Investing in Early Educators Stipend Program

Cycle 12B

Instructions and Application for Persons Working in Family Child Care Homes

A project of the Child Care Planning Committee of the County of Los Angeles, administered by the Office of Child Care with funding from the California Department of Education.

Special Alert – Cycle 12

Funding for Cycle 12 is dependent on the availability of funds from the California Department of Education/Child Development Division (CDE/CDD). For more information on the potential impact of the State budget negotiations for 2010-11 on Cycle 12 of the Stipend Program, visit the Office of Child Care Web site at www.childcare.lacounty.gov; click on Investing in Early Educators Stipend Program from left menu.

Office of Child Care

INVESTING IN EARLY EDUCATORS STIPEND PROGRAM

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INVESTING IN EARLY EDUCATORS STIPEND PROGRAM – CYCLE 12B
For Persons Working in Family Child Care Homes

Instructions

FUNDING FOR CYCLE 12 IS DEPENDENT ON THE AVAILABILITY OF FUNDS FROM THE CALIFORNIA DEPARTMENT OF EDUCATION/CHILD DEVELOPMENT DIVISION (CDE/CDD).

Schedule for Stipend Program – Cycle 12	
Stipend Program Cycle 12 applications posted on the Web site at www.childcare.lacounty.gov	August 2010
Applications with supporting documents due	**Mail in: Thursday, October 21, 2010 (postmarked)** **Walk in: Thursday, October 28, 2010**
Application Disqualification Letters mailed by:	Thursday, January 6, 2011
Appeal Letters for Application Disqualification due:	Thursday, January 20, 2011
Verification Forms mailed to eligible applicants by:	Friday, February 4, 2011
Verification Forms with supporting documents due:	**Mail in: Thursday, March 3, 2011 (postmarked)** **Walk in: Thursday, March 10, 2011**
Verification Disqualification Letters mailed by:	Friday, May 6, 2011
Appeal Letters for Verification Disqualification due:	Friday, May 20, 2011
Stipends sent to qualifying applicants:	**July/August 2011**

READ ALL INSTRUCTIONS CAREFULLY BEFORE AND WHILE COMPLETING THE APPLICATION AND PROVIDE ALL INFORMATION AND DOCUMENTS REQUESTED.

Overview

The *Investing in Early Educators Stipend Program* - funded by the California Department of Education/Child Development Division (CDE/CDD), developed by the County of Los Angeles Child Care Planning Committee and administered by the Office of Child Care - is designed to increase the retention and academic preparedness of early educators working in child development programs – centers and family child care homes – in which most of the children are subsidized by the CDE/CDD. In addition, the *Stipend Program* helps early educators work towards completing college coursework that informs their work with children and families, and contributes to a degree in child development or a closely related field.

The instructions serve as your guide for completing your application to the *Stipend Program.* It is critically important that you **read the instructions** carefully and provide all information and documents as requested. Note that each cycle is separate; therefore, you must submit all supporting documents requested for this cycle. **Applications that have missing information and/or missing documents will be considered incomplete and will not be reviewed.**

The instructions also provide you with information on the process leading up to awarding stipends, including the appeal process and a detailed timeline.

Applying to the *Stipend Program* is a two-part process:

1. **Application:** determines that you meet the employment eligibility criteria.
2. **Verification:** verifies that you have met the educational requirements, hold a Child Development Permit, and continue to meet the employment criteria.

If you work in a Los Angeles Universal Preschool (LAUP) classroom only, you may be eligible for their Professional Growth Plan (PGP) Stipend Program. Visit www.laup.net and click on Professional Growth Opportunities for more information.

STEP 1: Determining Eligibility[1] (see note below)

To be eligible to apply for a stipend, you ***must:***

1. Work in a family child care home that participates in a California Department of Education/Child Development Division (CDE/CDD)-contracted Family Child Care Home Education Network certified by the Network Program Coordinator/Administrator, **OR**

   Work in a licensed family child care home in which the majority (51% or more) of the children receive a child care subsidy from the CDE/CDD-contracted agency at the time you submit your application; **AND**

2. Work directly teaching children on a consistent and continual basis at least 15 hours per week; **AND**

3. Have been licensed and operating for one year or employed in a family child care home in the County of Los Angeles from July 1, 2010 through March 10, 2011; **AND**

4. Hold a Child Development Permit issued by the California Commission on Teacher Credentialing (CTC) to be submitted with the Verification Form (see Schedule). See Step 2, Item 2 under ***Eligible Coursework*** for more information on obtaining or upgrading a permit. *An applicant with a **pending** Child Development Permit will not be eligible for a stipend.*

If you meet the eligibility criteria, then continue to Step 2.

