



OFFICE OF CHILD CARE AND REGULATORY SERVICES

CHILD CARE GRANT APPLICATION

ENERGY

OUTDOOR PLAY

EDUCATION

HEALTH

TO APPLY:

1. Download this grant application from the Department of Human Services website (www.dhs.gov.vi) on the Child Care and Regulatory Services page (www.dhs.gov.vi/occrs/index.html).
2. Complete each application thoroughly.
3. Mail, email, or place the completed application in a drop box location identified below:

MAIL TO:

St. Thomas/St. John District – Office of Child Care & Regulatory Services 1303
Hospital Ground, Knud Hansen Complex Bldg. A Suite 1
St. Thomas, Virgin Islands 00802

St. Croix District – Office of Child Care & Regulatory
Services #129 Golden Rock
Christiansted, St. Croix Virgin Islands

EMAIL TO: childcarevagrants@dhs.vi.gov

DROP-OFF LOCATIONS:

St. Thomas/St. John District – Office of Child Care & Regulatory
Services 1303 Hospital Ground, Knud Hansen Complex Bldg. A Suite 1
St. Thomas, Virgin Islands 00802

St. Croix District – Office of Child Care & Regulatory
Services #129 Golden Rock
Christiansted, St. Croix Virgin Islands

If you have questions about the application, please contact us at:

St. Croix District

Debbie Jagrup

(340) 772-7147

Email: debbie.jagrup@dhs.vi.gov

St. Thomas District

Lori Pickering

(340)774-0930 extension 4186

Email: lori.pickering@dhs.vi.gov



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Check the box next to each grant for which you are applying

SECTION I. GENERAL APPLICANT INFORMATION

Items with * are required and must be completed.

*1.	Owner Name		
*2.	Child Care Program Name (Each site requires a separate application)		
*3.	Legal Business Name		
*4.	Physical Address		
*5.	Mailing Address		
*6.	OCCRS issued License #	*7.	Active SAM.GOV Registration <input type="checkbox"/> YES <input type="checkbox"/> NO
*8.	EIN # (Employer Identification Number)	*9.	TIN# (Taxpayer Identification Number)
		*10.	UEI# (Unique Entity Identifier)
*11.	Primary Telephone Number	Alternative Telephone Number	Email Address
OPTIONAL (Item is not utilized as qualification factors and are used for statistical purposes only)			
12.	Owner Ethnicity	13.	Owner Race
		14.	Owner Gender

SECTION II. OPERATIONAL STATUS AND CHILD COUNT

*15.	Facility Type (Select all that apply) <input type="checkbox"/> Day Care Center <input type="checkbox"/> Group Day Care Home <input type="checkbox"/> Family Day Care Home <input type="checkbox"/> Afterschool <input type="checkbox"/> Summer Camp <input type="checkbox"/> Residential Home Program License-Exempt (Regulated)	*16.	Number of children facility is authorized to serve: ___ Infant (0 to 1 year) ___ Toddler (2 to 3 years) ___ Preschool (4 to 5 years) ___ School Age (5 to 13 years)
*17.	<input type="checkbox"/> Open <input type="checkbox"/> Temporarily Closed due to public health, financial hardship, or other reasons relating to the coronavirus disease 2019 (COVID19) public health emergency. Please give details about the temporary closure and planned date to reopen: (please attach page(s) with details).		
*18.	Days of Operation: _____ Hours of Operation: _____		
*19.	Does your program meet Child Care and Development Fund health and safety requirements including the completion of comprehensive background checks? <input type="checkbox"/> YES <input type="checkbox"/> NO		



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SECTION III. GRANT PROPOSED ITEMIZED BUDGETS

PLEASE SUBMIT AN ITEMIZED BUDGET FOR EACH GRANT FOR WHICH YOU ARE APPLYING.

MAXIMUM GRANT AWARD AMOUNTS

(You may apply for less than the maximum amount but not more)

OUTDOOR PLAY: \$35,000 Maximum

To support the improvement of quality childcare environments by providing funds to enhance outdoor play environments in licensed childcare facilities. Funds are to be used for safe, accessible play equipment to encourage outdoor activities to help children meet developmental tasks with appropriate adult supervision.

ENERGY: \$40,000 Maximum

To support the improvement of childcare providers' ability to respond to and maintain resilience, including continuity of operations during disasters or varying scales. In consideration of the jurisdiction's geographic location and elevated vulnerability to natural disasters such as hurricanes, funds are to be used to secure energy sources that remediate disruption of quality childcare services due to power service interruptions.

EDUCATION: \$30,000 Maximum

To support the childcare workforce by providing funding for additional training and credentials which research has shown to have positive effects on quality of childcare.

QUALITY - HEALTH & SAFETY: \$3,000 Maximum

To build/rebuild the supply of licensed childcare providers by covering the costs of fees directly related to renewing childcare licensure in the US Virgin Islands. Funds may also be used to support childcare providers who closed due to COVID-19 with the fees associated with reopening.

