



## Mini-Grant Application

Welcome to the First 5 Sonoma County Mini-Grant Application!

First 5 Sonoma County's Mini-Grant Program provides small grants up to \$1,500. There is no minimum request required. If you receive a mini-grant, you will have until June 30, 2022 to complete your purchases for your mini-grant project. Your mini-grant project must fit within the eligibility guidelines to be considered for funding.

### ELIGIBILITY

Applications will be accepted from:

Small licensed family child care providers (serving up to 8 children) located in Sonoma County who care for at least one infant or toddler aged 0 to 24 months

Large licensed family child care providers (serving up to 14 children) located in Sonoma County who care for at least one infant or toddler aged 0 to 24 months

Early childhood professionals or license-exempt caregivers who are not currently receiving or eligible for scholarships from the Quality Counts CARES/Pathways program, and who are planning to enroll in higher education courses in Spring 2022 or Summer 2022 focused on child development and caring for infants and toddlers.

Early childhood professionals or license-exempt caregivers may apply for up to \$1,000 for professional development in infant and toddler curriculum, coursework, books and or materials to participate in coursework or workshops.

### ELIGIBLE ACTIVITIES

Applicants may apply for the following one-time purchases to improve the early learning environment for infants/toddlers:

Curriculum, materials, equipment such as indoor or outdoor play equipment (outdoor equipment must support a natural outdoor play and learning environment - i.e. no play structures), books, educational tools including computer hardware or software.

AND/OR funding for Professional Development in the following areas:

Enrollment in appropriate training opportunities (coursework, trainings, workshops focused on child development for infant/toddler care, or infant/toddler trauma informed care, books or materials needed for participation in coursework or workshops for infant/toddler child development or trauma informed care, technical assistance that supports professional development for childcare business (bookkeeping, contract development, infant CPR, Infant health and safety, or other related certifications).

### FUNDING LIMITS

Licensed Large Family Childcare providers may request up to \$1,500 and Licensed Small Family Childcare providers may request up to \$1,000. Early childhood professionals or license-exempt caregivers may request up to \$1,000 for professional development in infant and toddler curriculum.

#### APPLICATION REQUIREMENTS

In order to be considered for funding, your proposal must include:

A completed Application Form (through SurveyMonkey, or on paper)

A completed Budget Section of application

With supporting documents for requested purchases (screenshot or items showing cost, picture, printout, etc.)

Proof of child care licensing (if applicable)

**\*Your application will not be funded if the application is not complete.**

#### SUBMISSION DEADLINES

The application submission period is January 3– January 24.

Applications must be submitted by 5:00 p.m. on the last day of the application.

Submit application to:

[funding@first5sonomacounty.org](mailto:funding@first5sonomacounty.org), or

5340 Skylane Blvd.

Santa Rosa, CA 95403

#### \* 1. Type of Childcare Provider

- Large Licensed Family Childcare Provider (up to 14 children)- **COMPLETE pages 3, 4, 5, 6, 7**
- Small Licensed Family Childcare Provider (up to 8 children)- **COMPLETE pages 3, 4, 5, 6, 7**
- Childcare Professional or Family Friend or Neighbor Provider seeking infant/toddler professional development- **COMPLETE pages 8, 9, 10**
- None of these apply - \*If you are not a small or large licensed family childcare provider, or childcare professional or family friend and neighbor license exempt provider, you are not eligible at this time.



Mini-Grant Application

Mini-Grant Application for Small and Large Licensed Childcare providers

\* 2. As of January 1, 2022, how many children are in your care in each age group?  
To be eligible for this grant opportunity you must be caring for at least one child under 2 years old.

Number of children in each age group

0-2 years	<input type="text"/>
3-5 years	<input type="text"/>
Over 5 years	<input type="text"/>

\* 3. Applicant Contact Information

Applicant Name	<input type="text"/>
Agency or Childcare Name	<input type="text"/>
Address	<input type="text"/>
Address 2	<input type="text"/>
City/Town	<input type="text"/>
ZIP/Postal Code	<input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>

\* 4. What school attendance area are you providing care in, or closest to?

<input type="text"/>
<input type="text"/>

\* 5. Childcare licensing number

6. Improved **early learning environment** grant request: Describe how you plan to use the funds to improve the early learning environment for infants and toddlers in your care if awarded.

7. How will this grant improve the quality of your **early learning environment** for infants and toddlers?

8. **Professional development** support grant request: Describe how you plan to use the funds if awarded to support your professional development in infant and toddler care.

9. How will this grant support your **professional development** to improve your practice in infant and toddler care?

10. If you are awarded this grant, how will the children in your care be better off?

(In your own words, how does this grant award/project help you provide quality care to children, or how does this grant help the children in your care? - your eligibility for this project will NOT be determined by your response - keep it simple! This section is intended for First 5 to be able to share the impact of the grant.)

\* 11. Please describe which items you are seeking funding for under each category. If purchasing multiple items, please include the number. Do not enter the cost in this section.