STEP 2: Meeting the Educational Requirements

To earn a stipend, you ***must***:

1. Complete at least three (3) semester units (4.5 quarter units) or a maximum of six (6) semester units (9 quarter units) of eligible coursework at a community college, college, or university; **AND**

Attention Bachelor Degree candidates: *For applicants taking one final class required to graduate with a BA/BS degree in child development or a closely related field, you may qualify for an additional graduation stipend with the coursework stipend as long as the completed class is the equivalent of at least three (3) quarter units. The units and the degree must be earned during the Stipend Program cycle.*

2. Complete the class(es) **after** February 28, 2010 and **before** March 1, 2011; **AND**

3. Pass the class(es) with a grade of "C" or better; **AND**

4. Submit your transcript(s) and Child Development Permit when requested with your Verification Form.

Eligible Coursework

All coursework must be unit-bearing and fulfill the requirements for a degree in child development. Extension or continuing education courses are ***not*** eligible unless the applicant has a Bachelor Degree (BA/BS) or higher. If you have any questions regarding coursework eligible for the Stipend Program, you are encouraged to contact Renatta Cooper by telephone at (213) 974-4453 or by e-mail at rcooper@ceo.lacounty.gov.

[1] State law limits eligibility to the *Investing in Early Educators Stipend Program* to persons serving a majority of children receiving CDE/CDD subsidies. Staff working in Los Angeles Universal Preschool (LAUP) and Head Start Programs only are ineligible to apply.

Eligible coursework is limited to the following five categories:

1. If you are not proficient in English as indicated on your application, you may take English-as-a-Second-Language (ESL) classes at a community college if directed to do so by your college. This option is intended for applicants needing to improve their English language skills in order to enroll in college classes toward earning a degree in child development.

2. If you do not have a child development permit issued by the California Commission on Teacher Credentialing (CTC), you should take required child development classes, such as child/human growth and development, child/family/community, or curriculum. If you already have a permit, you may take classes needed to upgrade or renew your permit.

***Note*:** *If you do not have a permit, contact CTC by visiting their Web site at www.ctc.ca.gov. Click on "Credentialing", then "Child Development Permits" and following the instructions for obtaining or upgrading your permit. As an alternative, contact the child development department at your community college. Community colleges can often process permit applications more quickly than the CTC. In addition, the Child Development Training Consortium offers support to eligible persons applying for, renewing, or upgrading their permits; more information is available at www.childdevelopment.org.*

You will need a valid permit to qualify for a stipend at the time of verification; it takes approximately ***nine months or more*** *for your permit to be issued. A* ***pending*** *permit will not be accepted.*

3. If you do not have an Associate Degree (AA/AS), you should take child development, English, math or general education classes; or prerequisites to classes that are transferable for a degree in child development at a four year college. Check with an advisor at your college or university before enrolling in a class if you are not sure it is a prerequisite or transferable class.

4. If you have an AA/AS or are working toward a BA/BS, you should take classes that are transferable and are counted as credit toward a four-year college or university degree; or classes at a four-year college or university that count towards a degree. Acceptable degrees include Early Childhood Education, Early Special Education, Child Psychology, and Child Development.

5. If you have a BA/BS or higher, you should take college or university classes that are directly related to your work with children and families in a child development program. Sample topics include: special needs children, diversity, dual language learners, parent relations, adult supervision, program evaluation, and advanced child development. Unit bearing extension or continuing education courses can be counted as eligible only for individuals who already hold a BA/BS or higher.

If you meet the eligibility criteria **and** understand the educational requirements, then continue with your application.

