**Best Beginnings Mini Grant Application**

**CCR&R Agency:**

Revised March 2016

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| --- | --- | --- | --- | --- | --- |
| Name: | | PS #: | | | |
| Physical Address: | | | City: | | Zip: |
| Mailing Address | | | City: | | Zip: |
| (if different from physical address) | | | | | |
| Email Address: | | Phone Number: | | | |
| Facility Name: | Facility Type: | | | PV #: | |
|  | | | | | |
| Are you on the Practitioner Registry? Yes  Date       Level       No | | | | | |
| In order to receive this grant you must be a current member of the Early Childhood Career Development Practitioner Registry. A copy of your Practitioner Registry certificate or Professional Development Record with a current date must be  - Submitted with this application  OR  - Submitted with the contract/summary form when requesting payment. | | | | | |
|  | | | | | |
| Have you received a MINI Grant in the past? Yes  Date       No  Are you participating in the Best Beginnings STARS to Quality Program? Yes  No  If no, have you participated in the STARS to Quality Program within the last year? Yes  No  End date for STARS participation:  Amount of Request: $\_\_\_\_\_\_\_\_\_\_\_\_\_ (Maximum $2,000 for Family/Group; $3,000 for Center)  See page 2 of this form for grant description | | | | | |
|  | | | | | |
| Why are you requesting funds?  Indicate the need for your project and how you will use the funds. (use additional paper if necessary) | | | | | |

* I agree that this application is for a **one-time payment** reimbursement, and that proposed purchases and activities for this grant application will take place during the **six (6)** months **AFTER** the grant is awarded.
* I certify that neither this facility, nor any of its principals, is on the CACFP National Disqualified List; have not received 3 or more Intentional Program Violations in the Best Beginnings Scholarship Program due to fraud; and have not misused federal funds.

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Provider’s Signature: | | | Date: | |
|  | | |  | |
| **Office Use Only** | Grant is approved for $\_\_\_\_\_\_\_ |  Denied | | |
| Reason: | | | |
| CCR&R Signature: | | | Date: |

**Mini Grant Program Description**

Mini grants are administered by the local Child Care Resource & Referral office to ensure flexibility in awarding amounts consistent with the needs of providers. Generally, mini grants should be used for the purposes of:

* + New providers to become fully registered/licensed
  + Licensing compliance such as balance of funds needed for full year of insurance, egress windows, play equipment, etc.
  + Professional Development, particularly courses taken in preparation to meet STAR One requirements and to assist with year one professional development plans, etc.
  + Practitioner registry fees for caregiver not in STARS formally
  + Business equipment such as a computer to manage CACFP Claims and customer billing
  + To assist in continual quality improvement or to meet additional requirements

Mini grants are **not** to be used for programs 1) formally enrolled in STARS, or that were enrolled in STARS within the past year; 2) whose providers have been disqualified with cause from the Child and Adult Care Food Program (CACFP); or 3) if they or anyone related to the business have received three or more intentional program violations in the Best Beginnings Child Care Scholarship Program due to fraud.

It is a reasonable expectation that purchases including shipping and handling are covered as part of the awarded funds.

Mini grants are available in a single grant award for a total not to exceed

* **$2,000 for a group/family provider,**
* **$3,000 for a center provider, and**
* **Purchases paid for by the grant must occur after the effective date of the grant.**

**Providers must be in business through the end of the spending period, or will refund the State in full. A Provider is eligible to receive another Mini grant only after an existing grant period comes to an end.** CCR&R agencies have the flexibility to determine the frequency they will award and process applications. Contact your local CCR&R for additional information.