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The Minnesota Quality Improvement and Registry Tool

Regional and MNTRECC Grants – Program Application Instructions

This document is intended for programs to use when applying for Regional and MNTRECC Grants in Develop. The information documents the necessary steps in Develop, start to finish, to complete and submit an application.

This document only includes steps for applying. There is a second guide to use if a program is awarded a grant.

Programs are strongly encouraged to apply for Regional and MNTRECC Grants in Develop. If they are unable to apply in Develop and need a paper application, contact a Grant Administrator.

PART 1: TIPS BEFORE GETTING STARTED

Accessing the grant application in Develop:

- Programs can only apply for a Regional or MNTRECC Grant in their Develop Organization Profile. Programs cannot access the grant application in their Individual Profile. (See Part 2, steps 1-3.)
- To apply for a Regional or MNTRECC Grant, programs need to have a Registered Organization Profile in Develop. If they have not registered their organization yet, they can <u>follow these instructions</u>. Register before the grant application period starts on September 1 to be ready to apply when the application is available.
- The application is available in Develop **September 1-25**. If programs apply with a paper application issued by a district Grant Administrator, their completed application must be received by their Grant Administrator by **September 20**.

Before applying, enter the following information into the Organization Profile to receive the maximum number of points available:

- Make sure that the Organization Profile Owner and staff, if applicable, have current Individual Memberships in Develop so that each person has their complete training history documented.
- Add or update the program's classroom(s) or group(s) on the Classrooms tab of the Organization Profile. Do not use names for program classes or groups that could identify their program to a Grant Reviewer. If they have already added their classroom(s) or group(s) to the Classrooms tab, make sure the names can't identify their program. This keeps programs anonymous to Grant Reviewers and helps to avoid potential conflicts of interest.



Have a copy of this year's grant priorities when programs beginning an application.

If possible, complete the application from start to finish. Click Save and Exit when stepping away or pausing to make sure information isn't accidentally lost.

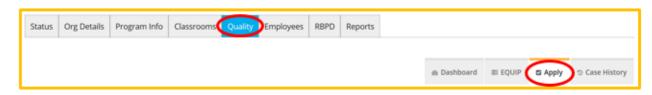
PART 2: ACCESSING THE GRANT APPLICATION

1. Log in to Develop at <u>www.developtoolmn.org</u> with the program's email address and password. Select Organization Profile from the context menu.

NOTE: Individuals will only see their Organization Profile if they have registered or been given access to it. Contact the Help Desk for support, if needed.

盦	One World One Family One Heart Fam 🔻
	Tamara Martintest
4	#123707 ① One World One Family One Hea
	Change Password
	+ Organization Profile
	🗭 Logout

2. Click the **Quality** tab, then the **Apply** sub-tab.

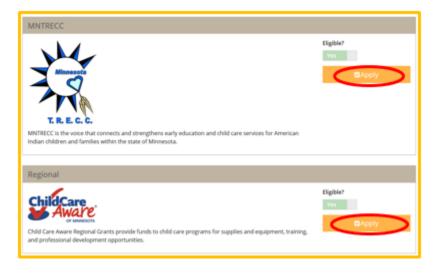


- 3. Scroll to the bottom of the page.
 - a. To apply for a MNTRECC Grant, click **Apply** next to the MNTRECC option.

Programs should choose the MNTRECC option if they:

- Are an enrolled member of a federally recognized Tribe, or
- Are a first or second generation descendent of an enrolled member, or
- Are licensed or funded by a Tribal Government, or
- 50% of children in care are of American Indian Descent

b. To apply for a Regional Grant, click **Apply** next to the Child Care Aware Regional Grant option.



The program will be taken through the pages of the grant application. Click Save and Exit to save what was entered and return at a later time, or Exit Application to leave the application without saving. Applicants should enter complete information to the best of their ability.

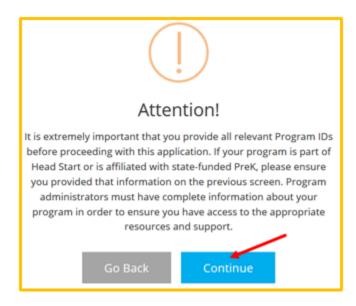
4. On the first page, update the program contact information, if needed. Click **Next** when done.

#123707 One World One Fa	mily One Heart	Family Child Care	LLC		Save and Exi	t Exit Application
Contact Info	ID Numbers	Accreditation	Enrollment	Address	Participation	Terms
Contact Inform	Email Address* ABC123@email.co First Name* ABC Phone 952	om - 555	Last Name* 123 . 1234	Ext.		Next



 On the Organization Identification page, update information about the program and the type(s) of care and education offered to children. Programs must answer Yes or No to all questions. Click Next when done.

A pop-up window will appear to confirm that all relevant identification numbers have been entered. Click **Continue** when sure that the numbers are correct. Otherwise, click **Go Back** to review the selections.



