



2024-2025 CHILD CARE START UP AND EXPANSION GRANTS

Application Instructions

The Office of Child Development and Early Learning (OCDEL) has announced the 2024-25 Start Up and Expansion Grants to expand child care opportunities in geographically underserved regions of the state. OCDEL partnered with the Penn State Institute of State and Regional Affairs (ISRA) to identify areas of the state with the most acute need. ELRC regions 1, 2, 3, 6, 8, 9, and 10 were identified. The intent of the grant is to provide additional opportunities for families to access child care in these ELRC regions; through newly established program locations, additional classrooms, or expanded service hours. The grant is paid through ELRCs on behalf of OCDEL, directly to eligible providers. For additional information, please see [ELRC Policy Announcement #24-03](#).

Support

Eligible providers are encouraged to contact one of the selected ELRCs with questions about the application process. ELRCs can support eligible providers with developing the application or addressing any concerns; however, to remain impartial, ELRCs cannot provide further guidance once an application is submitted for review.

Application Guidelines

Eligible providers must submit applications directly to their regional ELRC. Eligible providers can refer to the [2024-25 Child Care Start Up and Expansion Grants ELRC Submission Information](#) for details on where to submit a completed application. The selected ELRCs will accept applications from December 5, 2024, through January 31, 2025, and will score the applications as they are received. Applications received after January 31, 2025, will be considered ineligible.

Funding for this grant opportunity is limited and not all grant applications may be funded.

Each eligible provider location can apply for one grant. Legal entities operating multiple locations can apply for one grant for each of their eligible locations. Head Start and Early Head Start grantees with multiple locations can apply for one Type 1 Conversion Grant for each eligible location.

Scoring Rubric:

Applications will be reviewed by the ELRCs and scored on a 100-point rubric. Applications receiving a score of 70 points or more will be considered for funding.

- **Section 1: Provider Information (10 Points Maximum)**
 - Demographic/program-specific information about applicant and the type of grant.
 - 10 points: applicant completes the entire section with no missing information.
 - 5 points: applicant partially completes the section, but some required information is missing.
 - 0 points: applicant did not complete the section.
- **Section 2: Service Location (20 Points Maximum)**
 - Location information as to where the grant activities will occur. The information may be different than the address provided in Section 1 if an eligible provider is proposing a new program within their ELRC region.
 - The availability analysis completed by OCDEL and ISRA generated four levels of child care need. Points will be awarded based on the location of the program where grant activities will be conducted and the overall need for child care services in that area.
 - 20 points: Grant location is in an area of highest need.
 - 15 points: Grant location is in an area of high need.

- 10 points: Grant location is in an area of moderate need.
 - 5 points: Grant location is in an area of low need.
 - 0 points: Applicant did not complete the section or grant location is not in one of the designated ELRC regions.
- **Section 3: Grant Details (10 Points Maximum)**
 - Specific details on how grant funds will be utilized to increase child care availability.
 - 10 points: applicant completes the entire section, with no missing information.
 - 5 points: applicant partially completes the section, but some required information is missing.
 - 0 points: applicant did not complete the section.
- **Section 4: Project Overview (40 Points Maximum)**
 - Programs are required to provide a detailed summary of their plan to utilize grant funding. Applicants should include specific information about planned purchases, minor renovations, hiring additional staff, equipment upgrades, and other relevant activities. If additional staff are required to carry out the proposed activities, recruitment strategies should be included. Applicants should also detail how the new or expanded services will be sustained beyond the grant funding. Applicants can include information related to the current scope of child care availability in their local community and how their proposal will help improve the unmet needs of families in their community.
 - Applicants should include specific information about each of the following in their Project Overview, if applicable:
 - What type of grant are you applying for and how will this help expand child care availability in the selected ELRC region? How will this grant support additional child care options for families?
 - What is the current scope of child care availability in the community where the proposed grant activities will take place? Provide an overview of options for child care in the community you serve or plan on serving.
 - Planned purchases – What types of materials and equipment do you plan to purchase with grant funds and how will these materials and equipment be used in your program?
 - Minor renovations – What type(s) of renovations do you plan to complete using grant funds? How will these renovations support increased child care capacity in the program?
 - Hiring additional staff – Will you use funds for sign on bonuses? If so, what staff positions do you hope to fill using sign on bonuses? What recruitment strategies will you use to find qualified staff?
 - Business Practices – What types of purchases will you make with grant funding to support your business practices?
 - How will you sustain funding after the grant funds are expended? Explain your plans to continue offering child care to families once the grant funding is depleted.
- **Section 5: Budget (20 Points Maximum)**
 - Providers must use [Appendix A: Budget](#) to complete their Requested Budget; listing expenses appropriately by category and ensuring the total requested expenses do not exceed the maximum eligible grant amount outlined below. Providers will complete the Column labeled *Requested Budget* and sign/date the appropriate signature section. **NOTE: Appendix A: Budget must be submitted with the completed Application.**
 - Categories' subtotals must equal the total requested grant amount.
 - 20 points: **Appendix A: Budget** is submitted, and the *Requested Budget* column is complete. All line items are appropriately categorized and subtotals equal total grant request.
 - 10 points: **Appendix A: Budget** is submitted; but *Requested Budget* column includes

ineligible items or unreasonable cost estimates. Follow up will be required if the application is approved for funding.