STEP 3: Completing the Application

Be sure you have the correct application:

- If you work in a **child development center**, complete the application for **Cycle 12A** (see separate instructions and application for Cycle 12A).
- If you work in a **family child care home**, complete the application for **Cycle 12B.**

Section 1. Applicant Information

- Enter your full name in the appropriate box on the top of each page of your application.

- Fill in every box; do not leave blanks. If the information is not applicable, then write in "N/A".

- Enter **all** telephone numbers where we can reach you from 9:00 a.m. to 5:00 p.m. Monday through Friday.

- Enter your personal e-mail address. If you do not have an e-mail address, enter "N/A".

- Indicate if you have participated in the Stipend Program in previous cycles (Cycles 1 – 11) and whether your name and/or address have changed. If there has been a change in your name and/or address, you will need to submit certain documents as follows:

  - **Name change:** Submit a copy of the W-9 Form, Request for Taxpayer Identification Number and Certification (available for download from the Internal Revenue Service Web site at http://www.irs.gov/pub/irs-pdf/fw9.pdf).

  - **Address change:** Complete and submit an Address Change Notification Form (available for download from the Office of Child Care Web site at www.childcare.lacounty.gov or call (213) 974-4674 to request the form).

- Indicate if you have received a check from another Los Angeles County program (for example, child support payments, GAIN, Department of Children and Family Services (DCFS), etc.).

Special instructions:
- *Enter your full name **exactly** as it appears on your social security card.*
- *Enter your social security number (SSN) **exactly** as it appears on your card.*
- *All SSNs are verified with the Internal Revenue Service (IRS), so accuracy is critical.*

Section 2. Applicant Education and Permit Levels

- Check the highest level of education that you have completed**.**

***Note**: If you are working toward a degree, **DO NOT** check that you have the degree.*

- Check the type of Child Development Permit you currently hold**.**

Section 3. Continuing Education Requirement

- Check all that apply; indicate major if you have checked that you are working to obtain an AA, BA/BS or MA/MS degree.

Section 4. Applicant Employment Information

- If your family child care home is part of a Family Child Care Home Education Network (FCCHEN), enter the name of the administering agency and the name of the Network Coordinator/Administrator in the appropriate boxes. **Be sure to attach the Network Coordinator/Administrator's business card to your application.**

Definition of Family Child Care Home Education Network (FCCHEN): *A licensed family child care home is part of a FCCHEN if:*
- *The home has been evaluated and meets certain qualifications to participate in the FCCHEN (i.e. Family Child Care Environment Rating Scale (FCCERS) has been conducted).*
- *The provider is required to attend training scheduled by the administering agency.*
- *The provider is required to assist with development assessments for each child.*

Family Child Care Home Education Networks

- California State University Northridge Children's Center
- Center for Community & Family Services/Rainbow Project
- Child Care Resource Center
- Child Development Consortium of Los Angeles
- Children's Home Society of California
- Children's Institute, Inc
- City of Gardena Child Development
- City of Santa Fe Springs
- Claremont Unified School District
- Community Development Center
- Comprehensive Child Development, Inc.
- Estrada Courts
- Hope Street Family Center
- International Institute of Los Angeles
- Kids First Learning Center/Eben-Ezer Children's Day Care
- Little Tokyo Service Center Community Development
- Los Angeles Mission College
- Mexican American Opportunity Foundation (MAOF)
- Options – A Child Care & Human Services Agency
- Pathways
- Plaza Community Services
- Venice Family Clinic
- Vista del Mar/Home Safe
- Westside Children's Center

Note: *Certification by the Network Coordinator/Administrator for applicants participating in a FCCHEN is required. (See Section 7.)*

- Licensee/owners and assistants applying for the *Stipend Program* **MUST** include a copy of the family child care home license with your application.

- Indicate if the family child care home in which you work serves as a Los Angeles Universal Preschool (LAUP) site in addition to participating in a FCCHEN or serving a majority of children subsidized by the CDE/CDD-contracted agency.

- Indicate if the family child care home is participating in the Steps to Excellence Project (STEP).

Section 5. Applicant Wage/Income Information

- Be sure to complete the appropriate box.

Section 6. Children with Whom Applicant is Currently Working

- Check all that apply.