6. Enter or review the information on the Accreditation tab, if relevant. When done, click **Next**.

#123707 One World (One Family One Hear	t Family Child Care	e LLC		Save and Exit	Exit Application
Contact Inf) ID Numbers	Accreditation	Enrollment	Address	Participation	Terms
Program	Accreditation				+Accreditation	
	iation for Family Child Care ive Apr 2013 / Expires Apr 2015					2
Previous						Next

7. On the Program Enrollment page, enter or update the number of children that the program serves by age group, race, languages spoken, and high needs. Programs will be awarded points based on the age group(s) and population(s) they serve. Enter 0 if the program does not serve any children in a particular group.

Program Enrollment

Enter the number of children by age group for which you provide care. In addition enter the number of high needs children in each age group. A child should be counted as "high needs" if meets one or more of the following criteria: children from low-income families (at or below 200% poverty rate) or otherwise in need of special assistance and support: Including children with disabilities or developmental delays, who are English Language Learners, who reside on "Indian lands", who are migrant, homeless or in foster care.

Number of Classrooms / Groups Total Number of Children Enrolled	1	
Infants	2 High Needs	•
	2	1
Toddlers	2 High Needs	1
Preschoolers	3 High Needs	1
School Age	1 High Needs	1

a. Enter or update the kind of programming offered, such as part-day, full-day, part-week, full-week, evenings, and weekends. Choose all options that are offered by the program. Programs will be awarded points based on the type(s) programming they offer. When done, click **Next**.

Race of Children Enrolled				
American Indian/Alaskan Native	1	Percent	12%	
Asian/Pacific Islander	1	Percent	12%	
Black/African American	3	Percent	37%	
Hispanic/Latino	0	Percent	0%	
Bi/Multi-Racial	3	Percent	37%	
White	2	Percent	25%	
Number of enrolled children speaking English as a second language? 0 Percent 0%				



_	
Г	What kind of programming does your Organization offer? (Select all that apply)
	Part day (less than 5 hours per day)
	Full day (5 or more hours per day)
	Part week (less than 5 days per week)
	Full week (5 or more days per week)
	Evenings (after 6pm)
	Weekends (Saturday and/or Sunday)
	No Selection
	When is your program open and serving children? (Please choose the one answer that best fits.)
	Full calendar year 🗸
	If your program closes (is not serving children) for two or more consecutive weeks at any time during the year, please describe below when your program is closed. Please be as specific as possible.
	This program is closed during the following timeframe each year:
	N/A
T	
	Previous

8. Update physical address and/or phone number, if needed.

NOTE: This will only change the address or phone number for Develop, not licensing. To edit or update address or phone number for licensing, contact your licensor.

Click **Next** when done.

Address Line 1*		Lir	ne 2	
123 Main Street				
Zip*:	City*		State*	
55555	Young America		MN	~
County*		Country		
Carver		United States		~

Phone*	
651 . 555 . 1234	
Fax	
Primary Website	
Organization's primary website	
Additional Info	
Enter any additional information about your organization that you would like to appear on this web site.	
	Next

9. On the Participation page, respond to the priority questions. Click the link in the text to see this year's priorities.

Please indicate how your grant proposal meets Regional Priority #1 as outlined by y	our regional grant committee. Click <u>here</u> to find out what Priority #1 is
My grant proposal meets regional priority 1 by	

NOTE: Enter a response for each priority text box. Type NA is there's nothing to enter.

Priority questions are scored on a scale of 1-5. Questions answered NA will be given a score of 1 by the three Grant Reviewers assigned to score the application.

Please indicate how your grant proposal meets Regional Priority #3 as outlined by	your regional grant committee. Click <u>here</u> to find out what Priority #3 is
NA	

 When all priority textboxes have been entered, add the expenditure requests (items to be purchased if the grant is funded). Click +Expenditure to begin adding requested items.



Click the add button to add expenditure	is to the proposed expendi	ture list.	
xpenditure Totals		Breakdown of Grant Investment by P	opulation Served 🛛
Program Contribution	\$0.00	Infants & Toddlers	\$0.00
Grant Request	\$0.00	Preschool	\$0.00
Total Investment	\$0.00	School-Age	\$0.00
		Culturally Responsive	\$0.00
		Expenditures can address more than one populadd up to more than 100%. Percentages are calcul Requested, not including the Cost to the Program	alated as a percent of the Total Amoun
roposed Expenditures			
		0 No data available.	

11. A pop-up window will appear, asking for the details of what the applicant wants to buy.

NOTE: The grant guide can help fill in the requested information, including how to group wanted items into expenditure requests. Enter one expenditure group per category. To request a copy of the grant guide, contact your Grant Administrator.

