Child Care Resource & Referral of Midwestern Illinois 3800 Avenue of the Cities, Suite 102/ Moline, IL 61265 309-205-3070

July 1, 2022 -June 30, 2023

Revised July 2021, August 2022







Illinois supports the continuing professional development of child care practitioners. In partnership with the Child Care Resource & Referral (CCR&R) agencies, the Illinois Department of Human Services' Division of Early Childhood (IDHS-DEC) is providing funds to assist an individual in pursuit of professional development in early care and education and school-age care. For the purposes of this document:

- "child care program" or "program" includes child care centers and family child care
- Current /currently is defined as the time of application

1. WHO CAN APPLY?

- Individual practitioners currently employed by center-based programs or family home programs (licensed or license exempt) that provide care as defined by the Illinois Department of Children and Family Services (DCFS). Individual practitioners include child care center directors, early childhood teachers/assistant teachers, school age teachers/assistant teachers, family home providers and assistants. In addition, child care center support staff (e.g., cook, driver) when appropriate.
- Applicant must be a current member of the Gateways to Opportunity Registry (Registry). Registry membership is free. Practitioners may sign up for the registry at www.ilgateways.com.
- The child care program must be listed on the CCR&R provider referral database and must currently be providing care in one of the following Illinois counties or the following Illinois counties: Henderson, Henry, Knox, McDonough, Mercer, Rock Island, and Warren.
- The child care program must have no unpaid financial obligation to the CCR&R agency or the IDHS-DEC Bureau of Subsidy Management or Bureau of Quality Initiatives

2. ARE THERE PRIORITY PROGRAMS?

- As applications are received, priority is given to programs currently caring for 50% or more children whose care is paid for by the IDHS Child Care Assistance Program (CCAP).
- Programs that are full year (at least 47 weeks)/full day (at least 8 hours).
- Programs that are currently caring for infants and toddlers.

3. WHAT IS INDIVIDUAL PROFESSIONAL DEVELOPMENT?

The advancement of knowledge in the field of early childhood/school age for an individual practitioner.

4. WHAT CAN INDIVIDUAL PROFESSIONAL DEVELOPMENT FUNDS BE REQUESTED FOR?

- Individual registration fees associated with conferences/workshops not required by ExceleRate Illinois.
- The conference/workshop must be off-site from your place of employment and must be related to early care and education, school-age care or child care administration/management.
- Fees associated with webinars/online training that is Illinois Gateways to Opportunity Registry-approved.
- Travel/Transportation cost (see application for additional information).
- Lodging cost.
- Costs associated with the following credentials:

Child Development Associate (CDA)
 Weww.cdacouncil.org
 Certified Child Care Professional (CCP)
 Www.necpa.net
 1-800-424-4310
 1-800-458-2644

5. WHAT CAN'T FUNDS BE REQUESTED FOR?

- College tuition assistance. Tuition assistance is available through the Illinois Gateways Scholarship Program. For information on the Gateways tuitions assistance visit www.ilgateways.com or call 866-697-8278.
- Workshops required under the ExceleRate Bronze, Silver or Gold Circle of Quality. Visit <u>www.excelerateillinois.com</u> for a complete listing.
- Conference/workshops in which Child Care Resource & Referral of Midwestern Illinois is the fiscal agent (i.e., registration fees are paid to the CCR&R).

- Special events during a conference (e.g., concert, recognition event, reception, etc.).
- The cost of meals or refreshments (unless included in basic registration fee).
- Group/staff training on-site or off site arranged by a provider group or child care program.
- Out of state conferences/workshops. Including registration and travel costs.
- Conferences/workshops in which the primary focus in political advocacy and/or sectarian (religious) instruction.
- Advisors, Consultants or Mentors.
- Substitute care.
- Membership fee to a professional organization.

6. WHAT ARE FUNDING MINIMUMS/MAXIMUMS?

- The minimum request is \$15.
- The maximum funding amount per event/credential is 80% of the actual cost, as funding allows.
- The maximum funding amount available per person is up to \$500 per fiscal year (July 1 June 30).
- Additional information is on the application, Step 2.

