

Child Care Provider Emergency Grant Application



Guide for Grant Application Submission

The Nevada Department of Education (NDE), in partnership with The Children's Cabinet as its contracted agency for overseeing Child Care and Development Funds distribution, has implemented a structured process for monitoring community funding requests. The Children's Cabinet retains the authority to grant or deny funding in accordance with guidance from the NDE and Division of Welfare and Supportive Services (DWSS), community requirements, overarching objectives, and budgetary constraints set forth by the NDE.

I. Application Prioritization

- All applications will be prioritized based on the severity of the child care licensing violations.
- All applications must include documentation from child care licensing or another regulatory agency indicating the health & safety violation

II. Funding

- It is important to note that the submission of this application does not guarantee the provision of funding or the complete requested amount. The acceptance of federal funds implies an agreement to adhere to all state and federal grant regulations.
- If a provider closes or is sold within 12 months of receiving the funded equipment, the equipment must remain with the facility or be returned to The Children's Cabinet so the materials can be given to another provider.
- Receipts for all funds must be received within 30 days or the provider is at risk of repayment in full.

III. Application Submission

Submit your application and supporting documents by email in PDF format to: ecegrants@childrenscabinet.org

You may also submit all documentation in person or by regular mail to:

Northern Nevada:
The Children's Cabinet
Attn: Grants Department
961 Matley Lane; Suite 110
Reno. NV 89502

Southern Nevada The Children's Cabinet Attn: Grants Department 5905 S. Decatur Blvd. Suite 13 Las Vegas, NV. 89118

Southern Nevada
The Children's Cabinet
Attn: Grants Department
1771 E. Flamingo Road, Suite 200B
Las Vegas, NV. 89119



Child Care Provider Emergency Grant Application



All information is **required** for the application to be considered comprehensive and complete.

I. Applicant General Information						
Director/Owner Name:				Date of Application:		
Phone:	E-mail:					
Applicant Race* (select one): ☐ American Indian/Alaska Native ☐ Asian ☐ Black/African American ☐ Multirace				cant Ethnicity* ct one): spanic/Latino tt Hispanic/Latino	Applicant Gender* (please self-identify):	
* These items are necessary to fulfill state and federal statistical requirements.						
II. Provider Child Care Information						
Provider Type: ☐ Family Child Care ☐ Group Family Child Care ☐ Center ☐ Out of School Time						
Child Care Name:						
Mailing Address:		City:		County:	Zip:	
As Per Child Care License: Total Capacity #	Ages 0-12mo	Ages 12-	-24mo	Ages 24-36mo.	Ages 36-60mo	
Current Enrollment by Age Group:	Ages 0-12mo	Ages 12-	24mo	Ages 24-36mo.	Ages 36-60mo	
Name of Licensing Surveyor:	Ema	ail:				
III. Describe the details of the violation(s) and elucidate how the allocation of funds would enable you to mitigate the health and safety concern(s). IV. Grant Request Requested Amount: \$ How much of the requested amount have you secured: \$						
IMPORTANT: By signing below, I understand that funding support is dependent on funds available. I also understand that information contained on this form is subject to verification by The Children's Cabinet. Signature of Director/owner Printed Name Date						
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In the event you encounter a health and safety violation, or concern identified by child care licensing, or another regulatory agency endorsed by The Children's Cabinet, you have the opportunity to request financial assistance to address the issue. To facilitate the evaluation of your funding request, you are required to furnish the following documentation: Copy of your current child care license. Documentation from child care licensing or another regulatory agency indicating the health & safety violation or concern. Three (3) written estimates that outline both the timeline to complete the project and financial requirements for resolving the complaint or issue. The quotations must include a detailed list of the work that needs to be completed. The vendor must be licensed & bonded.						

Email Application & Documents in PDF Format or Word Document to: ecegrants@childrenscabinet.org