

**WOMEN
UNITED®**



UNITED WAY
Kaw Valley

Presents the

ARCARE MINI-GRANT



Grant Packet

United Way of Kaw Valley

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Lawrence Office - 1127 Iowa St., Lawrence, KS 66044

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www.uwkawvalley.org



WOMEN UNITED ARCARE MINI-GRANT PACKET TABLE OF CONTENTS

ITEM DESCRIPTION	PAGE NUMBERS
Cover Page	1
Table of Contents	2
Mini-Grant Guidelines	3-5
Grantee Application	6-9
Final Report Form	10-11
Liability & Media Release Form	12



WOMEN UNITED'S ARCARE MINI-GRANT GUIDELINES

More than 40 years ago, a group of parents of children with disabilities gathered to ponder who would look after their loved ones when they no longer could. After all, these children had competent, reasonable coping skills but would need a trusted support system to help them continue living normal lives. Unaware of any existing resources, they decided to create their own solution to this abundant need.

Arcare, a certified 501(c)(3) organization, was founded in 1982 and designed to make certain that individuals with a disability would receive caring, planned, professional support throughout their lives. Initially, the focus was on developing full-service, long-term plans for each of its clients. Over time, the non-profit has added additional programs and core services tailored to meet each person's needs and each family's needs. Arcare serves individuals with all types of disabilities and is certified by the State of Kansas to act as a legal guardian and/or conservator for adult individuals with disabilities.

According to Child Care Aware of Kansas, a lack of affordable, quality childcare is affecting communities across the state. According to the U.S. Bureau of Labor Statistics, as many as 100,000 Americans have been forced to stay home from work each month because of childcare problems. This creates an additional strain on already overtaxed and struggling families, employers, and employees. In an article published by the First Five Years Fund, an organization that works to prioritize and build support for early learning and childcare programs at the federal level, "the ongoing childcare crisis is keeping women out of the workforce, curbing their earning potential, and severely limiting their career and personal choices."

While finding affordable, quality childcare is difficult, finding affordable, quality childcare for a child with special needs can feel insurmountable. In Kansas, there is a 9.5 year waiting list to receive supportive services through the Intellectual/Developmental Disability Medicaid Waiver. There are currently over 5,000 Kansans over the age of 5 years old on the waiting list to receive services they qualify for. Some families who are on this waiting list cannot access necessary services and supports for their child at home, let alone in a childcare setting.

MINI-GRANT PURPOSE

In an effort to assist families in accessing affordable, quality childcare for children with special needs, as well as keep more women in the workforce, Arcare and United Way of Kaw Valley (UWKV) have entered a grantmaking partnership led by Women United.

The proposed maximum grant amount any childcare center can apply for is **\$750.00**. Grant funding can be used to purchase items such as: adaptive play equipment, sensory toys, accessibility modifications, speech/language devices, etc. In addition, grant funding could be used for specialized training or education on best-serving children with disabilities in a childcare setting. Women United would serve as

the grant-making entity, review grant applications, and make funding decisions based on the affinity group's identified community needs and priorities.

ELIGIBLE ENTITIES

The following entities are eligible to apply: licensed home/private childcare providers or any licensed childcare providers that are part of public or private nonprofit organizations, including faith-based and other community organizations; school districts, institutions of higher education; government entities within states or territories (e.g., cities, counties); partnerships and consortia; and Native American tribes.

All grant funded purchases must support childcare centers located in the UWKV's service area which includes the four-county region of the Kansas Counties of Douglas, Jackson, Jefferson, and Shawnee.

All entities must have an Employer Identification Number (EIN), Unique Entity Identification (UEI) Number prior to applying.

GRANT PROJECT PERIOD

Projects under this proposal should occur between July 1st and June 15th each year. Mini-grant award recipients will be notified of approval and sent the approved award packet and funding within two weeks of their application approval. They then must submit a final report no later than June 15th.

FUNDING INFORMATION & AWARD PROCESS

Arcare, Inc. will provide up to \$10,000 a year in funding and UWKV Women United will manage those funds and oversee the process of selecting and awarding one-time mini-grants of \$750 or less to approved licensed childcare provider applicants.

UWKV Women United Grant Review Committee will select recipients based on the quality of the application, the need and impact of the proposed investment, and the organization's demonstrated readiness to implement the proposed supports.

Applications will be approved or denied within three weeks of grant submission. If approved, UWKV staff will announce the grant award, distribute the approved funding amount, and oversee the grant process to the end of the grant cycle and final report submission. Please note that all first time applicants will be prioritized over returning applicants.

Applicants will be reimbursed 100% (not to exceed the approved amount) of their costs. This is a cost-reimbursement grant funding opportunity that will be paid upon submission of the project report and documentation of expenditures. Only those expenses incurred after the grant starts will be eligible for reimbursement.

RESPONSIBILITIES OF MINI-GRANT RECIPIENTS

- Follow award packet instructions and use funding as exactly approved.
- Track and report impact and successes for final report.
- Share photos, audio and video that capture success with UWKV staff and ensure those featured have signed the liability and media release included in this grant packet.
- Submit a final report 90 days after funding is received

FUNDING RESTRICTIONS

- Funds may not be used for staffing, travel costs, gift cards, awards, or indirect costs.
- Grant funds under this program must support licensed childcare providers located in the Kansas Counties of Douglas, Jackson, Jefferson, and Shawnee.

