



United Way
of Greater New Haven

2025 Early Care and Education Program Expansion Grant Request for Proposals Group Homes and Child Care Centers

United Way of Greater New Haven has been awarded federal American Rescue Plan Act (ARPA) funds from the City of New Haven to enhance and expand early care and education programs in the city of New Haven.

We invite you to apply for this Request for Proposals (RFP) process to support your program's expansion goals. Through this RFP process, we are seeking to understand your funding needs and your plan of action for utilizing the funds to expand your licensed capacity.

Applications will be accepted through Friday, June 20, 2025 at 4pm. Applications can be submitted through [this link](#).

DISCLAIMER

Expanding your child care business requires approval from the Office of Early Childhood (OEC) Licensing department, the New Haven Building Inspector, the local zoning board, the health department and the New Haven Fire Marshal.

Please investigate the steps you'd need to take to expand your business prior to submitting your application. Grants will only be awarded to applicants who can demonstrate that they have a complete understanding of the exact OEC and local authority requirements for expanding their child care license. To learn more about the licensing process, [visit OEC's website](#).

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GOOGLE CHROME TRANSLATION

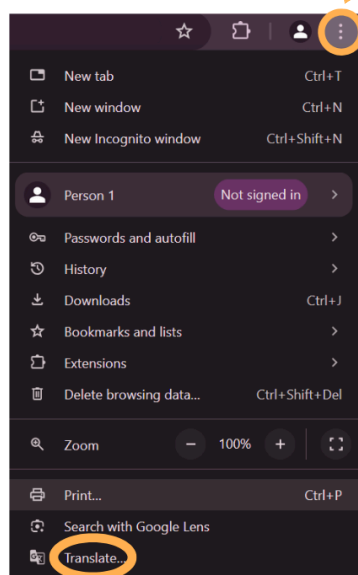
for United Way of Greater New Haven Funding Opportunity Applicants

United Way of Greater New Haven utilizes Formstack to create online application forms for all funding opportunities. Utilizing the web browser Google Chrome, applicants can translate our online applications and respond to United Way funding opportunities in their preferred language. Instructions on how to do so can be found below. Please be aware that utilizing this process shares your data with Google, as translation is done via Google Translate.

If you already have the web browser Google Chrome, and your language is set to one other than English, Google Translate may send a pop-up window prompting you to translate the form. In that case, you will not need to complete the following steps.

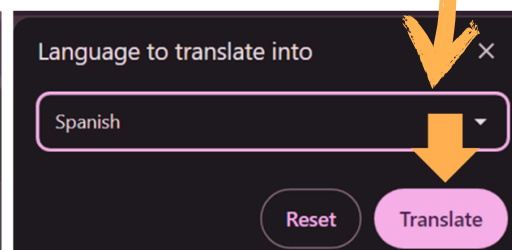
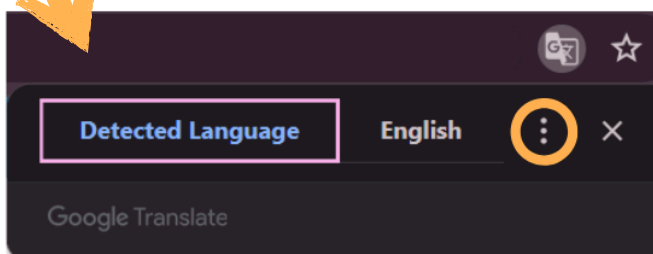
Awarded funding?

If an applicant is awarded funding, all future documentation will be distributed and completed in English. Additional supports may be available dependent upon the funding opportunity.



STEPS

- 1 Download and install the web browser Google Chrome if you do not already have access to it. Instructions for how to do so for different computer types can be found [here](#). (To translate web browser download instructions, scroll to the bottom of the page and select another language from the 'Language' button.)
- 2 Open a new window in Google Chrome, and navigate to the online United Way of Greater New Haven application. The link to the application can be found on our website and in the application preview.
- 3 Once the application is open in Google Chrome, select the three dots at the top, right-hand corner to open Google Chrome's menu. Scroll down and select 'Translate.'
- 4 Google Chrome will show you the language it is detecting on the page in the window that pops up. Select the three dots in the top, right-hand corner of the window and scroll until you select your preferred language.
- 5 Once you have selected the language you want the form translated into, click 'Translate.' The application form should show in your preferred language. You will now be able to read and respond to the form in the language you are most comfortable in.



May look different

If you have Google Chrome's Google Translate settings turned on to translate for a specific language, steps 4 and 5 may appear different. You may be shown the language the page is in in the top right corner, with the option to click your preferred language next to it. The page will then be translated.

Grant Requirements for Awardees

To ensure transparency, we want grant recipients to clearly understand the steps required after receiving their award.

