Early Learning/Child Care Provider Curriculum Expansion & Implementation Study Provider Fund Request

| Who | Qua | lifie | es |
|-------------------------------|------------------|-------------------|-------------------|
| Curriculum Expansion Grant | SR CONTRACTED | VPK CONTRACTED | NOT CONTRACTED |
| NO COMPOSITE SCORE | | | |
| COMPOSITE SCORE <5.00 | | | |
| COMPOSITE SCORE =>5.00 | | | ۲ |

IMPORTANT NOTE: In order to submit a Curriculum Expansion Provider Fund Request, providers must already have an approved Provider Eligibility Application.

If a provider DOES NOT have an approved Provider Eligibility Application the provider must first complete the Provider Eligibility Application and then complete the Provider Fund Request. <u>CLICK HERE</u> for instructions on completing the Provider Eligibility Application.

If a provider DOES have an approved Provider Eligibility Application and is interested in submitted a Curriculum Expansion Fund Request they should follow the steps below.

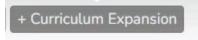
Step 1: Log in to the WebAuthor Portal and SELECT ARPA.



If you do NOT have this button on your WebAuthor Dashboard then you do NOT have an approved Provider Eligibility Application.

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Step 2: Click on the Curriculum Expansion Button.



Step 3: Complete the Provider Fund Request. Select the Category.

| Provider Fund Request | |
|--|---|
| By completing this form, you are requesting re | imbursement for curriculum materials and/or professional learning purchased between March 29, 2023 - November 17, 2023. |
| | Category is required |
| Category * | Select One 🗸 |
| Curriculum * | Select One Curriculum |
| Date of (Anticipated) Purchase * | Curriculum Components Curriculum Training All of the Above |
| Description | |
| | |
| Receipt | E Choose File |
| Amount * | *Tax is NOT Reimbursable. |

Note: For each category, the provider must select the curriculum in which is being purchased, supported or trained. The curriculum must be on the School Readiness Approved Curriculum List or on the VPK Providers on Probation Curriculum List.

Step 4: Select the Curriculum Title

| Provider Fund Request | SK Approved - Buttercups (2017 – current) - This is the prepackaged kit version of Punshine Digital and is available for purchase without a digital/online subscription. Birth to 3 | |
|--|---|------|
| | SR Approved - Connect 4 Learning First edition (2016) * 4 to K | |
| By completing this form, you are requesting re | SR Approved - The Creative Curriculum for Infants, Toddlers and Twos, 3rd Edition, Cloud Edition (2015)* Birth to 3 | |
| | SR Approved - Bee All You Can Bee * Birth to K | |
| Category * | SR Approved - Develop, Inspire and Grow (DIG) 2018 * 4 to K | |
| Category + | SR Approved - DOC: Innovation By Design (Online Curriculum) * 3 to K | |
| Curriculum * | | • |
| | | |
| Date of (Anticipated) Purchase * | # | |
| Description | | |
| Description | | |
| | | |
| Receipt | E Choose File | |
| Amount * | *Tax is NOT Reimbursable | |
| | Save & Submit Entry Cancel | , la |
| | | V |

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Step 5: Enter in the anticipated date of purchase

| Mo Tu We Tu Fr Sa Su completing this form, you are requesting requesting remaining form, you are requesting remaining with the remaining form, you are requesting with the remaining form, you are requesting with the remaining form, you are requesting with the remaining with the remaining form, you are requesting with the remaining form, you are requested with the remaining form, you are remaining form, | der Fund Request | | 0 | Sep | temb | er 20 | 023 | ~ | 0 | |
|--|--|---------|----|------|------|-------|-----|----|-----|---|
| y completing this form, you are requesting reimburs 4 5 6 7 8 9 10 11 12 13 14 15 16 17 Category * Cur 18 19 20 21 22 23 24 25 26 27 28 29 30 1 New of Today Today Today Today Today | | | Mo | Tu | We | Th | Fr | Sa | Su | |
| 4 5 6 7 8 9 10 11 12 13 14 15 16 17 Category * Cur 18 19 20 21 22 23 24 25 26 27 28 29 30 1 SR Dater Today Today * 4 to K | v completing this form, you are requesting rei | imburs | 28 | 29 | 30 | 31 | 1 | 2 | 3 | professional learning purchased between March 29, 2023 - November 17, 2023. |
| Category * Cur 18 19 20 21 22 23 24 Curriculum * SR Today Done Done + 4 to K | ,, | | | 5 | 6 | 7 | 8 | 9 | 10 | · · · · · · · · · · · · · · · · · · · |
| Curriculum * SR Today Done * 4 to K | | | 11 | 12 | 13 | 14 | 15 | 16 | 17 | |
| Curriculum * SR Date of Today Done * 4 to K | Category * | Cur | 18 | 19 | 20 | 21 | 22 | 23 | 24 | |
| Date of Today Done 7 4 to K | | | 25 | 26 | 27 | 28 | 29 | 30 | 1 | |
| | Curriculum * SR | | | | | | | _ | | 3) * 4 to K |
| Date of (Anticipated) Purchase * | | Date of | To | oday | | | | Do | one | |
| | Date of (Anticipated) Purchase * | 曲 | 1 | | | | | | | |
| Description | Description | | | | | | | | | |

