

Alexandria Childcare Workforce Stabilization Grant Program

ACT for Alexandria

Application - Overview and Requirements

Alexandria Childcare Workforce Stabilization Grant Program

COVID-19 put a spotlight on the critical role that childcare plays in supporting the city's economy, businesses, and families. As part of the Unified Early Childhood Workforce Stabilization Initiative, the City of Alexandria is partnering with ACT for Alexandria to award \$900K total in Provider Sustainability Grants.

The purpose of the sustainability grant is to provide financial support to licensed and regulated providers in the City of Alexandria that are in danger of closing or have a business in recovery as a result of the COVID-19 public health emergency. Grant awards will be based on operating status and licensed or approved capacity. A funding formula will be used to determine award amounts.

There is also an opportunity to apply for Social Emotional Wellness Grants. This funding is for family childcare homes and center based childcare classrooms to create and equip social/emotional wellness spaces for children in need of self-regulation and trauma support.

Site Name*

This is the name of your individual site or program.

Character Limit: 100

Did you apply for the Virginia Department of Education Childcare Stabilization Grant?*

*Required for consideration.

Choices

Yes

No

VDOE Childcare Stabilization Grant Program - Application Link

Please visit: (<https://www.doe.virginia.gov/cc/community/index.html?pageID=14>) TO APPLY BEFORE YOU COMPLETE THIS APPLICATION.

Upload Documents

Please attach a copy of your completed Virginia Department of Education application.*

File Size Limit: 5 MB

Please attach a copy of the notice of award.*

File Size Limit: 5 MB

Please attach a copy of your W-9.*

File Size Limit: 5 MB

Application

Point of Contact Name*

Please add the name of the point of contact/responsible party with the authority to process and receive payment information.

Character Limit: 250

Point of Contact Email*

Please add the email of the point of contact/responsible party with the authority to process and receive payment information.

Character Limit: 250

Address Line*

Character Limit: 250

Address Line 2

Character Limit: 250

City, State*

Character Limit: 250

Zip Code*

Character Limit: 250

Facility ID*

Character Limit: 250

Is your organization a family day home?*

Choices

Yes

No

Providers are permitted to spend grant funds on the following types of expenditures. Please indicate how you might spend the funds. Please note this is for informational purposes only, and your response to this question is not binding. You may choose to spend the grant funds for a different approved purpose once you receive them.

You may be contacted at the end of the grant period to learn more about how you spent the funds.

Allowable Categories*

How do you anticipate using this grant funding in these allowable categories? Check all that may apply.

Choices

Equipment and supplies

Goods and services

Mental health services

PPE, cleaning, and other health and safety practices

Rent, utility, facilities maintenance, and insurance

Social and Emotional Wellness Support*

There are additional funds available for social and emotional wellness support. Please indicate if you would like to support the following areas. Additional funding will be added to the grant award based on the interest from the providers. Check all that may apply.

Choices

My program will utilize funds for mental health consultation

My program will utilize funds for classroom supports

My staff will utilize funds for staff wellness activities

Capacity*

As of June 1, 2021, how many children are you approved to care for?

Choices

Under 75

76-150

151-250

251+

Capacity (Birth - 5 yrs)*

How many children ages birth – 5 years old are you approved to care for?

Character Limit: 250

Capacity (Total)*

At the time of application, what is the total number of children you are approved to care for?

Character Limit: 250

Capacity (Childcare subsidy)*

At the time of application, how many children are enrolled in childcare subsidy?

Character Limit: 250

Capacity (Childcare subsidy)*

At the time of application, how many children are enrolled from each zip code:

If none, please enter "0."

22206

Character Limit: 250

22301*

Character Limit: 250

22302*

Character Limit: 250

22304*

Character Limit: 250

22305*

Character Limit: 250

22311*

Character Limit: 250

22312*

Character Limit: 250

22314*

Character Limit: 250

Beneficiary shall treat grant funds as restricted assets. Beneficiary shall either maintain awarded funds in a separate bank account that is restricted to the specific charitable project for which this grant is made or through their accounting practices be able to track and account for the award and related expenditures, separate from other operational activities. All expenditures made in furtherance of the purposes of the grant shall be charged off against the grant and shall appear on beneficiary's books. Beneficiary shall keep adequate records to substantiate its expenditures of grant funds and retain those records for five years.

Beneficiary will use the funds solely for the purpose listed in this agreement and in accordance with the provisions of Section 501(c)(3) of the Internal Revenue Code of 1986 (the "Code"), which requires that grant funds be expended for charitable, scientific, literary, or educational purposes.

Beneficiary is prohibited from using grant funds to exclude participation in supported activities because of race, national origin, creed, gender, age, sexual orientation, gender identity, religion, status with respect to public assistance, or disability.

There is no pending proceeding or investigation directed at the Beneficiary by a federal, state, tribal, or local administrative agency or authority that could have a material adverse impact on the Beneficiary's ability to perform its obligations under this Agreement.

If at the end of the grant term, any grant funds have not been expended or committed in accordance with this Agreement (whether expended for a purpose not in accordance with this Agreement, or not spent at all), ACT may demand return to it of all or any portion of such funds.

AGREEMENT*

I agree that I will use the funds only for approved purposes as required by federal law. I further agree that I will submit regular program enrollment, data and expenditure reports as required by the City of Alexandria DCHS Office of Early Childhood.

By submitting this application, I certify that I will meet the following requirements from today's date until December 30, 2023:

- *When open and providing services, I will implement policies and procedures with local and state guidelines and the Centers for Disease Control and Prevention's (CDC's) operating guidelines to the extent possible.*
- *I will abide by local, state, and federal regulations and laws.*
- *For each employee (including lead teachers, aides, and any other staff who are employed by the childcare provider to work in transportation, food preparation, or other type of service), I must continue paying at least the same amount of weekly wages and maintain the same benefits (such as health insurance and retirement) for the duration of the grant, including during periods of temporary closure or quarantine. I may not furlough employees from the date of application through the end of the grant period.*
- *I will use the funds to provide tuition and copayment relief for families that are struggling to make payments to the extent possible.*
- *I will notify VDOE at childcaregrants@doe.virginia.gov and The City of Alexandria Office of Early Childhood at robin.crawley@alexandriava.gov if my program closes permanently during the grant period.*

If you have questions about what the conditions entail, please review the Frequently Asked Questions documents at childcareva.com/grants.

I also understand that it is my responsibility to maintain records and other documentation related to the use of the funds I receive under Virginia's Child Care Stabilization Grant program for at least five years following the end of the grant. I acknowledge that the Commonwealth of Virginia or the federal government may audit my facility at any time during the grant period and for up to five years

thereafter. By submitting this application and receiving a grant award, I agree to cooperate to the fullest extent possible with any such audit or investigation.

The following signature (typed name and date) affirms that I will adhere to the terms described above.

This program is being supported by the Coronavirus State and Local Fiscal Recovery Funds award number 21.027 awarded by the City of Alexandria, Virginia by the U.S. Department of the Treasury.

**Note: As long as provider is still operating, you do not need to reapply to be considered for second tranche. You will be considered for funding based on operation status.*

Signature:

Character Limit: 250

Date:*

Character Limit: 250

Terms and provisions*

By clicking this box, I acknowledge that I have read, understand, and agree to abide by the terms and provisions of the Alexandria Childcare Workforce Stabilization Grant Program. I certify that all information included in this application is accurate to the best of my knowledge or belief.

Choices

I agree to abide by these terms and provisions