1. Submit the following documentation:
 - a. Sign a contract through DocuSign
 - b. Submit a W9 form
 - c. Submit an ACH Direct Deposit form along with a voided check or bank letter
 - d. Submit their final budget via an excel spreadsheet
 - e. Provide a Certificate of Insurance (COI) naming the City of New Haven **and** United Way of Greater New Haven as additional insured at specific limits required by the City of New Haven
2. Participate in regular convenings of ECE educators support ongoing learning
3. Welcome visits from UWGNH education team members.
4. Track and report on data such as how the funds were spent, the number of children and families served, participant demographics, and the impact of grant-funded activities approximately one year following the date of their award.
5. Awardees may be required to submit other documentation related to their project plans as needed.

Please take these requirements into consideration prior to applying for this grant opportunity.

Eligibility

Your program must:

- Be located in New Haven
- Be a licensed Group Child Care Home or Child Care Center
- Serve children who live in New Haven (at least 50% of enrollment)
- Have at least 66% of your early childhood seats enrolled at the time of your questionnaire submission
- Have been in operation for at least 2 years
- Welcome all families, regardless of their race, cultural background or religious practices
- Be a non-profit or a privately owned, non-franchised provider

Priority will be given to programs that:

- Serve more than 50% children who live in New Haven
- Are more than 75% enrolled at the time of the application
- Are located in neighborhoods with a high population living in poverty
- Serve high need families [at least 50% of children are eligible (based on family income) for School Readiness, Care4Kids, Head Start, Early Head Start or Child Day Care funding/slots]
- Would create infant/toddler spaces (ages 0-3)
- Have a demonstrated plan for continuity of care for families
- Can demonstrate that this funding, in combination with other secured funding sources or by itself, is sufficient to complete their project by August 2026

Maximum Award Amounts

Maximum award amounts will differ, and final awards may not be for the full amount requested.

- Group Child Care Homes (looking to expand to Center): up to \$60,000
- Child Care Centers: up to \$150,000

Grant Criteria

The goal of this grant opportunity is to create NEW licensed childcare spaces in the City of New Haven. Grants will be directed to child care programs with specific plans for program expansion.

Possible areas for funding include but are not limited to:

- Renovations: Knocking down walls, building bathrooms, and other projects that would allow increased square footage or meet licensing requirements
- Equipment/Furniture: Furniture and supplies that would allow you to meet licensing requirements
- Facility needs that would allow for increased licensure (e.g., purchasing safety doors, building a ramp to make the building accessible to infants/toddlers)
- Start-up costs for opening an additional location within an existing licensed program
- Health and safety upgrades and/or licensing compliance

Important note:

This grant pool will **NOT** fund:

- Workforce development
- Staff salaries/wages
- Quality enhancement of programs
- Rent and/or utilities

The review committee reserves the right to deny funding for projects that don't align with the grant purpose.

Application Questions

These questions should be answered through this [Formstack link](#). This PDF version is made available for your reference as you prepare your application.

Program Information

- Program Legal Name: _____
- Contact First & Last Name: _____
- Contact Job Title: _____
- Phone Number: _____
- E-mail Address: _____
- Address for primary place of business: _____
- Mailing address if different from place of business: _____
- Are you authorized to sign contracts on behalf of your agency? YES or NO
- If not, please provide the name, E-mail address, and job title of the person who is authorized to sign contracts: _____
- Is your program a subsidiary of or part of a larger organization? YES or NO
- If yes, please provide the legal name of the organization: _____
- Please select the option below that best describes your program:

- Licensed Group Child Care Home
- Licensed Child Care Center
- CT OEC license #: _____
- Are at least 50% of children you serve eligible (based on family income) for School Readiness, Care4Kids, Head Start, Early Head Start or Child Day Care funding? YES or NO
- Do at least 50% of the children served in your program live in New Haven? YES or NO
- Do you have a non-discrimination policy? YES or NO

Awardees may be asked to submit a copy of their policy

Program Overview

- Provide a brief description (2-3 sentences) about your child care program, including its history and the community(s) it serves. Imagine writing to reviewers who have no other knowledge of your program or proposal. (300-character limit)
- How long has your program been in operation? (Please provide # of years) _____
- How many infants/toddlers (ages 0-3 years old) do you currently have enrolled in your program? _____
- How many preschoolers (ages 3-5 years old) do you currently have enrolled in your program? _____
- Do you offer Evening (7pm-10 pm), Overnight or Weekend care? YES or NO
- If not, would you be looking to add a second shift to your program? YES or NO
- Does your program have any distinguishing characteristics (multi-lingual, special needs, night/weekend care, etc.)? (narrative 500-character limit)
- Have you received any special recognition (NAEYC accreditation, business/neighborhood/partnership awards, etc.)? (narrative 500-character limit)
- Is there any other important information you would like us to know about your program? (narrative 500-character limit)

Program Expansion Goal

- In 1-2 sentences describe your program expansion goal. Please include how many seats you anticipate being able to add if you receive the funds requested. Please specify how many infant toddler seats and how many preschool seats you would add through your project. (Narrative 300-character limit.)
- What is the total grant amount you are requesting to achieve this goal? (Please refer to maximum grant awards above and provide \$ amount) _____
- Will the requested grant amount cover the total cost of your proposal? YES or NO
- If not, what other funding do you have available to ensure that your project will be completed by August 2026? Please share specific amounts and funding sources.

