

Early Childhood Iowa Lakes Region Request for Renewal FY15

FY15 Request for Renewal is available only to programs that received funding in FY14.

Timeline for Project: July 1, 2014 through June 30, 2015

Letter of Intent Due Date: April 1, 2014

Renewal Application Due Date: April 21, 2014

Please submit letter of intent to Paulette Karolczak at Early Childhood Iowa Lakes Region, PO Box 146, Sheldon, IA 51201 or email to pmkarolczak@gmail.com. You will receive a reply to confirm the email was delivered.

Notification of Intent to Fund or Decline: On or before June 24, 2014
(Dependent upon notification of funding by State Early Childhood Iowa office)

Agree on Project Plan, Budget, and Sign Contract: June 30, 2014
(Dependent upon notification of funding by State Early Childhood Iowa office)

Completion of Funded Projects: June 30, 2015

Funding is contingent upon funds appropriated to Early Childhood Iowa Lakes Region.

Renewal Instructions:

- Projects must submit one original and one electronic copy by the due date to Paulette Karolczak, ECI Lakes Region, PO Box 146, Sheldon, IA 51201 and by email at pmkarolczak@gmail.com. You will receive a reply to confirm the email was delivered.
- All supporting documents must be signed and included with the original hard copy.
- Family Support programs funded through ECI Lakes Region are required to submit quarterly REDCap reports in the format as directed by state Early Childhood Iowa. All other programs are to report quarterly data in the format designated by ECI Lakes Region. Due dates are October 15, 2014; January 15, 2015; April 15, 2015; and July 10, 2015 (fourth quarter/year-end).
- All programs are required to submit monthly billings.
- Family support programs will utilize REDCap, a state administered, statewide family support web-based data collection system, in FY15. For more information please refer to this link on the state ECI website:
http://www.earlychildhoodiowa.org/EC_resources/eci_webinars/fs_web-based_data_system.html

LETTER OF INTENT AND PROPOSAL COVER PAGE

Agency/Organization _____

Address _____

Proposal Contact Person _____

Title of Contact Person _____

Email Address _____

Phone Number _____

Fax Number _____

Total Amount of Request \$ _____

This project aligns with the following Early Childhood Iowa state result areas (check all that apply):

- _____ Healthy Children
- _____ Children Ready to Succeed in School
- _____ Safe and Supportive Communities
- _____ Secure and Nurturing Families
- _____ Secure and Nurturing Early Learning Environments

This project addresses the ECI Lakes Region’s priorities (check all that apply):

- _____ Strengthen the relationship between parents and their children through the provision of quality family support programs
- _____ Improve health and wellness of infants
- _____ Improve the quality of early care and learning environments

Project Narrative

Please address the following items and limit narrative to no more than two pages

- Due to this being a renewal year, the Board only requires that you add a narrative if there have been significant changes in your program over the past year or if you foresee significant changes for FY15. These changes may be programmatically or fiscally.

(You may delete this paragraph from your narrative.)

Project Budget FY14

Please use or follow the sample budget format below. Please include detailed line items such as the italicized examples.

Category	ECI Lakes Region Funds Requested	Other Funding Sources and/or In-Kind	Narrative
Salaries <i># of FTEs</i>			
Benefits <i>i.e., FICA; IPERS / Retirement; Health; Dental; Other</i>			
Travel			
Training			
Supplies <i>i.e., postage, consumables, curriculum</i>			
Other (describe)			
Administrative/ Indirect			
Total			

Anticipated cost per child/family/service \$_____

Certification:

- I affirm that the information in this application is accurate to the best of my knowledge.
- The organization has the resources to meet the goals and objectives included in this application of the amount of applied funds.
- The organization is committed to fulfilling the standard contract conditions.

Program Director Signature: _____

Date Signed: _____

Appendix

FY14 ECI Lakes Region Funds Awarded by Program (without carryover):

Program	School Ready: Family Support and Parent Education	School Ready: Preschool Support	School Ready: General	Early Childhood Funding	Total ECI LR Funding FY14
BCBB • Clay • Dickinson • O'Brien • Osceola • TOTAL	24,660.75 24,660.75 24,660.75 24,660.75 \$98,643.01		10,391.75 10,391.75 10,391.75 10,391.75 \$41,566.99		\$140,210.00
KIDS	\$ 158,930.87	\$ 26,085.13			\$185,016.00
Hand in Hand		\$40,565.59		\$72,934.35	\$113,499.94
Preschool Scholarships and Transportation		\$51,303.90			\$51,303.90

Resources:

- Early Childhood Iowa website: www.earlychildhoodiowa.org
- Family Support and Parent Education: http://www.earlychildhoodiowa.org/files/toolkit_tools/Tool_FF.pdf
- Preschool Support Programming Support: http://www.earlychildhoodiowa.org/files/toolkit_tools/Tool_CC%20.pdf
- School Ready Funds Support Quality Improvement Efforts: http://www.earlychildhoodiowa.org/files/toolkit_tools/Tool_II.pdf
- Early Childhood Funds: http://www.state.ia.us/earlychildhood/files/toolkit_tools/Tool_G.pdf
- ECI Lakes Region website: www.ecilakesregion.com
- ECI Lakes Region Community Plan: <http://www.ecilakesregion.com/wp/operations>