<input type="checkbox"/>						\$75.00
<input type="checkbox"/>						\$75.00
<input type="checkbox"/>						\$75.00
<input type="checkbox"/>						\$75.00
<input type="checkbox"/>						\$75.00
<input type="checkbox"/>						\$75.00
<input type="checkbox"/>						\$75.00
<input type="checkbox"/>						\$75.00
<input type="checkbox"/>						\$75.00

Total selected fees: \$0.00

Showing 1 to 10 of 40 entries.      Previous 1 2 3 4 Next

**Request Payment**      Dismiss Children

On the Request Payment pop-up, check the **I certify** checkbox and click **OK**. The record will be available for the coalition to Approve, Reject, or mark Ineligible.

The children below are eligible for registration fee payments based on the following criteria:

- The Provider has an online SR-20 contract/amendment with a registration program year.
- The child is in the SR Program.
- The child has not had more than two registration fee payments in the last 5

Do you want to request payment for these children?

I certify that [redacted] has not received these payments from the corresponding families for this program year.

OK Cancel

Child ID	Child Name	Child Date of Birth	Household ID	Parent Name	Assessed Fee
<input checked="" type="checkbox"/> 3877396	mar		1254533		\$75.00
<input type="checkbox"/> 2732500			216519		\$75.00
<input type="checkbox"/> 1267337			351679		\$75.00
<input type="checkbox"/> 2573444			847730		\$75.00

## Dismiss Children

If the provider has collected the registration fee from the family, the child is not eligible for a registration fee payment. To dismiss children from the list of registration fee payments, check the checkbox and click **Dismiss Children** button. Hovering over the **Dismiss Children** button will display the following message: "Remove all selected children from this list and indicate that payment is not expected from the coalition."

Program Year: 2020 - 2021 Payment Period: January 2021

The children below are eligible for registration fee payments based on the following criteria:

- The Provider has an online SR-20 contract/amendment with a registration fee greater than \$0.00 for the current program year.
- The child is in the SR Program.
- The child has not had more than two registration fee payments in the last 5 years (or three with a hardship).

Showing 1 to 4 of 4 entries. (filtered from 33 total entries) 1 row selected

Child ID	Child Name	Child Date of Birth	Household ID	Parent Name	Assessed Fee
<input checked="" type="checkbox"/> [redacted]	mar				\$75.00
<input type="checkbox"/> [redacted]					\$75.00
<input type="checkbox"/> [redacted]					\$75.00
<input type="checkbox"/> [redacted]					\$75.00

Total selected fees: \$75.00

Request Payment **Dismiss Children**

The Dismiss Children pop-up window opens. Click the **OK** button to confirm dismissing the child(ren) from the list of registration fee payments. The Provider won't be able to resubmit these children for registration fee payment.

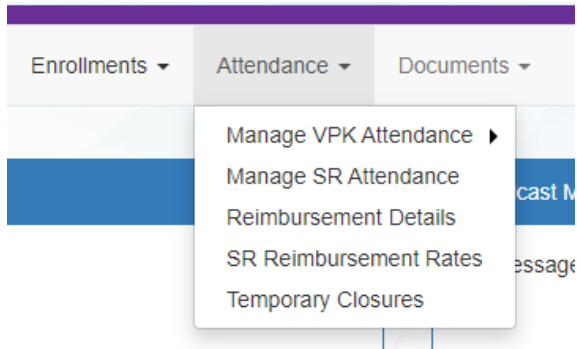
The screenshot shows a web application interface for 'Registration Fee Payments'. A modal window titled 'Dismiss Children' is open, asking for confirmation to dismiss one child from receiving a payment for the current program year (January 2021). The modal contains the text: 'You have selected 1 children. Do you want dismiss these children from receiving a payment from the coalition for the current program year?' and two buttons: 'OK' (highlighted with a red box) and 'Cancel'.

The background interface includes a table with the following columns: Child ID, Child Name, Child Date of Birth, Household ID, Parent Name, and Assessed Fee. The table shows 4 entries, with the first entry selected. The total selected fees are \$75.00. The interface also features a search bar, a 'Clear All Filters' button, and pagination controls (Previous, 1, Next). At the bottom right, there are buttons for 'Request Payment' and 'Dismiss Children'.

Child ID	Child Name	Child Date of Birth	Household ID	Parent Name	Assessed Fee
<input checked="" type="checkbox"/>	mar				\$75.00
<input type="checkbox"/>					\$75.00
<input type="checkbox"/>					\$75.00
<input type="checkbox"/>					\$75.00

## SR Reimbursement Rate Plan

Providers can view their reimbursement rate plans in the Provider Portal. Navigate to **Attendance > SR Reimbursement Rates**.



The Coalition dropdown shows all the coalitions the provider has a contract with. The Rate Plan Period dropdown displays all the rate plans available based on the selected coalition. Clicking the **Reimbursement Rates** button will navigate to the SR Reimbursement Rates screen.