Use of Grant Funds

- Describe in detail how you will spend the grant funds. Please provide contractor quotes and blueprints for any renovation projects you are planning to execute. (Narrative 1000 characters)
- If you were to receive this funding, please share the estimated time that you would be able to make these new seats available to the public (Please share the month and year).
- Please describe how you will support families transitioning from infant toddler to pre-school (either in your program or in another program). For programs with more infant toddler seats than pre-school seats, please describe how you will ensure that families do not lose their childcare if your program cannot accommodate them when their child turns 3. (Narrative 300 characters)

Readiness to Proceed

- Do you own the space where your child care business will operate? YES or NO
- If not, have you received approval from your landlord to do the proposed renovations? YES or NO
- If you have a lease, when does it expire? Please provide the date.

- Are you adding new licensed seats to an existing child care license? YES or NO
- If yes, what steps have you already taken to ensure that the plan you are proposing will pass OEC's licensing standards? Applicants will be asked to provide documentation of these steps.
 - Contacted your local licensing specialist
 - Completed Fire Approval
 - Completed Building Approval
 - Completed Zoning Approval
 - Completed Local Health Approval (including lead inspection where applicable)
 - OEC inspection has been completed
 - Submitted a change form through OEC
 - Submitted floorplan or sketch of plan for changes, including sinks and toilets
- Are you applying for a license in a new location? YES or NO
 - ⊖ If yes, what steps have you already taken to ensure that the plan you are proposing will pass OEC's licensing standards? *Please visit the OEC Licensing Application for more details on each of these steps if you are unfamiliar with them. Applicants will be asked to provide documentation of these steps.*
 - Completed and Submitted Notarized Affidavit for OEC
 - Completed Property History Form
 - Completed Fire Approval
 - Completed Building Approval
 - Completed Zoning Approval
 - Completed Local Health Approval (including lead inspection where applicable)

- Created Organizational Chart
- Obtained Certificates for Approved First Aid Training
- Obtained Certificates for Approved CPR Training
- Identified Consultants (education, health, dental, dietician, and social service)
- Created written policies, plans, procedures
- Received Food Service Certificate (Applicable if meals are served)
- Have indoor and outdoor floor plans
- Completed Water Supply Form (including all lead and radon testing)
- Submitted OEC Licensing Application
- Who is your OEC licensing contact? _____

Strategies for Support and Opportunity

- How does your program prioritize serving underserved populations in New Haven, such as low-income families, families with transportation challenges, children with varied levels of learning, and others? (narrative 1000-character limit)

Financial Readiness and Data Tracking

- If you receive this grant, you will be required to track and report on data such as how the funds were spent, the number of children and families served, participant demographics, and the impact of grant-funded activities. Do you commit to providing this data? YES or NO
- How will you ensure that the spending related to this grant will be tracked? What systems or tools will you use? (Narrative 300-character limit.)
- Please provide a detailed breakdown of your program demographics and proposed project budget. (Upload completed budget and demographics using the template linked on our [website](#) under “Early Care and Education Expansion Grant- “Centers and Group Homes.”)

Evaluation Criteria

Applications submitted by June 20, 2025 will be evaluated by a diverse committee of UWGNH staff. Answers will be reviewed and scored based on responses to the Application Questions listed above. Questions are weighted using the following breakdown of points:

- | | |
|---|---------------|
| • Program Priorities (Eligibility listed above) | 35 pts |
| • Program Overview | 15 pts |
| • Program Expansion Goal | 30 pts |
| • Use of Grant Funds | 30 pts |
| • Readiness to Proceed | 30 pts |
| • Support and Opportunity | 10 pts |
| • Financial Readiness and Data Tracking | <u>20 pts</u> |

Total Possible Points	170 pts
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Applications receiving 85 points or less (50% of the total possible points) will not be eligible to receive an award.