Section 7. Employment and Eligibility Certification

- It is your responsibility as the applicant to make sure that your Network Coordinator/Administrator or Licensee-Owner completes this section, signs and dates it **and attaches their business card.**

- There are three options to this section, depending on whether the family child care home is part of a FCCHEN and, if part of a FCCHEN, whether the applicant is the licensee-owner or assistant. Be sure your Network Coordinator/Administrator or Licensee-Owner completes only one portion of this section:

  - For applicants (license-owner) with FCCHENs, OR
  - For applicants who are assistants in licensed family child care homes that are with a FCCHEN, OR
  - For applicants (licensee or assistants) serving low-income children and who are not in a FCCHEN.

Special instructions for FCCHENs:

- *Enter the name of the FCCHEN on the line as requested (see Section 4 beginning on page 4 of the instructions).*
- *This section **must** be signed by the Network Coordinator/Administrator.*
- *Providers participating in FCCHENs do not need to provide proof that they are serving subsidized children.*

Special instructions for family child care homes that do not participate in a FCCHEN:

- *Enter the name of the family child care home.*
- *Enter the total number of children currently enrolled and of those children, the total number of* ***subsidized*** *children.*
- *Check the boxes of the agencies providing subsidy funds for the children in your care.*
- *Attach to the application a copy of the invoice or contract documents listing* ***all*** *of the subsidized children. The documents should be copies of the most current printout(s) you received from the funding agency(ies) with the agency's(ies') name on it and list the children's names; the payment amounts may be blocked out. Write the Stipend applicant's name in the upper right hand corner of the document(s).*
- *The licensee-owner signs for their employees. Licensee-Owners applying for stipends may self-certify.*

Section 8. Applicant Certification and Signature

- Read and initial each of the eight statements of certification.

- Be sure to sign and date this section.

STEP 4: Submitting Your Application

The final page of the instructions provides a simple checklist as a tool to help you prepare your application for submission. The materials are listed in the order that they should be assembled and submitted. Be sure to refer to the instructions in this section for submitting your application.

1. Be sure that you have completed every section of the application and your name is entered at the top of each page. **It is highly recommended that you have someone review your application for you before you submit it.**

2. Be sure that your name is included at the top of the supporting documents.

3. Check to make sure that your Network Administrator or Licensee-Owner has completed, signed, and dated Section 7 and attached their business card.

4. If you operate or work in a family child care home that does not participate in a FCCHEN, be sure that you have attached a copy of the most current invoice/contract documents listing **all** of the subsidized children enrolled in the program. The invoice/contract(s) should be a copy of the printout(s) received from the funding agency(ies) with their name on it. You will **not** be eligible for a stipend without the invoice/contract documents.

5. Be sure to include a copy of the family child care home license.

6. **Make a copy of your completed application, with supporting documents, for your records.**

7. Submit your completed original application, with supporting documents, in person or by U.S. mail, certified mail or Domestic Return Receipt, to:

Investing in Early Educators Stipend Program – Cycle 12B
Office of Child Care, SIB/CEO
County of Los Angeles
222 South Hill Street, 5th Floor
Los Angeles, CA 90012
Office Hours: 8:00 a.m. – 5:00 p.m.

Application due dates:
Mail in: Thursday, October 21, 2010 (postmarked)
Walk in: Thursday, October 28, 2010

DO NOT WAIT UNTIL THE DEADLINE TO APPLY!

- *Applicants are encouraged to **apply early**. If you walk your application into the Office of Child Care, you will receive a stamp-dated receipt with all documents noted on the receipt***.**
- *Persons submitting applications in person on behalf of several colleagues should request individual receipts per applicant.*
- ***Do not mail groups of applications in same packets*.**
- *If you choose to mail your application, send certified mail or Domestic Return Receipt.*
- *Faxed, late, or incomplete applications will not be considered.*
- *Stipend Program staff will not call to remind you to send missing information. This is your responsibility.*