\*Please note, consumable items are not eligible for purchase (i.e. diapers, paint, cleaning supplies)

a. Early learning environment - **Curriculum**

b. Early learning environment - **Materials**

c. Early learning environment - **Equipment**, such as indoor or outdoor play equipment (outdoor equipment must support a natural outdoor play and learning environment - i.e. no play structures)

d. Early learning environment - **Books**

e. Early learning environment - **Education tools** including computer hardware or software

f. Professional development - **Enrollment in training, workshop, or coursework** focused on child development for infant/toddler or trauma informed care with a focus on infant/toddlers

g. Professional development - **Books or materials** needed for participation in coursework, training or workshop for infant/toddler child development or trauma informed care

h. Professional development - **Technical assistance or training** that supports professional development for the childcare business (bookkeeping, contract development, infant CPR, infant health and safety, or other related certifications)

i. Other (please describe) - items that do not fit in other categories may not qualify for funding

\* 12. For any item you are requesting, please explain the costs including an estimate of tax and shipping costs. If you are purchasing multiple items in a category please provide the cost per item and the total cost for all items.

a. Early learning environment - **Curriculum**

b. Early learning environment - **Materials**

c. Early learning environment - **Equipment**

d. Early learning environment - **Books**

e. Early learning environment - **Education tools**

f. Professional development - **Enrollment in training, workshop, or coursework**

g. Professional development - **Books or materials**

h. Professional development - **Technical assistance or training**

i. Other

\* 13. What is the total grant amount you are requesting?

#### 14. **Verification of expenses**

Attach detailed information for each item you are requesting in the grant. For example, provide a page copied from a catalog, screen shot from website, or other verification that describes the item and lists its price. All items must be included.

\*Please include the verification of expenses when you submit your application either by email to [funding@first5sonomacounty.org](mailto:funding@first5sonomacounty.org), or you can come to the First 5 office to make copies, hand deliver or mail to the First 5 office at 5340 Skylane Blvd. Santa Rosa, CA 95403.

#### 15. **Copy of Childcare license**

\*Please include the verification of license when you submit your application either by email to [funding@first5sonomacounty.org](mailto:funding@first5sonomacounty.org), or you can come to the First 5 office to make copies, hand deliver or mail to the First 5 office at 5340 Skylane Blvd. Santa Rosa, CA 95403.

\* 16. I have reviewed my application and it is complete and ready to submit for review. To the best of my knowledge and belief, information in this application is true and correct.

Yes

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date



## Mini-Grant Application

### Mini-Grant Application for Early Childhood Educators and Caregivers

\* 17. Select the category that best describes your situation.

- Early Childhood Educator/Professional
- Early Childhood Caregiver (license-exempt family friend and neighbor childcare provider)

\* 18. As of January 1, 2022, how many children are in your care in each age group?

To be eligible for this grant opportunity you must be caring for at least one child under 2 years old.

Number of children in each age group

0-2 years	<input type="text"/>
3-5 years	<input type="text"/>
Over 5 years	<input type="text"/>

\* 19. Applicant Contact Information

Applicant Name	<input type="text"/>
Agency or Childcare Name	<input type="text"/>
Address	<input type="text"/>
Address 2	<input type="text"/>
City/Town	<input type="text"/>
ZIP/Postal Code	<input type="text"/>
Email Address	<input type="text"/>
Phone Number	<input type="text"/>

\* 20. What school attendance area are you providing care in, or closest to?

  

21. **Professional development** support grant request: Describe how you plan to use the funds if awarded to support your professional development in infant and toddler care.

22. How will this grant support your **professional development** to improve your practice in infant and toddler care?

23. If you are awarded this grant, how will the children in your care be better off?  
(In your own words, how does this grant award/project help you provide quality care to children, or how does this grant help the children in your care? - your eligibility for this project will NOT be determined by your response - keep it simple! This section is intended for First 5 to be able to share the impact of the grant.)

\* 24. Please describe which items you are seeking funding for under each category. If purchasing multiple items, please include the number. Do not enter the cost in this section.

f. Professional development - **Enrollment in training, workshop, or coursework** focused on child development for infant/toddler or trauma informed care with a focus on infant/toddlers

g. Professional development - **Books or materials** needed for participation in coursework, training or workshop for infant/toddler child development or trauma informed care

h. Professional development - **Technical assistance or training** that supports professional development for the childcare business (bookkeeping, contract development, infant CPR, infant health and safety, or other related certifications)

i. Other (please describe) - items that do not fit in other categories may not qualify for funding

\* 25. For any item you are requesting, please explain the costs including an estimate of tax and shipping costs. If you are purchasing multiple items in a category please provide the cost per item and the total cost for all items.

f. Professional development - **Enrollment in training, workshop, or coursework**

g. Professional development - **Books or materials**

h. Professional development - **Technical assistance or training**

i. Other

\* 26. What is the total grant amount you are requesting?

## 27. Verification of expenses

Attach detailed information for each item you are requesting in the grant. For example, provide a page copied from a catalog, screen shot from website, or other verification that describes the item and lists its price. All items must be included.

\*Please include the verification of expenses when you submit your application either by email to [funding@first5sonomacounty.org](mailto:funding@first5sonomacounty.org), or you can come to the First 5 office to make copies, hand deliver or mail to the First 5 office at 5340 Skylane Blvd. Santa Rosa, CA 95403.

\* 28. I have reviewed my application and it is complete and ready to submit for review. To the best of my knowledge and belief, information in this application is true and correct.

Yes

\_\_\_\_\_  
Signature of Applicant

\_\_\_\_\_  
Date