**Step 1:** Log into the Statewide Provider Portal

![Log in to the Statewide Provider Portal](image)

**Step 2:** If you are prepared to complete the Child Care Stabilization Grant, click the Proceed to Grant Application. Note: The deadline to submit the grant application is June 30, 2022.

![ARPA Grant Opportunity](image)
Step 3. Read the Instructions:

- CLICK on the LINK to learn more about the spending requirements of the ARPA Grant. [http://www.floridaeearlylearning.com/parents/family-resources/find-quality-child-care/locate-your-early-learning-coalition](http://www.floridaeearlylearning.com/parents/family-resources/find-quality-child-care/locate-your-early-learning-coalition)
- Please contact your local early learning coalition for assistance. Click on the link to get the contact information for your local ELC: [http://www.floridaeearlylearning.com/parents/family-resources/find-quality-child-care/locate-your-early-learning-coalition](http://www.floridaeearlylearning.com/parents/family-resources/find-quality-child-care/locate-your-early-learning-coalition)
- The application may be saved at any time by pressing the Save for Later button at the bottom of the application.
- The Save for Later button will return you to the Provider Dashboard where you can access the application at a future time by clicking the ARPA Stabilization Subgrant Application link located under Surveys/Grant Applications on the left of the Provider Dashboard.
- All fields are required to be completed in order for the Submit button to appear.
- All applications must be submitted no later than June 30, 2022.
  - **IMPORTANT NOTE:** Once the application is submitted, reviewed and approved it cannot be edited. Providers are encouraged to review the Subgrant award allocations to determine the point in which the application submission date will maximize the funding opportunity.
Step 4: Complete Section 1: General Applicant Information.

IMPORTANT NOTE: The pre-filled information for Section 1 is pre-populated from the most recently submitted/approved Provider Profile. If any of the information is incorrect in the Child Care Stabilization Grant the provider will be required to update the Provider Profile before the grant can be approved for funding.

Check your School Readiness Contract for your most recent CLASS Composite Score. If you are unsure or cannot find it, contact the Coalition.
The license or exemption number listed on the physical address license or exemption letter.

Licensed Family Child Care Homes (FCCH) and Large Family Child Care Homes. Does not include Registered Family Child Care Homes.

Registered Family Day Care Homes meeting the CCDF health and safety requirements.

Provider ID for current School Readiness, VPK contract or from Child Care Resource and Referral profile.

Provider DUNS or FEIN Number that corresponds with the EFSM Provider ID, if applicable. If number is a Social Security Number, check the box.

Licensed Child Care Centers

Licensed Family Child Care Homes

Licensed Center

Exempt Child Care Centers, including Religious and School District sites.
<table>
<thead>
<tr>
<th>Field</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Address</td>
<td>Location where child care services are actually delivered, not a location that is solely for administrative purposes.</td>
</tr>
<tr>
<td>Mailing Address</td>
<td>Location where administrative services occur, e.g., where bills are sent, if different from physical location.</td>
</tr>
<tr>
<td>Operator/Director Name</td>
<td>If owner is a corporation or partnership, use the name of the on-site director.</td>
</tr>
<tr>
<td>Operator/Director Phone Number</td>
<td>If owner is a corporation or partnership, use the phone number of the on-site director.</td>
</tr>
<tr>
<td>Operator/Director Contact Email</td>
<td>If owner is a corporation or partnership, use the current email of the on-site director.</td>
</tr>
<tr>
<td>Operator/Director Race</td>
<td>If owner is a corporation or partnership, use the race of the on-site director.</td>
</tr>
<tr>
<td>Operator/Director Ethnicity</td>
<td>If owner is a corporation or partnership, use the ethnicity of the on-site director.</td>
</tr>
<tr>
<td>Operator/Director Gender</td>
<td>If owner is a corporation or partnership, use the gender of the on-site director.</td>
</tr>
</tbody>
</table>
Check if physical location has Gold Seal accreditation at time of application.

For School Readiness (SR) Providers ONLY - enter most recent CLASS composite score. Provider not contracted for SR should select NONE.