STEP 5: Application Review

1. Upon receipt of your application, *Stipend Program* staff will screen your application for completeness. Only complete applications will be fully reviewed. Applications that have missing information and/or missing supporting documents will not be reviewed. (To learn more about how the California State Budget may impact review of incomplete Stipend applications, visit the Office of Child Care Web site at www.childcare.lacounty.gov.)
2. Staff will review your complete application to ensure that you meet the eligibility criteria to participate.
3. If you are eligible, your information is entered into the *Stipend Program* database and a Verification Form with instructions will be sent to you by U.S. mail by Friday, February 4, 2011. If you do not receive a Verification Form by mid-February 2011, contact the Office of Child Care at (213) 974-4674.
4. If your application is incomplete or you are not eligible, you will be notified with an Application Disqualification Letter by U.S. mail in early January 2011. You may appeal this decision. Instructions for submitting a letter of appeal are outlined in Step 6 of these instructions.

***Note**: Due to the anticipated number of applications, the review process can take several weeks. Please **do not** call to ask about your application. Your Verification Form or letter of disqualification will serve as notice regarding your application.*

STEP 6: Submitting a Letter of Appeal

- If you are disqualified, you may submit a letter of appeal. **Appeals must be submitted in writing.**

*An appeal is **not** the time to submit new information or supporting documents. Rather, it is an opportunity to prove that your application was complete, included the required supporting documents, was submitted by the due date, and you meet the eligibility criteria based on your original application.*

- Your letter of appeal should include the following information:
  - The date your appeal letter is written
  - Your full name and social security number (SSN) as written on your application
  - Reference to the reason you were disqualified as indicated in the letter you received from the Office of Child Care
  - A brief description of why you think the decision to disqualify your application is incorrect
  - A copy of your application and supporting documents **as submitted** by the due date
  - A copy of the receipt you were provided when you submitted your application in person or a copy of your certified mail receipt

Visit the Investing in Early Educators Stipend Program page on the Office of Child Care Web site at www.childcare.lacounty.gov to download sample letters of appeal. The sample letters of appeal are provided to help guide you as you create your own letter.

- Make a copy of your letter of appeal and supporting documents for your records.

- Letters of appeal with supporting documents are due by Thursday, January 20, 2011 to:

Investing in Early Educators Stipend Program – Cycle 12B
Office of Child Care, SIB/CEO
County of Los Angeles
222 South Hill Street, 5th Floor
Los Angeles, CA 90012

- The Office of Child Care management team reviews appeals, including review of the original application. Decisions to grant or not grant the appeal, based on whether the applicant met the application requirements and deadlines, are made within two weeks of receipt of the letter of appeal. The applicant will be notified by U.S. mail. **ALL DECISIONS ARE FINAL**.

For more information on the *Investing in Early Educators Stipend Program* and to download the instructions and application, visit www.childcare.lacounty.gov. Instructions and application forms are also available by contacting the Office of Child Care at (213) 974-4674.

INVESTING IN EARLY EDUCATORS STIPEND PROGRAM – CYCLE 12B
For Persons Working in Family Child Care Homes

Application Checklist

The following checklist is provided as a tool to help you prepare your application for submission. The materials are listed in the order that they should be assembled.

- ❑ Completed Cycle 12B Application for Persons Working in Family Child Care Homes
  - ☐ Applicant Name entered at top of each page
  - ☐ All sections completed (no empty boxes)
  - ☐ Network Coordinator/Administrator or Family Child Care Licensee-Owner has completed and signed the appropriate area in Section 7
  - ☐ You have initialed the statements and provided your signature in Section 8

- ❑ Copy of the Family Child Care Home facility license

- ❑ **For Applicants with FCCHENs:** Business card of the Network Coordinator/Administrator

- ❑ **For non-FCCHENs:** Copy of the most current invoice/contract documents listing **all** of the subsidized children enrolled in the program

If applicable:

- ❑ **Previous Applicants - For name change:** Copy of the W-9 Form, Request for Taxpayer Identification Number and Certification (see Step 3, Section 1 of instructions)

- ❑ **Previous Applicants – For address change:** Address Change Notification Form(see Step 3, Section 1 of instructions)

Refer to Step 4 of the Instructions for detailed information on submitting your application.