7. WHAT IS THE APPLICATION PROCESS?

- Individuals complete and submit an application along with the required supporting documentation (see question 8).
- As applications are received, priority is given to programs currently caring for 50% or more children whose care is paid for by the IDHS CCAP.
- The CCR&R will notify you in writing if your application has been approved or denied, and if approved, the amount in which your request was funded.

8. WHAT SUPPORTING DOCUMENTATION IS NEEDED?

Italicized items are required at the time of application. Remaining documentation is to be submitted to CCR&R within 30 days of the event date and/or completion date.

- Proof of Gateways Registry membership (i.e. copy of membership ID or Professional Development Record).
- Announcement and/or outline and description for conference/workshop/online course. Announcement must include fees/cost and sponsoring entity.
- W-9 form (the form is available at <u>www.irs.gov</u>).
- Receipt/proof of payment for registration and/or credential fees.
- Documentation of attendance/completion.
- If applicable confirmation/receipt for lodging and/or transportation costs (train, bus).
- If applicable printout documenting trip mileage (e.g., Google Maps, Yahoo Maps, etc).

9. HOW IS PAYMENT MADE?

- You will be notified in writing if your application has been approved or denied, and if approved, the amount in which your request was funded.
- Payments will be made and mailed directly to the individual or the child care program named in Step 3 Payment Information Section of the application.
- Individuals/programs that receive payment will be responsible for W-9 documentation and taxes.
- Payment cannot be made until a complete application and required documentation is received.

10. WHAT IS THE DEADLINE FOR SUBMITTING MY APPLICATION?

- Ongoing as funds allow.
- Please see question #8 regarding remaining required supporting documentation due within 30 days after the event.
- CCR&R will receive applications + supporting documentation throughout the year; however, for applications to be considered, all applications + supporting documentation must be received at the CCRR by **June 23rd**, **2023**.

11. WHERE ARE APPLICATIONS SUBMITTED?

CCR&R of Midwestern Illinois / 3800 Avenue of the Cities, Suite 102 / Moline, IL 61265
 Fax: 309-517-6869 / E-Mail: kstickell@salcommunityservices.org

12. FOR MORE INFORMATION OR TO ANSWER FURTHER QUESTIONS, PLEASE CONTACT:

Kimberly Stickell / (309) 205-3070, ext. 4009

13. DO THE FUNDS NEED TO BE REPAID?

- This is a grant program, which means funds do not generally need to be paid back. However, the grant funds come from the State of Illinois, and certain policies and procedures must be followed.
- In the event that payment is made for a conference/workshop, but you or an alternate are unable to attend, the individual/child care program will need to work with the CCR&R regarding the return of funds.
- In the event that payment is made for a credential and the individual withdraws or does not complete the process, the individual/child care program will need to work with the CCR&R regarding the return of funds.
- In the event payment is made for a credential and the program withdraws or does not complete the process (defined as the required steps), the child care program will need to work with the CCR&R regarding the return of funds.
- In the event of over or improper payment or reimbursement, appropriate arrangements will need to be made with the CCR&R regarding return of funds.

14. WHAT ELSE DO I NEED TO KNOW?

Application, payment for activity, and activity must occur within the current funding cycle (7/1/22-6/30/23).

- Only completed applications will be considered.
- Applicants must use the provided application for July 2022-June 2023.
- Faxed/electronic applications will be accepted.
- Funding is limited and not guaranteed.
- Maximums are in place; however partial funding may be awarded.
- Payment cannot be made until a complete application and all required supporting documents are received.

Individual Professional Development Application Form

Child Care Resource & Referral of Midwestern Illinois 3800 Avenue of the Cities, Suite 102/ Moline, IL 61265 309-205-3070







July 1, 2022 – June 30, 2023

The current year application form must be used. This application may not be reformatted.