Check the days of the week the physical location provides child care services. Enter the hours of operation for all days checked.
**Step 5: Complete Section 2: Operational Status.**

Please select ALL that APPLY

<table>
<thead>
<tr>
<th>Please select ALL that APPLY</th>
</tr>
</thead>
<tbody>
<tr>
<td>Child Care Center</td>
</tr>
<tr>
<td>School Readiness</td>
</tr>
<tr>
<td>Early Head Start</td>
</tr>
<tr>
<td>Title I</td>
</tr>
<tr>
<td>CORRESPONDING Care Access REG Is Part of School</td>
</tr>
<tr>
<td>Summer Camp ONLY</td>
</tr>
<tr>
<td>Family Child Care Home (large)</td>
</tr>
<tr>
<td>Other</td>
</tr>
<tr>
<td>Volunteer/Parent (VPP)</td>
</tr>
<tr>
<td>Head Start</td>
</tr>
<tr>
<td>Migrant Head Start</td>
</tr>
<tr>
<td>IDEA-Individually Designed Education Act</td>
</tr>
<tr>
<td>School Age (Syllabus or other school, summer camp)</td>
</tr>
<tr>
<td>Faith-Based</td>
</tr>
<tr>
<td>Family Child Care Group Home</td>
</tr>
</tbody>
</table>

Was your program licensed/registered with your current license number/exception approval on or before March 15, 2022? *

- Yes
- No

Does your program meet Child Care and Development Fund (CCDF) health and safety requirements, including the completion of comprehensive background check? *

- Yes
- No

What is the current status of your program? *

- Open
- Temporarily closed due to public health, financial hardship, or other reasons related to the COVID-19 pandemic*

Please provide details about the temporary closure and planned reopening date:

- Permanently closed

Have you completed a current fiscal year Child Care Resource and Referral (CCR&R) profile in the Florida Early Learning Assessment Services (FELAS)? *

- Yes
- No

Have you made a contract with an early learning provider terminated for cause within the past twelve months? *

- Yes
- No

Are you under investigation or been convicted of a crime that is not a theft or a fraud? *

- Yes
- No

Have you submitted any initial annual forms for payment to the ELC? *

- Yes, data previously submitted
- No
### Check Yes if program meets the CCDF health and safety requirements

Select the appropriate option based on whether your program meets the CCDF health and safety requirements including the completion of comprehensive background checks.

| Yes | No |
---|---|

### What is the current status of your program?

Select the appropriate option based on the current status of your program.

- [ ] Open
- [ ] Temporarily closed due to public health, financial hardship, or other reasons related to the Coronavirus Disease 2019 (COVID-19) public health emergency. Please provide details about the temporary closure and planned reopening date:

### Have you completed a current fiscal year Child Care Resource and Referral (CCR&R) profile in the Florida Early Learning Provider Services Portal?

Select the appropriate option based on whether you have completed a current fiscal year profile.

| Yes | No |
---|---|

### Have you had a contract with an early learning coalition terminated for cause within the past five years?

Select the appropriate option based on whether you have had a contract terminated.

| Yes | No |
---|---|

### Are you under investigation or been convicted of child care fraud?

Select the appropriate option based on whether you are under investigation or been convicted of child care fraud.

| Yes | No |
---|---|

### Have you submitted W-9 and direct deposit forms for payment to the ELC?

Select the appropriate option based on whether you have submitted W-9 and direct deposit forms for payment.

| Yes: Date previously submitted: | No |
---|---|

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**Note:**

- Permanently closed programs are not eligible for the ARPA grant.

- Profiles can be created/completed here - Florida Early Learning Provider Services Portal.


- Navigate to the Document Library, W-9 Folder to get the date of the most recently uploaded W-9.
### Step 6: Complete Section 3: Child Count Information

**Enter the licensed or identified capacity for the physical location for each age group.**

*This information is pulled from the Provider Profile. If this information is incorrect, STOP and go correct the Provider Profile.*

All values must be entered. If none, enter 0.

<table>
<thead>
<tr>
<th>What is the licensed or identified capacity of your program by age group?</th>
<th>Total Current Children</th>
</tr>
</thead>
<tbody>
<tr>
<td>Instant (up to 12 months); Toddler (12 months to 2 years old)</td>
<td></td>
</tr>
<tr>
<td>Two-Year-Old; Preschool (3 years old to Kindergarten); School Age (Kindergarten and above)</td>
<td></td>
</tr>
<tr>
<td>Total</td>
<td></td>
</tr>
</tbody>
</table>

**Enter the total number of children enrolled per age group on date of application for all programs. School-Age includes only those children receiving child care services. Count each child once even if enrolled in more than one program.**

**Enter the number of children, up to 24 months old, included in the total enrolled who ONLY participate in Early Head Start, Early Head Start Child Care Partnerships, or Head Start programs.**

Enter the number of children, Kindergarten and older, included in the total enrolled who participate in the School Readiness program. Children may also participate Early Head Start, Head Start, Head Start Partnership or other programs.