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INVESTING IN EARLY EDUCATORS STIPEND PROGRAM – CYCLE 12B
For Persons Working in Family Child Care Homes

Application

FUNDING FOR CYCLE 12 IS DEPENDENT ON THE AVAILABILITY OF FUNDS FROM THE CALIFORNIA DEPARTMENT OF EDUCATION/CHILD DEVELOPMENT DIVISION (CDE/CDD).

APPLICATIONS WITH SUPPORTING DOCUMENTS DUE:	*BY MAIL: THURSDAY, OCTOBER 21, 2010 (POSTMARKED)* *WALK IN: THURSDAY, OCTOBER 28, 2010*

***IMPORTANT*: Eligibility and education requirements, how to complete the application and timelines, are in the instructions, available for download from www.childcare.lacounty.gov or by calling (213) 974-4674.

Section 1. Applicant Information			License No. _____
Last Name on Social Security:	First Name on Social Security:	Middle Initial/Name on Social Security Card:	
Is this the name on your Birth Certificate? ❑ Yes ❑ No	Social Security Number: DO NOT LEAVE BLANK		
Last Name on Birth Certificate:	First Name on Birth Certificate:	Middle Initial on Birth Certificate:	
Home Street or Mailing Address:	Apt. #: / City:	Zip Code:	Home Telephone Number: ( ) Cell Telephone Number: ( ) Work Telephone Number: *(of the family child care home)* ( ) E-mail Address:
Work Street Address:	City:	Zip Code:	
Gender: ❑ Female ❑ Male	Place of Birth (State, Country):	Date of Birth:	

Have you participated in the Investing in Early Educators Stipend Program in previous cycles? ❑ Yes ❑ No
If yes, have any of the following changed since you last participated? *(Check all that apply):*
❑ Name change ❑ Address change

If your name and/or address have changed, you will need to submit certain documentation. See Step 3, Section 1 of the Stipend Program Instructions.

Have you received a check from another Los Angeles County program (i.e. child support, GAIN, DCFS, etc.)? ❑ Yes ❑ No

Ethnicity: *(Check all that apply)*
(NOTE: This information is being collected for statistical purposes only.)
❑ African American ❑ American Indian/Alaskan Native
❑ Asian/Pacific Islander ❑ Hispanic
❑ White ❑ Other

Are you proficient in English?
❑ Yes
❑ No
➲ Your primary language: _____

Section 2. Applicant Education and Permit Levels *(NOTE: The information in this section is being collected for statistical purposes only.)*

Indicate the highest level of education you have completed *(Check one)*:
❑ High School Diploma/GED ❑ Some College ❑ 2-Year College Degree (AA)
❑ 4-Year College Degree (BA/BS) ❑ Graduate Degree (MA/MS)

Indicate the type of Child Development Permit or teaching credential you hold:
❑ None ❑ Assistant Teacher ❑ Associate Teacher ❑ Teacher ❑ Master Teacher
❑ Site Supervisor ❑ Program Director ❑ Early Special Education Credential ❑ Elementary Education Credential

Year began working in the early care and education field: _____

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Name of Applicant_____

Section 3. Continuing Education Requirement *(NOTE: The information in this section is being collected for statistical purposes only.)*

What are your educational goals? *(Check all that apply)*

- ❑ To improve my English language skills (speaking, reading, writing)
- ❑ To develop new skills related to my work with children and families
- ❑ To obtain my Child Development Permit
- ❑ To upgrade or renew my Child Development Permit
- ❑ To obtain an early special education teaching credential
- ❑ To obtain a 2-Year College Degree (AA) ➲ Major:_____
- ❑ To obtain a 4-Year College Degree (BA/BS) ➲ Major: _____
- ❑ To obtain a Graduate Degree (MA/MS) ➲ Major: _____