- → Please type or print using black or blue ink
- → Complete <u>all fields</u>; use "NA" if not applicable <u>do not leave any field blank</u>
- → Refer to the Individual Professional Development Instructions and Requirements

Be sure to	review the checkli	ist in Step 4					
STEP 1: App	olicant Informatio	n					
Applicant First	Name:			Applica	ant Last Name:		
Applicant Add	ress:		•				
City:	S	tate:	Zip Code:	:	Сс	ounty:	
Mailing addres	ss (if different):						
Program Phon	Program Phone #: ()			Email: O Personal O Program			
Gateways Reg	istry #						
Program is: O	Licensed Child Care Cent	er O License Exempt	t Child Care Ce	enter OL	icensed Family Child (Care OLicense Exempt	Family Child Care
Program (worl	k site) Name:				-		
Program (work	k site) Address:						
City:		State: IL	Zip Co	Code: County:			
What date did	l you begin employm	nent at this site?	Mor	nth:	oth: Date: Year:		
Role: check th	e one that best desc	ribes your curren	nt position:				
O Director / Administrator	O Assistant Director	O Director / Teacher	O Teacher	r	O Assistant Teacher	O Substitute / Floater	O Other:
O Family Child Care (FCC)	O FCC Assistant	O Group FCC Provider	O Group F Assistant	÷CC	O School Age Child Care Teacher	O School Age Child Care Assistant	
Age group YO	U currently provide o	care for (center st	taff, check í	1 primar	y age range; FCC	providers check al	l that apply):
O Infants 6 wks – 14 mos	O Toddlers 15-23 mos.	O Twos 24-35 mos	O Prescho 3-5 years	ool	O School Age K-12 years	O Not Applicable	
	ne <i>Program Administ</i> iving IDHS child care	•		g formu	la to determine tl	he percentage of c	hildren in your
	Total Number of child				•		•
enrollment)	ercentage of Childre	n Receiving IDHS	Assistance.	. (РСС р	roviaers: incluae	your own children	, under age 13, in
		÷			X 100 =		. %
	# of IDHS Children	1 Current	t Total Enro	llment	Percen	ntage of IDHS Child	iren

Date(s) attending:

STEP 2: Funding Request Information

- The minimum request is \$15
- The maximum funding amounts per event/credential listed in the charts below, and
- The maximum funding amount available per person is up to \$500 per fiscal year (July 1 June 30)

To be eligible for travel and/or lodging funding:

- Event location must be at least 60 miles (one way) from the individual's place of business
- Travel, when requesting mileage, only applies to the principal driver
- Lodging is available up to two nights

Name of event:

2A: Workshop/On Line Training / Conference

	City: Sta	ate: Co	ounty:
I am requesting Professional Development	Funds to (check all that apply):	Conference/ Workshop	Credential
Implement better practices/program improv	rements		
Meet DCFS training requirements			
Meet CCAP Health & Safety training requirer	nents		
Obtain qualifications for a new position			
To obtain a credential (new or renewal)			
Meet accreditation standards			
Other (list):			
Training Hours and type of credit (check all	that apply):	Check Type	# of hours
DCFS clock hours			
Continuing Education Units (CEUs)			
Child Development Associate (CDA) clock ho	urs		
Continuing Professional Development Units	(CPDU)		
Other (list):			
Total Amount(s) Requested		CCR&R MAX	Actual Cost
☐ Workshop /Off-Site Training Registration			\$
 Webinars/Online Training Modules Regi 	stration Fee	80% of the	\$
			-
☐ Conference Registration Fee			\$
Conference Registration FeeTravel/Transportation (mileage / train /	bus)	actual cost,	-
☐ Travel/Transportation (mileage / train /	bus)	actual cost, as funding	\$
☐ Travel/Transportation (mileage / train / Mileage reimbursed @/mile.		actual cost,	\$
☐ Travel/Transportation (mileage / train / Mileage reimbursed @/mile.	XX = Actual Cost	actual cost, as funding	\$
☐ Travel/Transportation (mileage / train / Mileage reimbursed @/mile. Actual mileage one way x 2= x .> ☐ Lodging: maximum nights, up to # per e	XX = Actual Cost vent	actual cost, as funding	\$
☐ Travel/Transportation (mileage / train / Mileage reimbursed @/mile. Actual mileage one way x 2= x .> ☐ Lodging: maximum nights, up to # per e Cost per night \$ x nights = Actual	XX = Actual Cost vent	actual cost, as funding	\$
☐ Travel/Transportation (mileage / train / Mileage reimbursed @/mile. Actual mileage one way x 2= x .> ☐ Lodging: maximum nights, up to # per e Cost per night \$ x nights = Actual TOTAL AMOUNT	XX = Actual Cost vent	actual cost, as funding	\$ \$
☐ Travel/Transportation (mileage / train / Mileage reimbursed @/mile. Actual mileage one way x 2= x .> ☐ Lodging: maximum nights, up to # per e Cost per night \$ x nights = Actual TOTAL AMOUNT	XX = Actual Cost vent al Cost	actual cost, as funding	\$ \$
☐ Travel/Transportation (mileage / train / Mileage reimbursed @/mile. Actual mileage one way x 2= x .>	XX = Actual Cost vent al Cost	actual cost, as funding allows	\$ \$ \$