Enter the number of children, between 2 years old and Kindergarten Entry, included in the total enrolled who participate in the School Readiness program. Children may also participate Early Head Start, Head Start, Head Start Partnership or other programs.

**Enter the number of children, Kindergarten and older, included in the total enrolled who participate in the School Readiness program. Children may also participate Early Head Start, Head Start, Head Start Partnership or other programs.**

**Enter the number of children, between 2 years old and Kindergarten Entry, included in the total enrolled who participate in the School Readiness program. Children may also participate Early Head Start, Head Start, Head Start Partnership or other programs.**

**Enter the number of children, Kindergarten and older, included in the total enrolled who participate in the School Readiness program. Children may also participate Early Head Start, Head Start, Head Start Partnership or other programs.**

**Enter the number of children, Kindergarten and older, included in the total enrolled who participate in the School Readiness program. Children may also participate Early Head Start, Head Start, Head Start Partnership or other programs.**

Evening or night care means child care provided during the evening hours and may encompass the hours of 6:00 p.m. to 7:00 a.m. to accommodate parents who work evenings and late-night shifts.

Weekend care means child care provided anytime on Saturday or Sunday.

**Enter the number of children, Kindergarten and older, included in the total enrolled who ONLY participate in Early Head Start, Early Head Start Child Care Partnerships, or Head Start programs.**

**Enter the number of children, Kindergarten and older, included in the total enrolled who ONLY participate in Early Head Start, Early Head Start Child Care Partnerships, or Head Start programs.**

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**Enter the number of children, Kindergarten and older, included in the total enrolled who ONLY participate in Early Head Start, Early Head Start Child Care Partnerships, or Head Start programs.**
**Step: 7: Complete Section 4: Current Average Monthly Operating Expenses**

Enter the average monthly cost of each category of allowable operating expenses. May use Annual Cost divided by 12 to determine average monthly cost. For examples of each category, please refer to the ARPA Grant Spending and Documentation Guide.

<table>
<thead>
<tr>
<th>Allowable Operating Expenses</th>
<th>Average Monthly Cost</th>
</tr>
</thead>
<tbody>
<tr>
<td>Payroll</td>
<td>0.00</td>
</tr>
<tr>
<td>Benefits</td>
<td>0.00</td>
</tr>
<tr>
<td>Other Personnel Costs</td>
<td>0.00</td>
</tr>
<tr>
<td>Rent or Mortgage</td>
<td>0.00</td>
</tr>
<tr>
<td>Facility Expenses (Utilities, Insurance, Maintenance)</td>
<td>0.00</td>
</tr>
<tr>
<td>Personal Protective Equipment (PPE), including Cleaning and Sanitation Supplies and Services</td>
<td>0.00</td>
</tr>
<tr>
<td>Training Expenses for Staff on Health and Safety Practices</td>
<td>0.00</td>
</tr>
<tr>
<td>Equipment and Supplies in Response to COVID-19</td>
<td>0.00</td>
</tr>
<tr>
<td><strong>SubTotal</strong></td>
<td><strong>$0.00</strong></td>
</tr>
<tr>
<td><strong>Allowable Additional Expenses (Due to COVID-19)</strong></td>
<td><strong>Average Monthly Cost</strong></td>
</tr>
<tr>
<td>Goods and Services to Maintain or to Resume Services Child Care Services</td>
<td>0.00</td>
</tr>
<tr>
<td>Mental Health Supports for Children or Staff</td>
<td>0.00</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td><strong>$0.00</strong></td>
</tr>
</tbody>
</table>

This is NOT the amount you will receive. The purpose is to calculate average monthly expenses.

Enter the average monthly cost of each category of allowable operating expenses. May use Annual Cost divided by 12 to determine average monthly cost. These costs should be additional expenses because of the COVID-19 pandemic. For examples of each category, please refer to the ARPA Grant Spending and Documentation Guide.
Step 8: Complete Section 5: Options for Fund Use

Select YES if you intend to use a portion of the funds to reimburse the business for expenditures prior to MARCH 11, 2021.