IMPORTANT

- ✓ Please submit an application for each location for which you are seeking grant funds.
- ✓ Itemize your budget. Show how you intend to spend the funds. Lump sum budget submittals will not be approved. As much as possible, provide quotations for intended spending purchases.
- ✓ Attach a separate budget sheet for each grant for which you are applying. If you are applying for all 4 grants, you must attach 4 budget sheets (1 for each grant)
- ✓ You are not required to apply for all 4 grants, just the ones you select.
- ✓ DO NOT COMBINE BUDGETS OR EXCEED THE MAXIMUM AMOUNTS. COMBINED BUDGETS AND BUDGETS THAT EXCEED THE MAXIMUM AMOUNTS FOR EACH GRANT WILL BE DISQUALIFIED FROM THE APPROVAL PROCESS.



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ITEMIZED BUDGET



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ITEMIZED BUDGET



SECTION V: CERTIFICATION/ATTESTATION

I agree to use the funds only for the categories and purposes indicated on this application and have marked the categories I plan to fund.

*****NOTE*****

*** You can move funds between categories within each grant without prior approval.***

For example, you may spend more on Food Handlers Cards than on Permits as budgeted in the same grant.

***You cannot move funds between grants. ***

For example: Energy grant funds cannot be used for Outdoor Play expenses.

I also understand that it is my responsibility to maintain records and other documentation to support the use of funds I receive (such as receipts), as well as to document my compliance with the requirements described below.

By signing this application, I am certifying that I will meet requirements throughout the period of the subgrant, including the following:

- A. When open and providing services, I will implement policies in line with guidance and orders from corresponding federal and territorial/local authorities and, to the greatest extent possible, implement policies in line with guidance from the U.S. Centers for Disease Control and Prevention (CDC).
- B. I will follow certain health and safety guidelines, at a minimum:
 - a. The prevention and control of infectious diseases (including immunizations); with respect to immunizations, the following provisions apply:
 - i. As part of their health and safety provisions in this area, Lead Agencies shall ensure that children receiving services under the CCDF are age-appropriately immunized. Those health and safety provisions shall incorporate (by reference or otherwise) the latest recommendation for childhood immunizations of the respective State, territorial, or tribal public health agency.
 - b. Notwithstanding this paragraph (a)(1)(i), Lead Agencies may exempt:
 - i. Children who are cared for by relatives (defined as grandparents, great grandparents, siblings (if living in a separate residence), aunts, and uncles), provided there are no other unrelated children who are cared for in the same setting.



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- ii. Children who receive care in their own homes, provided there are no other unrelated children who are cared for in the home.
 - iii. Children whose parents object to immunization on religious grounds.
 - iv. Children whose medical condition contraindicates immunization.
 - c. Lead Agencies shall establish a grace period that allows children experiencing homelessness and children in foster care to receive services under this part while providing their families (including foster families) a reasonable time to take any necessary action to comply with immunization and other health and safety requirements.
 - i. The length of such grace period shall be established in consultation with the Federal and Territorial health agency.
 - ii. Any payment for such child during the grace period shall not be considered an error or improper payment under subpart K of this part.
 - iii. The Lead Agency may also, at its option, establish grace periods for other children who are not experiencing homelessness or in foster care.
 - iv. Lead Agencies must coordinate with licensing agencies and other relevant State, Territorial, Tribal, and local agencies to provide referrals and support to help families of children receiving services during a grace period comply with immunization and other health and safety requirements;
 - d. Prevention of sudden infant death syndrome and use of safe sleeping practices;
 - e. Administration of medication, consistent with standards for parental consent;
 - f. Prevention and response to emergencies due to food and allergic reactions;
 - g. Building and physical premises safety, including identification of and protection from hazards, bodies of water, and vehicular traffic;
 - h. Prevention of shaken baby syndrome, abusive head trauma, and child maltreatment;
 - i. Emergency preparedness and response planning for emergencies resulting from a natural disaster, or a man-caused event (such as violence at a child care facility), within the meaning of those terms under section 602(a)(1) of the Robert T. Stafford Disaster Relief and Emergency Assistance Act (42 U.S.C. 5195a(a)(1)) that shall include procedures for evacuation, relocation, shelter-in-place and lock down, staff and volunteer emergency preparedness training and practice drills, communication and reunification with families, continuity of operations, and accommodation of infants and toddlers, children with disabilities, and children with chronic medical conditions;
 - j. Handling and storage of hazardous materials and the appropriate disposal of biocontaminants;
 - k. Appropriate precautions in transporting children, if applicable;
 - l. Pediatric first aid and cardiopulmonary resuscitation;
 - m. Recognition and reporting of child abuse and neglect, in accordance with the requirement in paragraph (e) of this section; and



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- n. May include requirements relating to:
 - o. Nutrition (including age-appropriate feeding);
 - p. Access to physical activity;
 - q. Caring for children with special needs; or
 - r. Any other subject area determined by the Lead Agency to be necessary to promote child development or to protect children's health and safety.

C. I will keep a record of all receipts/invoices for items or services purchased with grant funds and have them available for audit and/or submission through September 30, 2027.

D. I agree to comply with the terms of this agreement and will return all funds not verified with appropriate receipts or proof of purchase.

E. I understand that failure to submit documentation may disqualify me from future grants administered through the Department of Human Services, Office of Child Care and Regulatory Services.

PROVIDER AFFIRMATION

The following signature affirms that I will adhere to the items noted in A through E. It also affirms I will only use the funds in the areas noted in section III of this application.

Provider Name: _____

Print

Signature