Note: To be eligible for reimbursement ALL Curriculum, Resources and Training must be purchased between **March 29, 2023 and November 17, 2023**. Tax cannot be reimbursed. Providers will be required to attach supporting documentation of proof of purchase for Curriculum, Resources and Training that has already been purchased. Providers cannot request reimbursement for Curriculum, Resources and Training that has been paid for with ARPA Stabilization Grant Funds, CQI Funds or any other funding provided by the Coalition that is tied to ARPA Initiatives.

| Step | 6: Enter | a Description | for the | Fund Request | |
|------|----------|---------------|---------|--------------|--|
| | | | | | |

| Provider Fund Request | | |
|---|--|---|
| By completing this form, you are requesting r | eimbursement for curriculum materials and/or professional learning purchased between March 29, 2023 - November 17, 2023. | |
| Category * | Curriculum | ~ |
| Curriculum * | SR Approved - Frog Street Pre-K (2013) * 4 to K × | Ŧ |
| Date of (Anticipated) Purchase * | m 08/18/2023 | |
| Description | Requesting Purchase of Curriculum for the Pre-K Classroom. The fund request includes online subscription for one (1) teacher and Professional Development. | |
| Receipt * | E Choose File | |
| Amount * | *Tax is NOT Reimbursable. | |
| | \$ | |
| Contact Person * | This is the person who may be contacted for research purposes associated with this funding. | |

Step 7: If required, attach proof of purchase.

| Provider Fund Request | | |
|--|--|--------|
| By completing this form, you are requesting re | imbursement for curriculum materials and/or professional learning purchased between March 29, 2023 - November 17, 2023. | |
| Category * | Curriculum | ~ |
| Curriculum * | SR Approved - Frog Street Pre-K (2013) * 4 to K × | • |
| Date of (Anticipated) Purchase * | B8/18/2023 | |
| Description | Requesting Purchase of Curriculum for the Pre-K Classroom. The fund request includes online subscription for one (1) teacher and Professional Development. | - - |
| Receipt * | Choose File Frogstreet_Prek_CarsRoom_R Size: 31 kb 100% | |
| Amount * | *Tax is NOT Reimbursable. | |

Step 8: Enter the amount of the purchase. Do not include sales tax.

| Category * | Curriculum |
|------------------------------------|---|
| Curriculum * | SR Approved - Frog Street Pre-K (2013) * 4 to K × 🔻 |
| Date of (Anticipated) Purchase $*$ | 08/18/2023 |
| Description | Requesting Purchase of Curriculum for the Pre-K Classroom. The fund request includes online subscription for one (1) teacher and Professional Development. |
| Receipt * | Choose File Frogstreet_PreK_CarsRoom_R Size: 31 kb 100% |
| Amount * | *Tax is NOT Reimbursable. |
| | \$ 2500 |

Note: The targeted amount of dollars per provider is \$5,000.00

Step 9: Enter the Contact Name, Email and Phone Number of the person that will be responsible for participating in the Research Study.

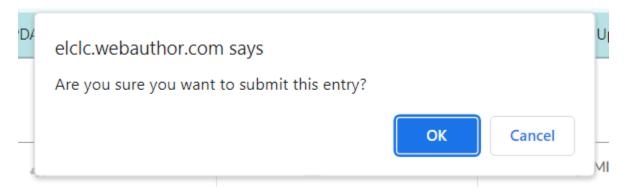
| Contact Person * | This is the person who may be contacted for research purposes associated with this funding. |
|------------------|---|
| | Lead Teacher 1 |
| Contact Email * | ☑ leadteacher1@gmail.com |
| Contact Phone * | 3 352-555-5555 |

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Step 10: Read the Attestation, select "Yes", sign and submit.

