

Upper Cumberland CDBG-CV Child Care Creation Program

Sub-Application

General Information

Applicant: _____ Date of Birth: _____

Co-applicant (if applicable): _____ Date of Birth: _____

Business Name: _____

Address of Business: _____ Year Built: _____

SAM (System for Award Management) Registration through SAM.gov Yes No

SAM #: _____ *SAM registration not required for submission

FEIN #: _____

County:

Child Care type: In-Home
Facility
Other: _____

Facility Details: Own Location undetermined
Rent/Lease Location determined; pending purchase
Co-located in existing facility

Licensure:

Applicant Pre-licensed Licensed license # if applicable _____

Co-Applicant Pre-licensed Licensed license # if applicable _____

Current Child Care Capacity

a) Total number of existing children enrolled: _____

b) Total number of vacant slots: _____

c) Childcare capacity (a+b=c): _____

Will you be creating new childcare slots if awarded? Yes No If so, how many? _____

Current Staffing Capacity

- a) Total number of existing staff: _____
- b) Total number of vacant positions: _____
- c) Staffing capacity (a+b=c): _____

Will you be creating new positions if awarded? Yes No If so, how many? _____

How many low-income children does your daycare currently serve? _____

Will you increase the number of low-income children you serve if awarded? Yes No

Do you currently serve minority populations? Yes No

Will you increase the number of minority children you serve if awarded? Yes No

Eligible & Ineligible Activities

Due to the short expenditure deadline associated with these funds, only the following activities are eligible uses of funds:

- Acquisition of property (building/structure) to provide child care
- Rehabilitation of homes and facilities to meet licensure requirements and/or expand child care services
- Purchase of fixed equipment to meet licensure requirements, improve child care services and/or expand child care services
- Clearance or demolition of structures to meet licensure requirements or enhance operation

The following items are specifically ineligible under this program:

- New construction of facilities
- Supplies, chairs, tables, cribs, etc.
- Rental payments for facilities
- Recurring fees such as utilities
- Subsidies or supplement funding for tuition, enrollment fees, etc.
- Other cost associated with operations and management

Project Information

Grant Amount Requested: \$ _____

Applicant's Financial Contribution (if any): \$ _____ Source: _____

Total Project Cost: \$ _____

*Maximum grant award for an in-home daycare is \$75,000.
Maximum award for a stand-alone facility is \$500,000.

Describe in detail how you would utilize funding if selected as a sub-recipient of a Child Care Creation Program Grant through the Tennessee Department of Economic and Community Development:

Describe your existing child care business. How long have you been providing child care services, what are your operating hours, etc.? Discuss any changes to your future capacity as a result of this project (staffing and/or clientele):

As of today, how many businesses are directly impacted by your business? (Example: of the 10 children currently enrolled, their caregivers are employed by 9 different businesses in the community).

If awarded do you agree to enter into a Memorandum of Understanding (MOU) with the local government partnering with you on this project? Yes No

Previous Financial Assistance

Did you receive state or federal pandemic-related stimulus funds for child care activities? Yes No

If yes, list the source(s) of the funding and the total amount(s):

Small Business Administration (PPP, EIDL, etc.)

Childcare Development Fund

Other: _____

Total Amount of All Assistance: \$ _____

Describe how the funding was used and over what period of time:

Is there anything that you want us to know about your business that has not previously been asked?

Submission of this application does not guarantee funding. Environmental and design approval are required before any project can be properly advertised or bids for equipment and services collected. Any purchases made or expenses incurred prior to entering into a grant contact or without prior approval will not be eligible for reimbursement under this program.

Applicant Signature _____ Date _____

Co-applicant Signature _____ Date _____

All applications must be received by March 28, 2022
Completed applications can be emailed to childcare@ucdd.org, faxed to 931-476-4075, or delivered to:
Upper Cumberland Development District
1104 England Drive
Cookeville, TN 38501