APPLICATION TIMELINE

Grant guidelines released	July 1 st of each year
Application due	Anytime within the grant year (July 1 st thru June 15 th each year)
Award notification	Two to three weeks after application submission
Confirmation of Application Receipt	Within three business days of submission
Grant award start date	Once award packet is received
Grant award end date	June 15 th of the grant year
Final report due	June 15 th of the grant year
Reimbursement date	Within two weeks of reimbursement receipt/proof of purchase submission

APPLICATION INSTRUCTIONS

- Grantees should email a complete, signed application to womenunited@uwkawvalley.org.
- Include "Mini-Grant Application" in the subject line.
- All applicants must submit a signed [W-9 form](#) with their application.
- All grant materials can be found at www.uwkawvalley.org.
- All applicants will receive confirmation of receipt of their application within three business days of submission. If you do not receive confirmation of receipt, please email womenunited@uwkawvalley.org.

UNITED WAY OF KAW VALLEY CONTACT INFORMATION

For further information, a printed copy of the materials and/or technical assistance, please contact Meg Hooper Pearson (785) 273-4804 womenunited@uwkawvalley.org



WOMEN UNITED'S ARCARE MINI-GRANT APPLICATION

1. Organization Name:
2. Type (check boxes): 501(c)(3) Nonprofit Government Agency Other
3. Address:
 - a. Street:
 - b. City:
 - c. Zip Code:
4. Website:
5. Employer Identification Number (EIN) (or EIN of parent org. if an internal program):
6. Childcare license Number:
7. Expiration date of license:
8. Program Name (if different from organization name above):
9. Person to be Contacted on this Application:
 - a. Title:
 - b. Office Phone:
 - c. Email:
10. Executive Director:
 - a. Office Phone:
 - b. Email:
11. Areas to be served by Program (list cities, counties):
12. Amount Requested:
13. How did you hear about this grant opportunity

Please email your completed application, proof of childcare license, and [W-9 to womenunited@uwkawvalley.org](mailto:womenunited@uwkawvalley.org).

EXECUTIVE SUMMARY (approximately 150 words)

Provide a brief summary of how your childcare center intends to use the funds requested and how it will benefit a child (or children), your childcare center, and your community.

PLAN

*In the space below, please respond to **all** bullet points and describe your center's plan for the proposed purchases.*

- Provide a detailed description of how the proposed purchases of equipment or supports will be used.
- Describe the resources you already have in place to make the proposed purchases successful. (i.e.: funds, staff, training, equipment, etc.)
- Describe the key players and collaborators providing support to the child/children the equipment or supports purchased through these grant funds is for (i.e.: staff or existing volunteers and or parents or guardians).

COMMUNITY NEED, GOALS, AND IMPACT

Please describe the goal(s) and impact of your proposed purchases in the space below by responding to all bullet points within the narrative.

- Describe the needs of the child, children, or center that this project will help address.
- List the goal(s) for the proposed purchases and the intended impact on the child or children AND on your childcare center and/or community.
- List what impacts are expected to result from each goal (i.e. purchasing digital reading pen = higher literacy & support for children with dyslexia).

BUDGET

Please identify your proposed costs. See Mini-Grant Guidelines for more information.

CATEGORY OF EXPENDITURES	EXPENDITURE CALCULATION COST, ITEM, QUANTITY (Example: \$250 x 3 Tablets = \$750)	Total Cost
Supplies		
Equipment		
Other Supports- i.e. training or consultation		
Proposed Grant Total		



I certify the above information is true and accurate to the best of my knowledge regarding the receipt and expenditure of the federal funds in compliance with the grant conditions and program regulations.

Signature of Authorized Representative: _____

Date: _____

Typed or Printed Name: _____

Title: _____



WOMEN UNITED'S ARCARE MINI-GRANT FINAL REPORT

(To be completed 90 days after funding has been awarded)

ORGANIZATION NAME:

ORGANIZATION CITY AND COUNTY:

CONTACT NAME:

CONTACT TITLE:

CONTACT EMAIL:

CONTACT PHONE:

SUMMARY

Give details about the equipment or supports purchased with grant funding and explain how the purchases made were intended to benefit the children served by your program.

OUTCOMES/BENEFITS

Describe how the grant funds benefited a child, your early childhood educational program, your childcare center, and/or your community: Include a success story, quotes or other qualitative information that describe the impact of the grant. If available and if a media release has been signed by those featured, photos and video/audio recordings can be sent with your Final Report. Please note, success stories and/or photos may be used by United Way of Kaw Valley for public relations, outreach, and other external communications.

I certify the above information is true and accurate to the best of my knowledge regarding the receipt and expenditure of the federal funds and in compliance with the grant conditions and program regulations.

Authorized Representative Signature:

Date:

Typed or Printed Name:

Title:

**Please email your completed Final Report and photos
to womenunited@uwkawvalley.org
90 days after funding has been awarded.**

Media Release Form

As a part of our efforts to promote advocacy and program services, audio recordings, pictures and/or video may be published in one or more of the following media outlets: professional organization newsletters/magazines/brochures, on United Way and Arcare's website/social media/ online video channels, newspapers and/or correspondence with local, state or other public agencies.

Photograph Permission Section

- Permission for adult
- Permission for child(ren) **Photo Release Form must be completed by a Parent/Legal Guardian.**

I, _____, grant permission to United Way of Kaw Valley and Arcare, Inc. or its representatives to display/publish pictures or video of me or my child(ren), and/or my property in publications, such as, but not limited to: videos, professional brochures, the United Way and Arcare's website, newsletters and for the specific use in public awareness campaign materials or educational presentations.

- Yes, you may use my/my child(ren)'s name below
- Please do not use my/my child(ren)'s name

Please complete for identification purposes, even if you do not wish us to use your name.

_____	_____
_____	_____
_____	_____

Program Information

Center, Program, or Facility Name (if applicable)	City/town	Contact Phone Number
_____	_____	_____
Address for follow up purpose only		

Signature _____