| Provider Attestation * The Division of Early Learning provided Coalitions/RCMA with a coalition's service area for curriculum and implementation related training components. Eligible providers with an coalitor's service area for curriculum and implementation related training components. Eligible providers with a gravider of the requirements of participation in the Curriculum Expansion Project and Implementation factors and support with effective curriculum implementation from its home coalition. Provider Attestation * The Division of Early Learning provider of the requirements of participation in the Curriculum Expansion Project and Implementation and support with effective curriculum implementation from its home coalition. Provider agrees to the following items to participate in the project: | | |
|---|------------------------|--|
| Study. Provider will receive payment for or reimbursement of approved SR and/or VPK curriculum and related training/materials, if applicable, and support with effective curriculum implementation from its home collision. Provider agrees to the following items to participate in the project: -Complete the project surveys* within 15 days of receipt. Participate in project interviews* -Identify Point of Contact information to the researchers! -Identify Point of Contact information to the researchers! -You are requesting reimbursement for curriculum materials and/or professional learning purchased between March 29, 2023 - November 17, 2023. -You are requesting reimbursement for curriculum materials and/or professional learning.purchased between March 29, 2023 - November 17, 2023. -You are requesting reimbursement for curriculum materials and/or professional learning.purchased between March 29, 2023 - November 17, 2023. -You are requesting reimbursement for curriculum materials and/or professional learning.purchased between March 29, 2023 - November 17, 2023. -You are requesting reimbursement for curriculum implementation (training,processes, daily schedules, etc.) and may include provider and teacher demographic information.Providers will not be required to provide child level information or personally identifiable information. - Yes - Yes - Receive Signature * | Provider Attestation * | Voluntary Prekindergarten (VPK) contracted providers within a coalition's service area for curriculum and implementation related training |
| - Complete the project surveys* within 15 days of receipt-Participate in project interviews* - Identify Point of Contact information to the researcher(s) - You are requesting reimbursement, provide documentation of purchase (receipt, invoice) - You are requesting reimbursement for curriculum materials and/or professional learning purchased between March 29, 2023 - November 17, 2023. - The surveys and interviews will involve questions related to curriculum implementation (training processes, daily schedules, etc.) and may include provider and teacher demographic information. Providers will not be required to provide child level information or personally identifiable information. Provider Signature * I are I are | | Study. Provider will receive payment for or reimbursement of approved SR and/or VPK curriculum and related training/materials, if applicable, |
| 17, 2023. *The surveys and interviews will involve questions related to curriculum implementation (training,processes, daily schedules, etc.) and may include provider and teacher demographic information.Providers will not be required to provide child level information or personally identifiable information. Provider Signature * | | -Complete the project surveys* within 15 days of receipt-Participate in project interviews* -Identify Point of Contact information to the researcher(s) |
| include provider and teacher demographic information.Providers will not be required to provide child level information or personally identifiable information. | | |
| Provider Signature * | | include provider and teacher demographic information. Providers will not be required to provide child level information or personally identifiable |
| | | Yes |
| | Provider Signature * | |
| | | |
| | | |
| | | |
| | | |
| | | |
| Save & Submit Entry Cancel | | |
| | | Save & Submit Entry Cancel |

Step 11. Select OK



Once submitted, the Provider Fund Request will show on the provider dashboard.

| PROVIDER FUND REQUEST | \$2,500.00 MAX AMOUNT (PROVIDER FUND REQUEST) | SUM AMOUNT (PROVIDER FUND REQUEST) | MAX REIMBURSED AMOUNT (PROVIDER FUN |
|--|--|------------------------------------|-------------------------------------|
| \$0.00 SUM REIMBURSED AMOUNT (PROVIDER FUN | | | |

Note: Fund Requests submitted by eligible providers will be considered until funding is exhausted.

Next Steps:

Once submitted, Coalition Staff will review the Provider Fund Request. Once submitted the fund request will be reviewed to determine if changes are needed, if the request can be approved or if the request will be denied.

Changes Needed: If changes are needed the Fund Request will be returned back to the provider with instructions.

Curriculum Already Purchased: If the curriculum, resources and training has already been purchased and the fund request is approved, the Coalition will process the reimbursement to the provider.

Curriculum NOT Already Purchased: If the curriculum, resources and training has NOT been purchased and the fund request is approved the fund request will be moved to an Approved Status, Pending Documentation submission. Once the curriculum is purchased and the supporting documentation is submitted then the Coalition will process the reimbursement to the provider.

Denied: If the provider or the curriculum, resources or training does not meet the eligibility requirements the fund request will be denied. This may occur if the purchase was made **PRIOR** to March 29, 2023 or **AFTER** November 17, 2023.