

City of Dallas
ECOSTS Provider Assistance Program

The City of Dallas (the “City”) is seeking to support City of Dallas (the “City”) Early Childhood and Out of School Time Services Providers (“ECOSTS”; “Providers) who have been adversely impacted by the COVID-19 pandemic. This program will specifically support Providers involved in the City’s ECOSTS program to provide funding for costs incurred specifically because of the pandemic and pandemic response activities as well as to offset the financial impacts due to increased cost or expense due to the pandemic.

Application Release Date: 11-23-2021

Application Close End Date: 12-07-2021

Eligible Participants: Providers that participate in the City’s ECOSTS Child Care subsidy program and Providers who have contracted with the City to provide childcare services for targeted populations through the City’s Community Development Block Grant funds, including CV-COVID-19 funding and Consolidated Plan appropriations. Participants must meet the following qualifications:

- Be officially registered with the State, physically located, and operating in the City of Dallas
- Provider must be currently providing childcare and/or out-of-school time services to children enrolled in the City’s ECOSTS program and a vendor with the City serving participants through the City’s ECOSTS program or must be under contract with the City to provide Child Care/ECOSTS services
- Must be current on their City taxes
- All providers meeting these definitions as of October 1, 2021 are eligible to participate in the program. The City may enroll additional providers as vendors participating in the ECOSTS program throughout the program term. Newly enrolled Providers (after October 1, 2021) will be eligible to participate in the ECOSTS Providers Support Program once they have been a registered vendor and ECOSTS Program partner for a minimum of six months.
- Cannot receive duplication of benefits (DOB). Definition of DOB: occurs when a person, household, business, government, or other entity receives financial assistance from multiple sources for the same purpose, and the total assistance received for that purpose is more than the total need for assistance.

Ineligible Participants: Childcare providers who have ceased operations or are closed, excluding short-term or temporary closures resulting from an exposure or need for facility cleaning due to COVID-19.

Assistance to be Provided: Providers may request assistance when under the following conditions, with assistance provided based on availability. Two types of assistance are available.

- Type 1: Providers may request assistance to cover direct costs incurred for cleaning, personal protective equipment, furniture and protective barriers, or other items needed to support a safe environment and support social distancing in an amount of up to \$5,000

- Provider may request assistance for period dating March 2020 through 2021 calendar year
- Providers must be current ECOSTS subsidy program vendors at the time of their request, defined as providing service to one or more ECOSTS child and receiving payment for that child by the City in accordance with ECOSTS protocols
- Provider must provide a written statement outlining why the cost was necessary and responsive to the COVID-19 pandemic
- Providers may request this form only for expenses incurred during the time period in which they were participating in the ECOSTS program
- Provider must provide documentation of incurred costs, including receipts and/or invoices as well as general ledger and/or cashed checks
- Type 2: Providers may request assistance one time during the 2021 calendar year for a small grant to support staffing costs. Requests will be accepted via an application process administered by the City and awards will be provided based upon available funding in an amount of up to \$5,000 per facility.
 - **Eligible Uses of Funds:** This funding can be used to support any costs related to staffing, such as salaries and benefits, temporary staffing to increase capacity or offset staffing losses, hazard pay, or other staffing needs.

Participants will be required to complete an online application and provide proof of the following:

1. Proof of lost income and/or increase of expenses, and/or decrease in enrollment.
Examples of approved documentation:
 - Enrollment sheets for that shows decrease in enrollment (must also include the month prior and two months after the decrease)
 - P & L from the months prior to the loss and P & L from month that displays loss of net revenue
 - Expense sheets showing net revenue loss
2. Being current on City taxes.
3. Each qualified childcare provider must execute an agreement with the City of Dallas prior to receipt of award.

INITIAL APPLICATION QUESTIONS

To qualify for the ECOSTS Provider Assistance Program, enrollment verification for a specific period of time in the months of February 2020 and April 2020 or September 2020 is required.

Acceptable forms of documentation:

- Enrollment sheets for February 3-7, 2020 and April 20-24, 2020 or for February 3-7, 2020 and September 21-25, 2020
- P & L from February and P & L from months that display loss of net revenue
- Expense sheets showing revenue loss

Please have required verification documents ready to upload to submit a complete application. Your application will not be processed until all supporting documents are received. Further documentation may be requested for verification.

Please note, the following questions are to determine your eligibility for the Childcare Provider Assistance Program.

1. Are you current on your City Taxes?
 - a. Yes, I am current on my City Taxes
 - b. No, I am not current on my City Taxes – I am not eligible and do not need to complete the application
2. Did you start operating your business on or **before** October 1, 2021? (Please note, new providers are eligible to apply after six months of becoming a provider)
 - o Yes, I started operating on or before October 1, 2021
 - o No, I started operating after October 1, 2021– I am not eligible and do not need to complete the application
3. Are you owned by a City of Dallas employee?
 - a. Yes, a City of Dallas employee owns this business – I am not eligible and do not need to complete the application
 - b. No, a City of Dallas employee does not own this business
4. Excluding short term or temporary closures resulting from an exposure or need for facility cleaning due to a diagnosis of COVID-19, are you currently open?
 - a. Yes, I am currently open
 - b. No, I am currently closed – I am not eligible and do not need to complete the application

APPLICATION QUESTIONS

1. Please Provide the following information:
 - Name of Childcare Provider (exactly as it appears on the Child Care Licensing website)
 - Phone Number
 - License Number (exactly as it appears on the Child Care Licensing website)
 - Website (if applicable)
 - Social Media Handles (if applicable)
2. Director/Owner
 - Name
 - Email Address (required)
 - Phone Number
3. Location
 - Address

- City
 - ZIP
4. Are you a for-profit or non-profit business?
 - a. For-profit
 - b. Non-profit
 5. Are you a minority- or women-owned company?
 - a. Yes, I am a minority- or women-owned company
 - b. No, I am not a minority- or women-owned company
 6. What was your total revenue for 2020?
 7. Have you experienced a loss of income since March 1, 2020 because of the pandemic?
 - a. Yes
 - b. No
 8. What was your enrollment as of March 1, 2020?
 9. What was your enrollment and date of decreased and enrollment number?
 10. What is your current enrollment?
 11. What is your City of Dallas Council District (select 1-14)? *Go to "Map of City of Dallas Council Districts" for details and to lookup by center address.
 - a. District 1
 - b. District 2
 - c. District 3
 - d. District 4
 - e. District 5
 - f. District 6
 - g. District 7
 - h. District 8
 - i. District 9
 - j. District 10
 - k. District 11
 - l. District 12
 - m. District 13
 - n. District 14
 12. Please select all the childcare quality ratings your program has:
 - a. TRS 2 Star
 - b. TRS 3 Star
 - c. TRS 4 Star
 - d. NAC
 - e. NAEYC
 - f. None of the Above
 - g. Other (please specify)
 13. For any not selected above, do you want to be contacted to learn more about quality ratings?

- a. Yes
 - b. No
14. How do you plan to utilize this grant funding? (check all that apply)
- a. Salaries, wages and benefits for staff
 - b. Additional needs related to COVID-19 (e.g., cleaning, PPE, technology)

By signing this document, I certify and self-attest that the information provided herein is true, accurate and complete to the best of my knowledge. I understand that any falsification, omission or concealment of a material fact may subject me to repay the funding that I receive. Any individual who knowingly or willfully makes, or causes to be made, false statement or representation of a material fact in any application may be prosecuted under federal and state criminal laws. By typing my name and date below, it constitutes my acceptance of the terms above.

Type Applicant Name and Title

Applicant Signature

Date