2B: CREDENTIAL

For credential	funds request, complete below:		Actual Cost	CCR&R Max 80%	Amount Requested
Child Developm	ent Associate (CDA)		Costs are as of July 1, 2020 per respective websites		
	Assessment Fee (\$425 on line/ \$500 for paper)		\$425/\$500	\$340/\$400	\$
	Credential Renewal Fee (\$150 for paper / \$125 for onlin	e)	\$150/\$125	\$120/\$100	\$
Certified Childo	are Professional (CCP)				
	Credential Fee		\$350	\$280	\$
	Credential Renewal Fee		\$49.95	\$40	\$
	ate 80%, multiple the actual cost by 0.80)			000/	4
CARE Cours			varies	80%	\$
	Training Course		varies	80%	\$
CCP Online			varies	80%	\$
Course Title(s):	□CDA Online □CCP Online				
Course ritle(s).					
TOTAL ANAOUN	T DECULECTED AD				<u> </u>
TOTAL AMOUN	T REQUESTED 2B				\$
STEP 3: Payme	ent Information				
Have you received	d funding from another source to assist with conference, v	workshop, or	credential fee	s? NO	YES
If yes evolain and	l list amount:	·			
					
Request is being r	made for (check all that applies):				
☐ Workshop	On-line Conference Credential				
If requesting	funding for travel/transportation and or lodging, provide	the following	information:		
Mode of	transportation:	sus 🗌 Ot	her		
			0		
•		-	·		
•	REQUESTED (2A + 2B) \$	25 11 yes, wii	<u> </u>		
Requesting paym	ent(s) be made to:				
	Applicant Child Care pr	ogram			
Make Check Paya	hle To:				
Must match Box 1 of the					
Address	City	<u>:</u>	State:	Zip Code:	
	_				
Applicant Soc	ial Security Number/ or FEIN Number (REQUIRED):				
STEP 4: Ap	pplication Checklist and Authorization				
_					
	pleted all areas of the current application. If a question w	as not applic	able, I inserted	I N/A.	
	ed and dated my application. ched all required supporting documentation as noted in C	Juestion #9			
	of of Gateways Registry membership (i.e., copy of member		ofessional Dev	velopment Reco	rd).

 Announcement and/or include registration fee 		conference/workshop/online course. Anno	uncement must				
	available at <u>www.irs.gov</u>).						
•	ent for registration and/or c	redential fees					
 Documentation of atternal 	_	redeficial rees.					
		or transportation costs (train, bus).					
	If applicable printout documenting trip mileage (e.g., Google Maps, Yahoo Maps, etc.)						
**	on I have submitted is correct						
	his application for my record						
_	and agree to FAQ #13 (retu						
	=	•	daaumantatian)				
will delay the review pro		nswering questions or attaching supporting of	documentation)				
information is true and accurate, the my employees (if applicable) are not	at I have not been indicated I listed on the child abuse tra n and Family Services or thei	nstructions and requirements. I certify that a of child abuse and neglect and that my nam acking system. Further, I grant permission for ir agent to release information about my per se if applicable to my application.	e or the names of or a representative				
Applicant Signature	Date	Administrator Signature	Date				
→Payment cannot be made until a	complete application and r	-					
→Payment cannot be made until a	complete application and r apporting documentation mand r documents to: Ki Cl 38	equired documents are received.	nte rn Illinois e, IL 61265				
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→ Payment cannot be made until a → Deadline: Applications and all su Return application and all required	complete application and r apporting documentation mand r documents to: Ki Cl 38	required documents are received. Sust be received at CCR&R name by insert do Simberly Stickell Shild Care Resource & Referral of Midwester BOO Avenue of the Cities, Suite 102 / Molin	nte rn Illinois e, IL 61265				
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