### SR Reimbursement Rates

**Coalition:**

**Rate Plan Period:**

[Reimbursement Rates](#)



After clicking **Reimbursement Rates**, the SR Reimbursement Rates show for the selected coalition and rate plan period. The rates show the rates and differentials used to calculate reimbursement for the provider as shown in Exhibit 5 of the contract. The provider can view the rates for different units of care by selecting an option from the Unit of Care dropdown menu. Clicking the **View Provider Rates** button will navigate to the Provider's Private Pay Rates.

SR Reimbursement Rates - 16 - -

Unit of Care: Full-Time Daily Rates Rates in effect on: 7/1/2022

[View Provider Rates](#) [View Differential Rates](#) [Sample VPK Wrap Calculation](#)

\* Special needs rate will be negotiated up to twenty (20) percent above the maximum approved base reimbursement rate established for infant care by the coalition pursuant to Rule 6M-4.500, F.A.C. The negotiated rate will be based on the level of care needed for an individual child.

\* The rates below show the rates and differentials used to calculate reimbursement for this provider, as shown in Exhibit 5 of the contract.

Care Code	Description	A Provider's Private Pay Rates	B Coalition Maximum Reimbursement Rates	C Approved Provider Reimbursement Rate without Gold Seal	D Gold Seal Differential (Column B x percentage)	E Approved Provider Reimbursement Rate with Gold Seal (Column C + D)	F Provider's Private Pay Rates Upper Limit (Column A + 20%)	G QPI Differential Rate (Column C x tier percentage)	H Local QI Level Differential Rate (Column C x tier percentage)	I Total Payment Rate (Column E + G + H)	J Contracted Slots Differential Rate (per child flagged for contracted slots)	K Child Assessment Differential Rate (Column C x tier percentage)
INF	<12 Months	\$0.00	\$50.00	\$0.00	\$0.00	\$0.00	-	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOD	12 <24 Months	\$0.00	\$40.24	\$0.00	\$0.00	\$0.00	-	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2YR	24 <36 Months	\$45.00	\$37.45	\$37.45	\$7.49	\$44.94	-	\$3.75	\$0.00	\$48.69	\$4.00	\$1.87
PR3	36 <48 Months	\$40.00	\$30.00	\$30.00	\$6.00	\$36.00	-	\$3.00	\$0.00	\$39.00	\$4.00	\$1.50
PR4	48 <60 Months	\$40.00	\$28.55	\$28.55	\$5.71	\$34.26	-	\$2.86	\$0.00	\$37.12	\$4.00	\$1.43
PR5	60 <72 Months	\$40.00	\$27.00	\$27.00	\$5.40	\$32.40	-	\$2.70	\$0.00	\$35.10	\$4.00	\$1.35
SCH	In School	\$39.00	\$19.86	\$19.86	\$3.97	\$23.83	-	\$1.99	\$0.00	\$25.82	-	-

[Back](#)

The rates are read-only. The rates in the Provider's Pay Rates screen are the rates that display in Column A of the SR Reimbursement Rates screen. Clicking the **Back** button will navigate to the SR Reimbursement Rates screen.

Provider's Private Pay Rates ACADEMY, INC.

Care Code	Description	FT	PT	PTL
INF	<12 Months	\$ 0.00	\$ 0.00	\$
TOD	12 <24 Months	\$ 0.00	\$ 0.00	\$
2YR	24 <36 Months	\$ 45.00	\$ 37.49	\$
PR3	36 <48 Months	\$ 40.00	\$ 33.00	\$
PR4	48 <60 Months	\$ 40.00	\$ 33.00	\$ 0.00
PR5	60 <72 Months	\$ 40.00	\$ 33.00	\$ 0.00
SCH	In School	\$ 39.00	\$ 15.00	\$ 12.50

[Back](#)

From the SR Reimbursement Rates screen, clicking the **View Differential Rates** button will navigate to the Provider's Differential Rates screen. Clicking the **Back** button will navigate to the SR Reimbursement Rates screen.

SR Reimbursement Rates - 16 --

Unit of Care: Full-Time Daily Rates Rates in effect on: 7/1/2022

View Provider Rates View Differential Rates Sample VPK Wrap Calculation

\* Special needs rate will be negotiated up to twenty (20) percent above the maximum approved base reimbursement rate established for infant care by the coalition pursuant to Rule 6M-4.500, F.A.C. The negotiated rate will be based on the level of care needed for an individual child.  
 \* The rates below show the rates and differentials used to calculate reimbursement for this provider, as shown in Exhibit 5 of the contract.