Section 4. Applicant Employment Information

FOR LICENSEE/PROVIDER	*FOR ASSISTANTS IN FAMILY CHILD CARE HOME*
Name on License:	Licensee-Owner Name:
Are you part of a Family Child Care Home Education Network? ❑ Yes ❑ No (See definition below)	Is the licensee-owner part of a Family Child Care Home Education Network? ❑ Yes ❑ No (See definition below)
If yes, name of Agency administering the FCCHEN (see Section 4 of instructions for listing of FCCHENs):	If yes, name of Agency administering the FCCHEN (see Section 4 of instructions for listing of FCCHENs):
Name of the Network Coordinator (This is the person who must sign your application; be sure to attach their business card):	Leave blank.
Date first licensed: (Attach copy of family child care license) _____/_____ (Month/ Year)	Date of hire with current employer: (Attach copy of license) _____/_____ (Month/Year)
Work Schedule *(Check one)*: ❑ Full-time (30+ hours/week) ❑ Part-time (Less than 30 hours/week)	Work Schedule *(Check one)*: ❑ Full-time (30+ hours/week) ❑ Part-time (Less than 30 hours/week)
Number of hours you spend each week directly teaching children in a family child care home: Is this also a LAUP site? ❑ Yes ❑ No	Number of hours you spend each week directly teaching children in a family child care home: Is this also a LAUP site? ❑ Yes ❑ No

Is your family child care home participating in the Steps to Excellence Project (STEP)? ❑ Yes ❑ No

Section 5. Applicant Wage/Income Information *(NOTE: The information in this section is being collected for statistical purposes only.)*

FOR LICENSEE/PROVIDER	*FOR ASSISTANTS IN FAMILY CHILD CARE HOME*
Net annual earnings *only* from family child care business for 2009: To calculate net earnings: 1. Annual Gross earnings (from income tax return and only related to child care business) $_____ 2. Less Annual Expenses (directly related to child care business) - $_____ 3. Net Earnings for 2009 = $ _____ This information will not affect your stipend award.	Current gross annual income for family child care assistants (not including benefits): To calculate, multiply your gross monthly salary by the number of months worked per year OR multiply your weekly salary by the number of weeks you worked. Example: $1,000 every 2 weeks x 2 = $2,000 per month, x 9 months = $18,000 per year. $ _____ per year Gross hourly wage for family child care assistants (not including benefits): To calculate: Divide your gross weekly or monthly wage by the number of hours you worked. Example: $350 weekly salary ÷ 35 hours per week = $10.00/hour. $ _____ per hour This information will not affect your stipend award.

Section 6. Children with Whom Applicant is Currently Working *(NOTE: The information in this section is being collected for statistical purposes only.)*

Ages of children with whom you currently work
(*Check all that apply*):

❑ Birth - 23 months ❑ 2 years - 2 years 11 months ❑ 3 years - 5 years ❑ 5 years and older

FUNDING FOR CYCLE 12 IS DEPENDENT ON THE AVAILABILITY OF FUNDS FROM THE CALIFORNIA DEPARTMENT OF EDUCATION/CHILD DEVELOPMENT DIVISION (CDE/CDD).

Name of Applicant_____

Section 7. Employment and Eligibility Certification

For Applicants (licensee-owner) with Family Child Care Home Education Networks (FCCHENs)

1. I certify that the applicant is a provider in a licensed family child care home that is in a FCCHEN administered by _____. (Agency Name)
2. I certify that the applicant is currently working directly with children at least 15 hours a week. To the best of my knowledge, the applicant meets the eligibility requirements for Cycle 12B, *Investing in Early Educators Stipend Program.*
3. I understand that the stipend he/she receives is in addition to his/her payments for child care services, and I certify that his/her payments for services will not be negatively affected by this incentive.

I declare under penalty of perjury that the above statements are true and correct to the best of my knowledge and belief.

_____ _____

Network Coordinator/Administrator's Signature (attach your business card) Date

OR

For applicants who are assistants in licensed family child care homes that are with a FCCHEN

1. I certify that the applicant is an employee of _____ (name of family child care home); and that the family child care home is in a Family Child Care Home Education Network administered by _____. (Agency Name)
2. I certify that the applicant is currently working directly with children at least 15 hours a week. To the best of my knowledge, the applicant meets the eligibility requirements for Cycle 12B, *Investing in Early Educators Stipend Program.*
3. I understand that the stipend he/she receives is in addition to his/her payments for child care services, and I certify that his/her payments for services will not be negatively affected by this incentive.

I declare under penalty of perjury that the above statements are true and correct to the best of my knowledge and belief.