- 0 points: **Appendix A: Budget** not submitted or submitted but *Requested Budget* column is blank.

• **Section 6: Bonus Points (5 Points Maximum)**

- Applicants indicating expanded services for any of the following categories will receive five bonus points to their total application score; however the total score of an application cannot exceed 100.
 - Care for Infants/Toddlers
 - Care for Children with Disabilities
 - Care for Dual/Multi Language Learners
 - Non-Traditional Care (offering care between 6:00PM and 6:00AM on weekdays and anytime on weekends)

Maximum Grant Amounts

Type 1 - Conversion Grant

Type 1 Conversion Grant Maximum Amounts		
Current Provider Type	Converting to DHS Certified Group Child Care Home	Converting to DHS Certified Child Care Center
DHS Certified Family Child Care Home	\$20,000	\$40,000
DHS Certified Group Child Care Home		\$40,000
Early Head Start / Head Start		\$30,000
Private Academic Nursery School		\$30,000

Type 2 – Expansion Grant

Type 2 Expansion Grant Maximum Amounts	
Provider Type	Maximum Grant Amount
DHS Certified Family Child Care Home	\$10,000
DHS Certified Group Child Care Home	\$25,000
DHS Certified Child Care Center	\$50,000

Type 3 - Start Up Grant

Type 3 Start Up Grant Maximum Amounts			
Eligible Providers	Maximum Grant Amount		
DHS-certified child care providers opening a new certified program while maintaining operation at an existing location.	New Certified Family Child Care Home	New Certified Group Child Care Home	New Certified Child Care Center
	\$15,000	\$40,000	\$75,000



Pennsylvania
Office of Child Development
and Early Learning

2024-25 Child Care Start Up & Expansion Grant Application
(For use by DHS-Certified Child Care Providers)

SECTION 1: PROVIDER INFORMATION

Name of Individual Completing Application:

Application Completion Date:

Position Title:

Current Location County:

Email Address:

Current Location ELRC Region:

Phone Number:

Current Licensed Capacity:

Address of Current Certified Child Care Location:

Current Total Enrollment:

Current Provider Name:

Current Care Levels Served:

Infants Toddlers Preschool School-Age

Current Master Provider Index (MPI) Number:

Grant Type Requested:

Current Provider Type:

- Family Child Care Home
- Group Child Care Home
- Child Care Center

Grant Amount Requested:

Current Operating Schedule: Enter open hours of operation below.

	Hour of Day	AM/PM	Hour of Day	AM/PM
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				
SATURDAY				
SUNDAY				

SECTION 2: SERVICE LOCATION

Will the grant activities occur at the current certified child care location indicated in Section 1? Yes No
If No, please provide the address of the new proposed program location:

Address:
County:
ELRC Region:

SECTION 3: GRANT DETAILS

Provide additional details below based on the Grant Type selected in Section One.

Type 1 – Conversion Grant (Restricted to Certified Family Child Care Homes and Certified Group Child Care Homes)

What is the current certified child care provider type? Family Child Care Home Group Child Care Center

What Provider Type will your current program be converting to? Group Child Care Home Child Care Center

Type 2 – Expansion Grant (All Certified Child Care Provider Types)

Do you intend to increase your current DHS-certified licensed capacity? Yes No

If yes, indicate the number of classrooms per care level:

- Infants –
- Toddlers –
- Prekindergarten –
- School-Age –

Do you intend to reopen existing classrooms that are included in your DHS-certified licensed capacity?

Yes No

If yes, indicate the number of classrooms per care level:

- Infants –
- Toddlers –
- Prekindergarten –
- School-Age –

Will your hours and/or days of operation be expanded beyond your program’s current schedule? Yes No

If yes, provide the additional time the program is open, by day, below:

	Hour of Day	AM/PM	Hour of Day	AM/PM
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				
SATURDAY				
SUNDAY				

Do you anticipate hiring additional staff? Yes No

If yes, how many additional staff will be hired?

Type 3 – Start Up Grant (All Certified Provider Types)

What certified child care provider type are you proposing to open?

Family Child Care Home Group Child Care Center Child Care Center

How many classrooms do you estimate will be served at the new program location?

- Infants –
- Toddlers –
- Prekindergarten –
- School-Age –

What is the estimated number of staff to be hired at the new program location?



SECTION 5: BUDGET

Please refer to [Appendix A: Budget](#) and complete the column labeled *Requested Budget*. Be sure to sign/date the appropriate signature section. Once completed, submit **Appendix A: Budget** with your application to the ELRC.

SECTION 6: BONUS POINTS

Please indicate any targeted populations that will be positively impacted by the requested grant funding.

- Infants/Toddlers: Yes No
- Children with Disabilities: Yes No
- Dual/Multi Language Learners: Yes No
- Non-Traditional Care: Yes No

Attestation

By signing the document, the applicant understands the penalty for misleading a public servant or falsifying information is a misdemeanor of the third degree pursuant to Title 18, Section 4903(b) of the PA Crimes Code and you can be penalized by fine, jail, prison, subsidized child care ineligibility, or a mixture of these four options for making any false statements. The applicant certifies that all instructions were read prior to completion. The individual also certifies that, as of the date the application was signed, the legal entity/program has no state liens/liabilities or other commonwealth obligations. Discovery of state or federal liens/liabilities or other obligations by the ELRC and/or OCDEL staff will result in the grantee's/legal entity's program(s) being ineligible for the grant. Lastly, the grantee certifies that, all applicable eligibility requirements detailed in [ELRC Policy Announcement #24-03](#) have been met.

Signature

Date

Print Name

Title

2024-25 Child Care Start Up & Expansion Grant Application
(For Use by Head Start, Early Head Start, and Private Academic Licensed Nursery School Programs)

Head Start, Early Head Start, and Private Academic Licensed Nursery School programs are eligible to apply for a Type 1 Conversion Grant. The Type 1 Grant is to assist these providers in becoming DHS certified child care programs in addition to their current programming. If you are interested in converting more than one location to a certified child care program, a separate application must be submitted for each location.

SECTION 1: PROVIDER INFORMATION

Name of Individual Completing Application:

Position Title:

Email Address:

Current Provider Name:

Phone Number:

Location Address:

Location County:

Location ELRC Region:

Location Total Enrollment:

Provider Federal Employer Identification # (FEIN):

Provider Master Provider Index (MPI) #: (if applicable)

Provider Type: (check all that apply)

Head Start

Early Head Start

Private Academic Licensed Nursery School

Application Completion Date:

Grant Amount Requested:

SECTION 2: SERVICE LOCATION

Please confirm the grant activities will occur at the facility address indicated in Section One. Yes No

SECTION 3: GRANT DETAILS

Upon receiving your DHS Certificate of Compliance, how many classrooms will be utilized for child care services?

Infants –

Toddlers –

Prekindergarten –

School-Age –

Upon receiving your DHS Certificate of Compliance, do you anticipate hiring additional staff? Yes No

If yes, how many additional staff will be hired?

Upon receiving your DHS Certificate of Compliance, do you anticipate extending your program's current hours or days of operation? Yes No

If yes, indicate your proposed new hours and/or days of operation which include your currently operational hours and days:

	Hour of Day	AM/PM	Hour of Day	AM/PM
MONDAY				
TUESDAY				
WEDNESDAY				
THURSDAY				
FRIDAY				
SATURDAY				
SUNDAY				

SECTION 4: PROJECT OVERVIEW

SECTION 5: BUDGET

Please refer to [Appendix A: Budget](#) and complete the column labeled *Requested Budget*. Be sure to sign/date the appropriate signature section. Submit **Appendix A: Budget** with your completed application.

SECTION 6: BONUS POINTS

Please indicate any special populations that will be positively impacted by the requested grant funding.

Infants/Toddlers: Yes No

Children with Disabilities: Yes No

Dual/Multi Language Learners: Yes No

Non-Traditional Care: Yes No

Attestation

By signing the document, the applicant understands the penalty for misleading a public servant or falsifying information is a misdemeanor of the third degree pursuant to Title 18, Section 4903(b) of the PA Crimes Code and you can be penalized by fine, jail, prison, subsidized child care ineligibility, or a mixture of these four options for making any false statements. The applicant certifies that all instructions were read prior to completion. The individual also certifies that, as of the date the application was signed, the legal entity/program has no state liens/liabilities or other commonwealth obligations. Discovery of state or federal liens/liabilities or other obligations by the ELRC and/or OCDEL staff will result in the grantee's/legal entity's program(s) being ineligible for the grant. Lastly, the grantee certifies that, all applicable eligibility requirements detailed in [ELRC Policy Announcement #24-03](#) have been met.

Signature

Date

Print Name

Title