Care Code	Description	A Provider's Private Pay Rates	B Coalition Maximum Reimbursement Rates	C Approved Provider Reimbursement Rate without Gold Seal	D Gold Seal Differential (Column B x percentage)	E Approved Provider Reimbursement Rate with Gold Seal (Column C + D)	F Provider's Private Pay Rates Upper Limit (Column A + 20%)	G QPI Differential Rate (Column C x tier percentage)	H Local QI Level Differential Rate (Column C x tier percentage)	I Total Payment Rate (Column E + G + H)	J Contracted Slots Differential Rate (per child flagged for contracted slots)	K Child Assessment Differential Rate (Column C x tier percentage)
INF	<12 Months	\$0.00	\$50.00	\$0.00	\$0.00	\$0.00	-	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOD	12 <24 Months	\$0.00	\$40.24	\$0.00	\$0.00	\$0.00	-	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
2YR	24 <36 Months	\$45.00	\$37.45	\$37.45	\$7.49	\$44.94	-	\$3.75	\$0.00	\$48.69	\$4.00	\$1.87
PR3	36 <48 Months	\$40.00	\$30.00	\$30.00	\$6.00	\$36.00	-	\$3.00	\$0.00	\$39.00	\$4.00	\$1.50
PR4	48 <60 Months	\$40.00	\$28.55	\$28.55	\$5.71	\$34.26	-	\$2.86	\$0.00	\$37.12	\$4.00	\$1.43
PR5	60 <72 Months	\$40.00	\$27.00	\$27.00	\$5.40	\$32.40	-	\$2.70	\$0.00	\$35.10	\$4.00	\$1.35
SCH	In School	\$39.00	\$19.86	\$19.86	\$3.97	\$23.83	-	\$1.99	\$0.00	\$25.82	-	-

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From the SR Reimbursement Rates screen, clicking the **Sample VPK Wrap Calculation** link opens a pop-up with a sample calculation. Clicking the **Back** button will navigate to the SR Reimbursement Rates screen.

SR Reimbursement Rates - 16340 --

Unit of Care: Full-Time Daily Rates Rates in effect on: 1/1/2021

View Provider Rates View Differential Rates Sample VPK Wrap Calculation

\* Reimbursement rate is reduced because the amount exceeds the provider's private pay rate upper limit set in Column F.  
 \* The rates below show the rates and differentials used to calculate reimbursement for this provider, as shown in Exhibit 5 of the contract.

Care Code	Description	A Provider's Private Pay Rates	B Coalition Maximum Reimbursement Rates	C Approved Provider Reimbursement Rate without Gold Seal (Column A or B, whichever is lower)	D Gold Seal Differential (Column C x percentage)	E Approved Provider Reimbursement Rate with Gold Seal (Column C + D; amount cannot exceed column F)	F Provider's Private Pay Rates Upper Limit (Column A + 20%)	G QPI Differential Rate (Column C x tier percentage)	H Local QI Level Differential Rate (Column C x tier percentage)	I Total Payment Rate (Column E + G + H; cannot exceed column F)	J Contracted Slots Differential Rate (per child flagged for contracted slots)	K Child Assessment Differential Rate (Column C x tier percentage)
INF	<12 Months	\$0.00	\$40.42	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
TOD	12 <24 Months	\$38.00	\$32.30	\$32.30	\$5.81	\$38.11	\$45.60	\$1.29	\$0.00	\$39.40	\$0.00	\$1.62
2YR	24 <36 Months	\$38.00	\$31.41	\$31.41	\$5.65	\$37.06	\$45.60	\$1.26	\$0.00	\$38.32	\$0.00	\$1.57
PR3	36 <48 Months	\$38.00	\$27.00	\$27.00	\$4.86	\$31.86	\$45.60	\$1.08	\$0.00	\$32.94	\$0.00	\$1.35
PR4	48 <60 Months	\$38.00	\$27.00	\$27.00	\$4.86	\$31.86	\$45.60	\$1.08	\$0.00	\$32.94	\$0.00	\$1.35
PR5	60 <72 Months	\$38.00	\$27.00	\$27.00	\$4.86	\$31.86	\$45.60	\$1.08	\$0.00	\$32.94	\$0.00	\$1.35
SCH	In School	\$35.00	\$17.90	\$17.90	\$3.22	\$21.12	\$42.00	\$0.72	\$0.00	\$21.84	\$0.00	\$0.00
SPCR	Special Needs	\$38.00	\$40.42	\$38.00	\$6.84	\$44.84	\$45.60	*\$0.76	\$0.00	*\$45.60	\$0.00	*\$0.00

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## Sample VPK Wrap Calculation

This is an example of a VPK wrap calculation for a child enrolled in both SR and VPK. The VPK class is 3 hours long and the child has full time care.

NOTE: The calculations are to 4 decimal places until the Gross Payment Amount, where it is rounded.

### How are wrap rates calculated?

1. Provider Contract Approved Rate
2. Hourly Rate = Daily Rate/Max SR Hours *[calculated to 4 decimal places]*
3. Payable Hours = Max SR Hours - VPK Hours
4. SR Daily Rate = Payable Hours \* Hourly Rate *[calculated to 4 decimal places]*
5. Gross Payment Amount = SR Daily Rate \* Total Days Paid *[calculated to 4 decimal places]*

### Example:

1. Provider Contract Approved Rate (PR4): \$24.50
2. Hourly Rate:  $\$24.50/11 = \$2.2273$
3. Payable Hours:  $11-3 = 8$
4. SR Daily Rate:  $8 * \$2.2273 = \$17.8184$
5. Gross Payment Amount:  $\$17.8184 * 20 = \$356.3680$

For this record on the 5045, the provider is reimbursed for \$356.37.

Close