



## Temporary Assistance for Stabilizing Child Care (TASCC)

### Grant Application

For Agency Use Only
Date Received: _____
Received By: _____
Date Approved: _____

**Section 1: General Information**

Name of Applicant: \_\_\_\_\_ AL STAARS Vendor Code: \_\_\_\_\_

Telephone Number: (    ) \_\_\_\_\_ Email Address: \_\_\_\_\_

Facility Name: \_\_\_\_\_

Licensee Name: \_\_\_\_\_ License Number: \_\_\_\_\_

Facility Physical Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Facility Mailing Address: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Licensed Capacity (as printed on current license): \_\_\_\_\_

Number of Enrolled Children on the Child Care Subsidy Program as of July 1, 2020: \_\_\_\_\_

Number of Funded Head Start and Early Head Start Slots as of July 1, 2020: \_\_\_\_\_

**Section 2: Calculation of an Estimate of Total Grant Amount**

_____	-	_____	-	_____	=	_____
Licensed Capacity		# of Subsidy Children		# of HS/EHS Slots		Total
_____	x	\$300	=	_____		
Total		Rate Per Child		Estimated Grant Total		

**Section 3: Budget Allocation Plan**

<i>Budget Allocation Categories</i>	<i>Estimated Allocation Amount</i>
Retaining or Hiring Employees and Substitute Teacher Pay	\$ _____
Classroom Materials and Supplies	\$ _____
Unreimbursed Food	\$ _____
Facilities Costs	\$ _____
Supplies to Adhere to CDC and ADPH Guidelines	\$ _____
Tuition Relief for Families	\$ _____
Other (prior DHR approval required)	\$ _____
<b>Total:</b>	<b>\$ _____</b>

**Section 4: Acknowledgement of Terms, Submissions, and Payment**

By submitting this Application for Temporary Assistance for Stabilizing Child Care made available through funding provided by the Coronavirus Aid, Relief, and Economic Security Act and/or accepting funds distributed pursuant to this Application, the undersigned, its employees, agents, subcontractors, and assigns certifies and agrees:

1. To be bound by any and all terms set forth in this Application and to use any and all funds distributed pursuant to this Application in the manner set forth below;
2. This Application does not create a contractual relationship with the State of Alabama or any of its Agencies and any failure to distribute funds pursuant to this Application does not create a cause of action nor does it carry any appeal rights;
3. To only expend the funds in a manner consistent with the budget allocation plan noted in the application with the exception that any line item category noted in the application may be over or underspent by an amount not to exceed ten percent and not exceeding the total amount of the payment approved;
4. To expend the total payment approved by December 31, 2020 and submit the expenditure report by Jan 31, 2021;
5. To be open or reopen no later than August 17, 2020;
6. To comply with all Minimum Standards for Daycare Centers and Nighttime Centers Regulations and Procedures or Minimum Standards for Family Day Care Homes, Family Nighttime Homes, and Group Day Care Homes, Group Nighttime Homes Regulations and Procedures;
7. To keep detailed, accurate and truthful accounting records of the receipt, use and disbursement of all funds received pursuant to this Application;
8. To allow DHR or its representatives unlimited access to audit and examine any and all records related to the funds disbursed pursuant to this Application, including, but not limited to, all records, reports, distributions, account ledgers, balance sheets, bank records, credit card statements, electronic payment records, receipts, or other documents related to the receipt and distribution of funds pursuant to this Application; failure to provide accurate documentation will be construed as filing a false statement;
9. To allow DHR or its representatives to interview any employee or agency in relation to funds disbursed pursuant to this Application;
10. That any funds received pursuant to this Application are subject to repayment, reclaim and recapture if (a) the funds are not used in the manner provided for and set forth in this Application by December 31, 2020, or (b) if access to records or information as set forth in the preceding paragraphs is refused or denied by the person(s) or entity receiving funds pursuant to this Application or, (c) if any information provided in the application is found to be false or misleading; any agency action in requesting or demanding repayment, reclaim, and/or recapture is a final determination and is not subject to appeal;
11. That this is an application for a continuing benefit under its existing child care license and its lawful presence in state of Alabama, to the extent required, has been previously established;
12. That if funding is reduced or restricted prior to distribution by legislative action, federal or state allocations, or executive action, the amount distributed under this Agreement will be reduced or eliminated accordingly;
13. That this Agreement does not and will not violate any conflict of interest provisions in any respect and agrees not to employ an individual that would result in a violation of this law;
14. Will not use any funds disbursed under this application for lobbying or any other prohibited use;
15. To comply with Executive Order No. 11246, as amended and as supplemented by U.S. Department of Labor regulations (41 CFR, Part 60-1, et. seq.), which prohibits discrimination based on race, creed, color, religion, national origin, sex, or age;
16. If any provisions or paragraphs of this Application are or become illegal, unenforceable, or invalid, in whole or in part for any reason, the remainder of this Application shall remain in full force and effect without being impaired or invalidated in any way;
17. The information included in this Application is true and correct to best of my knowledge;
18. The person whose signature is below is the applicant/owner/licensee or the authorized designee with the authority to sign the Application;
19. To remain open for a minimum of one year from the date of the grant award.

**Signature:** \_\_\_\_\_

**Date:** \_\_\_\_\_

**Printed Name:** \_\_\_\_\_

**Submit completed applications no later than August 7, 2020**

**Email:** quality.enhancement@dhr.alabama.gov    **Mail:** DHR / CCSD • ATTN: TASC Application  
50 N Ripley Street • Montgomery, AL 36130