

Quality Recognition Seeking: Council On Accreditation (COA) Afterschool Accreditation Fees Grant

This application requests funds for application, accreditation, or site visit for Council On Accreditation (COA) Afterschool Accreditation.

Applicants must be a CDD regulated program. In addition applicants must demonstrate understanding of, and accomplishments toward COA Afterschool Accreditation before submitting this grant request. For more information on COA accreditation call or write:

Council On Accreditation

45 Broadway, 29th Floor
New York, NY 10006
(212)797-3000
<http://coanet.org/accreditation/child-and-youth-development-accreditation/>

Important! Quality Recognition Seeking Grants are only awarded to programs that are in good regulatory standing with CDD.

For State Use Only

Date Received: _____ Invoice #: _____
 Reviewed/approved: _____ Date: _____
 Payment entered by: _____ Date: _____
 License check: _____
 Application #: _____ Agreement #: _____
Program Manager Approval/Denial
 Approved: \$ _____ Denied
 Signature: _____ Date: _____

Contact Person

Lynne Robbins
802-241-0823 or 1-800-649-2642
lynne.robbins@vermont.gov

Application Deadline

By the first of any month

Program Name (Print) _____ Date _____

Your Name _____ Title _____

Program Physical Address _____ City _____ State _____ Zip _____

Program Mailing Address _____ City _____ State _____ Zip _____

Telephone # _____ Email _____

Vermont License Certificate Number _____

Applying for: (please check one)

- Application Fee \$ _____ (up to \$250)
- Accreditation Fee \$ _____ (up to \$2400)
- Site Visit Cost \$ _____
- Annual Maintenance Fee \$ _____ (up to \$200)

Total Number of school age children you currently serve _____



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1) Has your program?

- Participated in the COA Registration; if yes, please list years: _____
- Participated in COA Certification; if yes, please list years: _____
- Previously accredited by NAA; if yes, please list years: _____
- Have reviewed accreditation criteria and ready to begin.
- Contacted VSACN for mentoring or support.
- Participated in COA training/mentoring.

2) Your program's accreditation status:

- Reviewed materials, ready to start.
- Submitted application, month _____ year _____ ; have begun documentation process.
- Self-study completed, plan to submit: month _____ year _____
- Self-study submitted, month _____ year _____ ; awaiting site visit.
- Site visit completed, month _____ year _____ ; awaiting approval.
- Achieved Afterschool Accreditation, month _____ year _____
- Accredited: month _____ year _____ ; submitting annual maintenance fee.

3) On separate paper, describe in detail your process to date:

- The decision process used to determine your program's interest in accreditation.
- Describe the collaborative process to complete accreditation which actively engaged the program administrator, teaching staff, families, and the program's governing body.
- List the program's desired outcomes resulting from accreditation (for reaccreditation, include the benefits experienced as an accredited center).
- Actions taken to date in your program, including any results of COA Afterschool Accreditation program self-study.

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Please sign the certification below:

Certification

I certify that the information contained in this application is true and correct; I also certify that the following statements are true:

1. My program will comply with applicable eligibility criteria of the Child Care Development Fund including not discriminating or barring participation on the basis of race, religion, sex, color, handicap or national origin.
2. I have worked directly with children at a CDD regulated child care facility for the past six months.
3. I plan to work in regulated child care or afterschool care setting serving Vermont children for at least one year after receiving any grant funds from the CDD.
4. I am a Vermont resident.
5. I am not a public school employee who is paid on the teacher salary schedule for my work in the regulated care setting.
6. The program I work in is in good regulatory standing with the Child Development Division, which means that I also certify that within the past twelve months all regulatory violations are corrected, no "Parental Notification Letters" have been mailed and the program does not have a pattern of repeated regulatory violations with the CDD or I have attached a letter explaining why my program is not in good regulatory standing.

Applicant's Signature: _____ Date: _____

Be sure to sign the certification above.

Keep a copy of your completed application for yourself, and send the original to:

Child Development Division
ATTN: Laura Lyford
NOB 1 North, 280 State Drive
Waterbury, Vermont 05671-1040
Email: laura.lyford@vermont.gov

** Good regulatory standing means any regulatory violations have been corrected, no "Parental Notification Letters" have been mailed and the program does not have a pattern of repeated regulatory violations with the CDD.*