Select NO if you do not intend to use a portion of the funds to reimburse the business for expenditures prior to MARCH 11, 2021.
Step 9: Complete Section 6: Subgrant Amounts

Select YES if provider agrees to spend 25% of TOTAL GRANT amount on staff.

USE the ARPA calculator to determine the estimated dollar amount of your grant.

https://providerservices.floridaearlylearning.com/ARPAGrantCalculator.html
**Step 10: READ Provider Certification**

To receive a stabilization subgrant:
- I agree to use the funds only for the categories and purposes stated on this application.
- I understand I can move funds between categories without prior approval.
- I understand that it is my responsibility to maintain records supporting the use of funds I receive and to document my compliance with A, B, and C below.

From the date of application submission through the duration of the subgrant period, I certify I will meet requirements, including:

A. I will implement policies in line with guidance and orders from state and local authorities and, to the greatest extent possible, with guidance from the U.S. Centers for Disease Control and Prevention (CDC) when open and providing services.

   CDC has posted several fact sheets and guides to help child care providers understand and meet the guidelines at the following:

B. I must continue paying at least the same amount of weekly wages and maintain the same benefits (e.g., health insurance and retirement) for each employee (including lead teachers, aides, and any staff employed by the child care provider to work in transportation, food preparation, or other service). Also, I will not furlough employees or reduce their work hours.

C. I will provide relief from overlapping and tuition payments for enrolled families and prioritize this relief for families struggling to make either payment, to the extent possible. NOTE: For School Readiness, providers may not waive payments, however, discount equivalent to the overlap amount are allowable if properly tracked and documented. In addition, the monthly statement provided to families indicating all payments received and any remaining balance, must include the amount, date and type of financial relief provided (e.g., discounts, differential enrollment fees, etc.).

**Terms & Conditions**

Subgrant funds CANNOT be used to support general building renovations or remodeling, or any other enhancement to a facility or grounds not specific to the operation of a child care agency. Refer to the ARPA Grant Spending and Documentation Guide for allowable costs and examples of documentation.

These terms and conditions shall remain in force from such time as the provider first accepts funding through full expenditure of funds.

Provider understands all grant funds need to be used on approved items and spent by no later than September 30, 2023.

Provider accepting funds shall ensure proper financial management controls and accounting systems, to include personnel policies and procedures, have been established to adequately administer awards.

Additional terms and/or conditions may be applied to this award if outstanding financial or programmatic compliance issues are identified.

Provider should consult with a tax advisor or attorney regarding potential tax consequences of accepting grant funding.

Provider understands it may be selected for monitoring by the Division of Early Learning (DEL), or its designee. Provider shall maintain documentation of how subgrants were used and to show they met certifications in A, B, and C above, according to instructions provided by DEL or its designee.

At the request of the DEL or its designee, the Provider shall repay any portion of subgrant funds determined not spent on an allowable expense as determined by DEL at its discretion.

By signing this application, I am further certifying I understand subgrant awards and amounts are subject to funds availability.

All fields are required. The Submit button will only display if all fields are completed. If the Submit button does not display, review the application for completeness.

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**CAUTION:** CLICKING Cancel will ERASE all of the information that has NOT been previously saved.

**NOTE:** IF the Authorized Electronic Signature and SUBMIT button is MISSING, then the application is NOT complete. Please review to determine what fields are blank or boxes remain unchecked.

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If you do not want to submit the application and complete it at a later date, CLICK Save for Later.
Step 11: Authorize Electronic Signature and Submit

To return to the submitted ARPA Child Care Stabilization Grant Application, Select “ARPA Stabilization Subgrant Application” from the Provider Dashboard.
NOTE:

- Coalition staff will **NOT** edit the application for you. If the application is incorrect, Coalition staff will **REJECT** the application so the provider can correct the application and resubmit.
- Rejecting the application will delay the processing and approval of the application.
NOTE: If an application is Returned for Edits a window will display when the provider logs back into the provider portal.

To correct any errors SELECT the Proceed to Grant Application button.

If CLOSED, the application will be available via the HOME screen.

Reason why the application was returned for edits.
Once the application is approved the status of the application will be updated and a notification pop up will appear.

If deemed Not Eligible, the application status will be shown as demonstrated below: