Infant & Toddler Care - Facilities Upgrades

Kosciusko County Community Foundation

Application Instructions

For this grant initiative, the Kosciusko County Community Foundation accepts grant applications from nonprofit and school-based childcare centers and programs serving Kosciusko and/or Whitley counties. Grant awards will be announced approximately 6-8 weeks following each deadline. If you have any questions throughout the application process, please call the Community Foundation at 574-267-1901.

Please reach out to Alex Hall (alex@kcfoundation.org) prior to submitting your application to set up a time to discuss your proposal.

Please complete all required questions below. Completed applications and required attachments must be submitted by 4:30 p.m. on the due date in order to be considered for funding by the grant committee.

For complete grant guidelines and submission dates, please visit https://www.kcfoundation.org/childcaregrants.

Pre-Grant Inquiry*
On what date did you communicate with our staff regarding your grant request?

Character Limit: 10

Before you begin, please take a moment to verify the contact information on your user profile. If you need to make changes, you will be given the opportunity to do so in the Contact Information sections below.

Applicant Contact Information*
Is your contact information at the top of this page correct?

Choices
Yes
No

Organization Contact Information*
Is your organization’s contact information at the top of this page correct?

Choices
Yes
No
**Applicant Contact Information**

Please complete the fields that need to be updated. Community Foundation staff will update your profile after the grant application deadline.

**Applicant Prefix**
(Mr., Mrs., Ms., etc.)

*Character Limit: 15*

**Applicant First Name**

*Character Limit: 25*

**Applicant Last Name**

*Character Limit: 25*

**Applicant Business Title**

*Character Limit: 50*

**Applicant E-mail**

*Character Limit: 254*

**Applicant Phone Number**

Please format at 574-267-1901 x100.

*Character Limit: 20*

**Applicant Phone Type**

*Choices*
- Office
- Cell
- Home

**Organization Contact Information**

Please complete the fields that need to be updated. Community Foundation staff will update the organization’s profile after the grant application deadline.

**Organization Name**

*Character Limit: 150*

**Organization Phone Number**

Please format as 574-267-1901.

*Character Limit: 12*
Organization Mailing Address

City

State

Zip Code

Please provide the contact information for your organization's director:

Director Prefix

Director First Name

Director Last Name

Director Business Title

Director E-mail

Director Phone Number

Director Phone Type

Choices

Office

Cell

Home
Application Cover Sheet

Project Name*
Please create a short title for your grant request. This name may be altered by KCCF staff during the review process.

Character Limit: 100

Amount Requested from KCCF*
This amount should match the amount mentioned in the first line of the Sources of Financial Support table in the Budget Information section below.

Character Limit: 20

Organization Type

Organization Type*
Please select your organization type.

Choices
501(c)(3) Charitable Organization
Church
Governmental Organization
Private School
Public School

Organization Information

In this section, you will be asked to provide general information about your organization.

History*
Please provide a brief history of your childcare program, including when it was established.

Character Limit: 2000

Mission & Services*
Please describe your organization's principal services, purpose and mission statement.

Character Limit: 2000

Population Served by Organization*
What population(s) and age range(s) of children does your childcare program typically serve?

Character Limit: 500

Affiliations*
Please list any corporate ownership, formal affiliations or fiscal sponsors.
Grant Proposal

*In this section, you will need to provide **specific** information about the project/program for which you are seeking grant funding.*

**Description**

Please provide a **brief** summary of the project/program.

**Project Type**

Please select the project type which you think best categorizes your project. (Check all that apply.)

**Choices**

- Installation of a 0-3 playground
- Purchase of furnishings/equipment
- Renovations of existing spaces
- Construction of new spaces
- Other

**What is the need?**

Please explain or describe the need for this project. And, if applicable, what sources can you cite to verify this need using statistics, regulations, surveys, etc.?  

**How will you meet the need?**

Describe how your project/program addresses the identified need.  

*This is an opportunity for you to explain in detail how your project will work.*

**How does this project help increase capacity and/or quality of care to infants and toddlers?**

Describe **how** your project meets one or more of the preferences listed in the grant guidelines:

- Directly impact the care of children ages 0-3.
- Add capacity to serve more children by way of renovations to convert existing spaces or add new spaces for infant/toddler classrooms.
- Seek to improve the quality of care. This could include, but is not limited to: playground installations, exterior/interior renovations, addition of bathrooms/sinks or exterior doors, furnishings/equipment, etc.
Who will implement the project?*
Explain the organization's ability to carry out this project. Who specifically will implement the project and what are their qualifications?

Character Limit: 3000

Collaborations & Partnerships*
Describe any other organizations or individuals that you will collaborate or partner with to complete this project/program. Explain what role they will have (contractor, vendor, funder, collaborator, service provider, etc.)

Character Limit: 2000

Project Timeline
Please tell us the start and end date of your project. It is important to note that grant awards are announced approximately 6 to 8 weeks after the deadline. Any expenses incurred prior to grant approval will not be reimbursed with grant funding.

Start Date*
Character Limit: 10

End Date*
Character Limit: 10

Timeline Comments
If you need to provide additional information regarding your project timeline, please use this space.
Character Limit: 500

Explain the expected benefits of this project:

County*
Please select the primary county being served by this project.
*Please note: requests that do not serve Kosciusko or Whitley counties (Indiana) will not receive funding from this grant initiative.

Choices
Kosciusko
Whitley
Kosciusko and Whitley Counties
Service to Infants/Toddlers*
Does this project specifically serve infants/toddlers, ages 0-3?
*Please note: requests that do not serve children ages 0-3 will not receive funding from this grant initiative.*

Choices
Yes
No

Total Served*
Approximately how many infants and toddlers does your organization currently serve? This should not include any new seats added by this request for facilities upgrades. Only current capacity should be included in this figure.

*Character Limit: 3*

Total New Childcare Seats Added*
If you expect your project to increase the capacity of seats available to serve children ages 0-3, enter that number here. It is expected that new classrooms would add either 8 infant or 10 toddler seats (or some combination of the two).
If this project does not increase the capacity of your organization, please enter zero (0).

*Character Limit: 3*

Kosciusko/Whitley County Residents Served*
Of those being served, how many are Kosciusko or Whitley County residents?

*Character Limit: 3*

Age Range*
What is the approximate age range of those being served by this project?

*Character Limit: 15*

Impact Assessment*
How will you measure and assess the benefit and impact of your project? Some examples may include follow-up assessments or benchmarks by which you can chart your progress.

*Character Limit: 3000*

Feedback/Evaluation*
How do you receive feedback from those that you serve or that would benefit from a grant award?

*Character Limit: 1000*

Benefit to Organization*
How will your organization benefit?

*Character Limit: 2000*
Grant Communication:

Public Relations*
What methods will be used to communicate to your donors, members, supporters, etc. any grant support you receive from the Community Foundation?

*Character Limit: 500

Reporting Requirements*
Reporting will be required twice during the duration of the 12-month grant period. Will you fulfill this reporting requirement?

Choices
Yes
No

Additional Questions: Playgrounds

Confirmation of Plan Approval - Playground*
Will the playground meet the State of Indiana’s guidelines, such as offering a minimum of 75 square feet per child using the playground?

Choices
Yes
No

Steps taken for approval.*
Describe what steps/resources your organization has utilized to ensure your playground will meet minimum requirements for childcare programs located in Indiana.

*Character Limit: 500

Additional Questions: Renovations/Construction

Confirmation of Plan Approval - Renovation/Construction*
Has your classroom renovation or construction plan been approved by Indiana’s Office of Early Childhood & Out of School Learning?

Choices
Yes
No

Steps taken for approval.*
Describe what steps/resources your organization has utilized to ensure your plan(s) will meet minimum requirements for childcare programs located in Indiana.
Additional Questions: Furnishings/Equipment

Confirmation of Plan Approval - Furnishings/Equipment*
Will the furnishings and equipment purchased meet the State of Indiana's guidelines for childcare programs?

Choices
Yes
No

Steps taken for approval.*
Describe what steps/resources your organization has utilized to ensure the furnishings and equipment purchased with grant dollars will meet minimum requirements for childcare programs located in Indiana.

Character Limit: 500

Budget Information

Project Budget Summary

Itemized Expenses
Please use this table to list your expenses related to this proposal, even if you do not plan to use KCCF grant dollars to cover the expense(s).

Remember: Any expenses incurred prior to the grant approval date are not eligible for reimbursement.

<table>
<thead>
<tr>
<th>Expense Description (Combine like items on one row if more room is needed.)</th>
<th>Amount</th>
<th>Percent of Total Budgeted Expenses</th>
<th>Will you use KCCF grant money to fund this item?</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Total Expenses*

*This amount should equal the sum of the Itemized Expenses reported above. It should also equal the Total Financial Support reported below.*

*Character Limit: 20*

### Sources of Financial Support

Please use this table to list the entities and organizations providing financial support related to this proposal.

<table>
<thead>
<tr>
<th>Type of Funding</th>
<th>Description of Source of Funding</th>
<th>Amount</th>
<th>Percent of Total Revenue</th>
<th>Is this funding Pending or Secured?</th>
</tr>
</thead>
<tbody>
<tr>
<td>AMOUNT REQUESTED FROM KCCF</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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**Infant & Toddler Care - Facilities Upgrades**

**Printed On:** 7 March 2024
<table>
<thead>
<tr>
<th>Source of Financial Support</th>
<th>Contribution Amount</th>
<th>Total Financial Support*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Federal/City/State Governments</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Foundations (1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other Foundations (2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public Contributions/Donations (Specify) (1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Public Contributions/Donations (Specify) (2)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Loans</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Your Organization's Contribution</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (1)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other (2)</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Total Financial Support***

*This amount should equal the sum of the Sources of Financial Support including the amount requested from KCCF.

*This amount should also equal the Total Expenses reported above.

Character Limit: 20

**Partial Funding or Denial***

If this project receives partial funding or is denied, how will you proceed?

Character Limit: 1000
Certification

The information contained in this application is for the purpose of obtaining funding from the Kosciusko County Community Foundation Community Funds on behalf of the undersigned. The undersigned understands that the information provided is true and complete and that the Kosciusko County Community Foundation may consider this statement as continuing to be true and correct until a written notice of a change is provided. The Kosciusko County Community Foundation is authorized to make all inquiries they deem necessary to verify the accuracy of the statements made herein.

Electronic Signature*

Enter your name to confirm your electronic signature.

Character Limit: 250

Permission to Share Request*

Do we have permission to share this request with other funders, including donors who advise funds held by the Community Foundation?

Choices
Yes
No

Publicity Agreement*

For publicity purposes, my organization's identity may be revealed.

Choices
Yes
No

Authorization Signature

Two authorization signatures are required to submit this application. The signature indicates that the person has reviewed the grant request and agrees to its submission.

To complete this section, download the Grant Authorization Signature Form and complete the top section of the form using responses from this application, collect the appropriate signatures, and upload the completed form below.

Please note that the person providing their authorization will depend on the type of organization, as indicated on the form.
Grant Authorization Signature Form (Fillable PDF)

**Authorization Signature Form Upload**
Please upload your completed Authorization Signature Form.

*File Size Limit: 2 MB*

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**501(c)(3) Attachments**

Charitable organizations must upload the following documents:
*(accepted formats include: PDF and Word)*

- IRS Determination Letter
- Board of Directors list with names and town/city of residence that denotes who holds officer positions
- Staff list with names and town/city of residence
- Financial Documents

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**Private School Attachments**

Private schools must upload the following documents:
*(accepted formats include: PDF and Word)*

- IRS Determination Letter
- Board of Directors list with names and town/city of residence
- Staff list with names and town/city of residence
- Financial Documents

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**School Name**

Please select your school from the drop down list below.

*If your project will impact students at multiple schools within the same school corporation, please select the school corporation.*

**Choices**
Greater Warsaw Cooperative Preschool
Lakeland Christian Academy Association
Lakeland Christian Academy Association - Primary School
Lakeland Christian Academy Association - Secondary School
Sacred Heart Catholic School
Other

**Other School Name**
If you selected "other" from the drop down list, please enter your school name below.

*Character Limit: 50*

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**Government & Church Attachments**

*Churches and Governmental Organizations must upload the following documents:*

*(accepted formats include: PDF and Word)*

- Board of Directors list with names and town/city of residence
- Staff list with names and town/city of residence
- Financial Documents

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**Public School Attachments**

*Schools must upload the following documents:*

*(accepted formats include: PDF and Word)*

- School Board list with names and town/city of residence
- Staff list with names and town/city of residence

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**School Name**
Please select your school from the drop down list below. Please note - most school-based child care programs are listed in the drop down menu below.

*If your project will impact students at multiple schools within the same school corporation, please select the school corporation.*

**Choices**
Akron Elementary School
Claypool Elementary School
Edgewood Middle School
Eisenhower Elementary School
Gateway Education Center
Harrison Elementary School
Jefferson Elementary School
Lakeland Early Learning Academy
Lakeview Middle School
Leesburg Elementary School
Lincoln Elementary School
Little Cats Early Learning Center
Madison Elementary School
Mentone Elementary School
Mentone Kindergarten Readiness Center
Milford Elementary School
North Webster Elementary
Pierceton Elementary
Syracuse Elementary
Tippecanoe Valley High School
Tippecanoe Valley Middle School
Tippecanoe Valley School Corporation
Warsaw Area Career Center
Warsaw Community High School
Warsaw Community Schools
Warsaw Early Learning Academy
Washington STEM Academy
Wawasee Community School Corporation
Wawasee Early Learning Center
Wawasee High School
Wawasee Middle School
Whitko Career Academy
Whitko High School
Whitley County Consolidated Schools
Other

Other School Name
If you selected "other" from the drop down list, please enter your school name below.

*Character Limit: 50

IRS Determination Letter

IRS Determination Letter*

File Size Limit: 2 MB

Board List

Board List
This may be your Board of Directors, School Board, City/Town Council, etc. Please show which individuals are officers and what their positions are (President, Vice President, Treasurer, Secretary, etc.).

File Size Limit: 2 MB
Staff List

Staff Member List*
If your organization has a large number of employees, please only include those who will be working on this particular project. If your organization does not have any paid staff, please upload your board list again.

File Size Limit: 2 MB

Financial Documents

Internal Financial Statements*
Please upload a copy of your organization's most recent Statement of Activities (Income Sheet) and Statement of Financial Position (Balance Sheet).

File Size Limit: 6 MB

Form 990
Please upload a copy of your organization's most recent 990. If your organization does not file a 990 or 990-EZ, please skip this question.

File Size Limit: 6 MB

Not sure which internal financial statements to include? Examples of a Statement of Activities and a Statement of Financial Position can be found on our website at https://kcfoundation.org/community-funds/.

Additional and Supporting Documentation

Additional Supporting Documentation
Please upload supporting documentation that you have. Examples of such documents might be quotations, photos, letters of support, executive summaries, etc. related specifically to this project.

File Size Limit: 5 MB