_____ _____

Family Child Care Licensee-Owner Signature Date

OR

For applicants serving low-income children and who are not working in a family child care home that is part of a FCCHEN

1. Check one only:

❑ I certify that I am the applicant and the family child care home licensee-owner of _____
Name of family child care home

❑ I certify that the applicant is an employee of my licensed family child care home _____
Name of family child care home

2. I certify that the above named home is serving a majority of children paid for by the agency(ies) checked below.
3. I certify that as of the date of application, the enrollment in the family child care home is _____ children, of which _____ children are subsidized. Attached are current printouts of payment invoices or listings of the children subsidized by the following agencies (check all that apply):

- ❑ Center for Community and Family Services (CCFS)
- ❑ Child Care Information Service (CCIS)
- ❑ Child Care Resource Center (CCRC)
- ❑ Children's Home Society of California (CHS)
- ❑ City of Norwalk
- ❑ Connections for Children
- ❑ Crystal Stairs, Inc.
- ❑ Department of Children and Family Services (DCFS)
- ❑ Drew Child Development Corporation
- ❑ International Institute of Los Angeles
- ❑ Mexican American Opportunity Foundation (MAOF)
- ❑ Options
- ❑ Pathways
- ❑ Pomona USD Child Development

I declare under penalty of perjury that the above statements are true and correct to the best of my knowledge and belief.

_____ _____

Family Child Care Licensee-Owner Signature Date

FUNDING FOR CYCLE 12 IS DEPENDENT ON THE AVAILABILITY OF FUNDS FROM THE CALIFORNIA DEPARTMENT OF EDUCATION/CHILD DEVELOPMENT DIVISION (CDE/CDD).

Name of Applicant_____

Section 8. Applicant Certification and Signature

Sign your initials to each statement and sign and date where requested.

1. I certify that I meet **all of the eligibility requirements** and that all of the information and attachments provided in this application are true and correct. I understand that falsifying information may require the return of all stipend monies, with penalties, to the County of Los Angeles. _____ (initial)

2. I understand that I must declare any stipend award I receive on my 2011 tax return. _____ (initial)

3. I understand that I will be required to verify my continuous employment in a family child care home located in the County of Los Angeles from July 1, 2010 through March 10, 2011 and verify completion of my coursework before a stipend can be issued. _____ (initial)

4. I understand that there is NO GUARANTEE that I will be awarded a stipend. Stipends will be granted depending on the continued availability of State funding and my ability to meet all of the requirements of the program. _____ (initial)

5. The licensee-owner or Network Coordinator/Administrator has completed and signed Section 7 of this application. _____ (initial)

6. I understand that the Office of Child Care may share information about my application with the staff of Los Angeles Universal Preschool (LAUP). _____ (initial)

7. I understand that the *Investing in Early Educators Stipend Program* will be evaluated, and that aggregated applicant data will be considered in that process. Some stipend recipients may be randomly selected to participate in a telephone interview. _____ (initial)
   ❑ I am not willing to participate in a telephone interview.

8. I understand that it is my responsibility to inform the Office of Child Care of any changes to my address from the time of application through June 30, 2011 and to provide information and documentation as requested. _____ (initial) *(Visit www.childcare.lacounty.gov and click on "Investing in Early Educator's – Stipend Program to download the Address Change Notification Form).*

I declare under penalty of perjury that the above statements are true and correct to the best of my knowledge and belief.

_____ _____

Applicant's Signature Date

The Office of Child Care reserves the right to verify that the information provided in this application is true.

Refer to Cycle 12B instructions, Step 4: Submitting Your Application

Investing in Early Educators Stipend Program – Cycle 12B
Office of Child Care, SIB/CEO
County of Los Angeles
222 South Hill Street, 5th Floor
Los Angeles, CA 90012

For office use only			
Received/initially screened by:		Date received/initially screened:	
Received via:	❑ Walk-in ❑ Certified or Domestic Return Receipt ❑ U.S. Mail		
Status:	❑ Complete ❑ Incomplete		
Notes/Action:			

Reviewed by:		Date reviewed:	
Status:	❑ Pending ❑ Rejected		
Notes/Action:			