- a. Category: Select the category that best fits the item(s) wanted for purchase.
- b. Indicator: This is a drop-down menu of the Indicators within the category the program can select. Select the Indicator that best fits the item(s) wanted for purchase. Select 'Other' if no Indicator fits well, or change the Category to see the Indicators within that Category.
- c. Type: Select if the expenditure is Materials or Professional Development.
- d. Goal: Enter the improvement goal intended to be accomplished.
- e. Strategy: Describe what is needed to reach the goal. Include the items needed for purchase in order to implement the strategy.
- f. Description of Purchase: Enter the item(s) needed to implement the strategy and accomplish the goal. This should be a list of the items that the grant can pay for from this Category and Indicator, if awarded. Again, programs should follow the grant guide to help in enterering items correctly.

+ Expenditures	×
Use the wizard below to add additional expenditure items to th	he applicable case.
Regional Grant	
Category	Indicator
Relationships with Families	R1.2 Shares information with families
Туре	
Materials ~	
Goal	
Improve communication with families	
Maximum of 500 characters	
Strategy	
Purchase items to post notices to families	
Maximum of 500 characters	
Description of purchase	
Dry erase board, magnets, dry erase markers	

- g. Total Cost: Enter the entire cost of all the materials or professional development included in this expenditure request, including tax.
- h. Amount Requested: Enter the amount wanted for the grant to pay for, if awarded. Enter only digits and periods, no commas (for example, 2000.00 rather than \$2,000.00).
- i. Cost to Program: The system will calculate the Total Cost minus the Amount Requested to show what the program would pay. If the Cost to Program field is incorrect, edit the amount(s) in the Total Cost and/or Amount Requested fields.
- j. Population Served: Check the box(es) to indicate which age group will use or benefit from the items the program wants to purchase, keeping in mind the age group definitions for their program type. At least one age group must be selected, but all three can be selected.
- k. Culturally Responsive: Cultural responsiveness is the ability to learn from and relate respectfully with people of their own culture as well as those from other cultures. This checkbox is disabled and cannot be used at this time. Programs can contact their Grant Administrator for more information.



12. If the program has additional expenditure requests, click **Save & Add Another**. Follow steps 10-11 until all expenditures are requested, then click **Save & Close**.

Total Cost	Amount Requested
53.16	53.16
Cost to Program	
\$0	
Auto-generated based on Total cost minus Amount Requested.	
Population Served	
Infants & Toddlers	
Preschool	
School-Age	
Select ALL that apply	
Cultural Responsiveness	
This item is culturally responsive	\mathbf{X}
Clicking either "Save" button above ands the action item to	the applicable case.
Save & Add Another	Save & Close

13. After clicking Save & Close, the application will return to the Participation page, where the expenditure totals and a breakdown of expenditures by population(s) served are available. Add a new expenditure request by clicking +Expenditure.

Expenditures Click the add button to add exp	enditures to the	proposed expenditi	ure list.	/	+ Expenditure
Expenditure Totals			Breakdown of Grant Inv	estment by Population S	Served ()
Program Contribution	0%	\$10.87	Infants & Toddlers	100%	\$2,510.00
Grant Request	100%	\$2,510.00	Preschool	100%	\$2,510.00
Total Investment		\$2,520.87	School-Age		\$0.00
			Culturally Responsive		\$0.00
				ore than one population, so popu centages are calculated as a perce st to the Program.	

The program will see a list of entered expenditure requests. The expenditures can be edited prior to submitting the application. Click the red **trash can icon** to delete an expenditure request.

Proposed Expenditures			-
#28912 Buy TS Gold			1
Category	Total Cost	Grant Request	Program Contribution
Assessment and Planning for Each Individual Child	\$214.99	\$210.00	\$4.99
#28913 Buy a curriculum package			•
Category	Total Cost	Grant Request	Program Contribution
Teaching and Relationships with Children Botails	\$2,305.88	\$2,300.00	\$5.88

14. Click **Next** at the bottom of the page when the participation questions are completely finished.

⊭61110 Purchase items to post notices to families			ā
Category	Total Cost	Grant Request	Program Contribution
Relationships with Families	\$53.16	\$53.16	\$0.00
Details			

15. A Participation Agreement will appear. Read the terms of participation, and check the box **On behalf of my program...** Then, click **Submit**.





PART 3: NEXT STEPS

A confirmation email will be sent after successfully applying to the grant. The program's Grant Administrator will assign three independent Grant Reviewers to review and score the grant application.

The program's Grant Administrator will contact them around November 1 to let them know whether their grant application has been selected (chosen to receive funding) or waitlisted (not chosen at this time, but may be chosen later in the current fiscal year). The program might also receive an auto email from Develop with similar information.

If/when the program's grant application is selected, use the guide <u>Regional and MNTRECC</u> <u>Grants – Award Instructions for Programs (PDF)</u> available at on the Develop <u>How do I?</u> webpage.

If/when the program's grant application is not selected for funding in the current fiscal year, the program's Grant Administrator will update the grant to denied. Develop will send an automated email with this information as well.