For questions, please contact Shelly Hicks, shicks@uwgnh.org

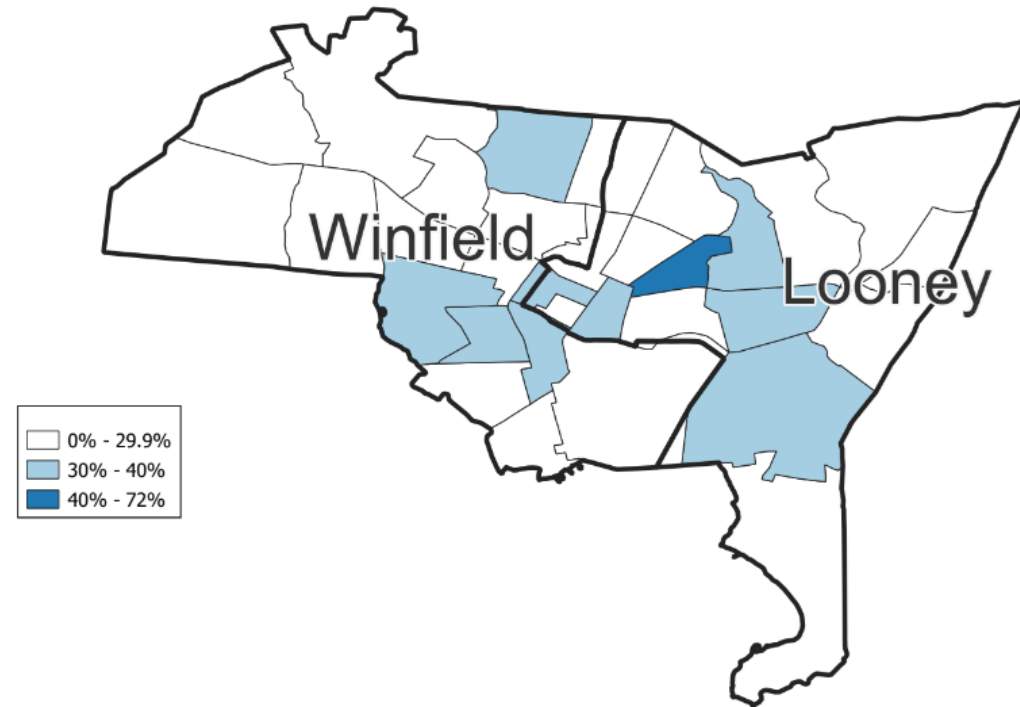
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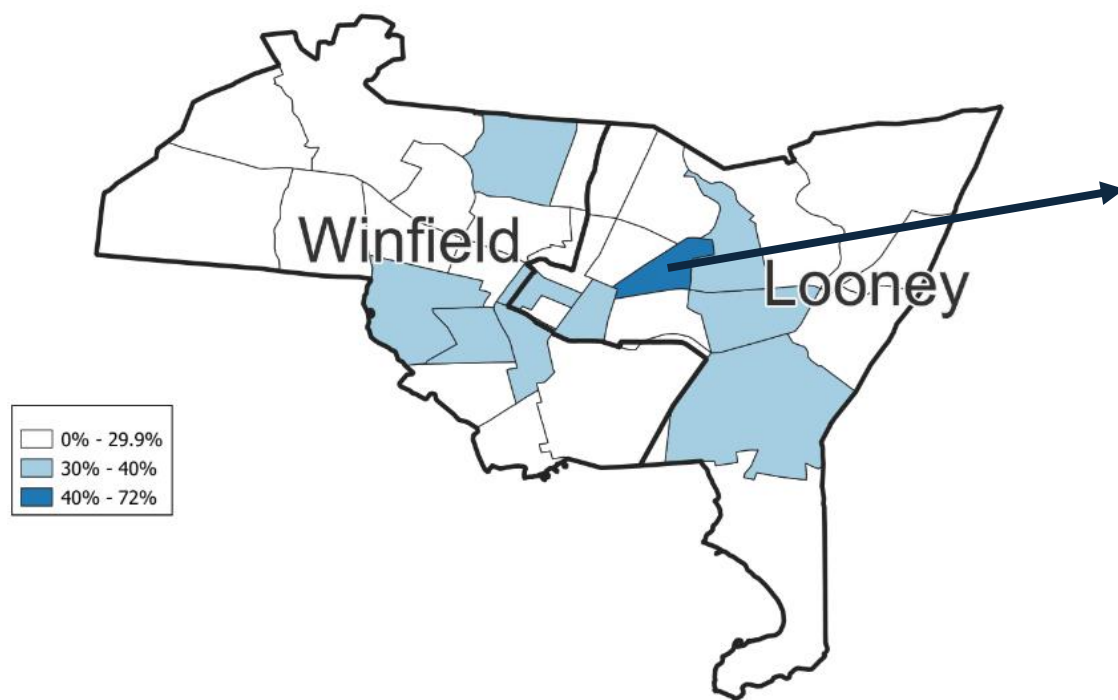
PLAN

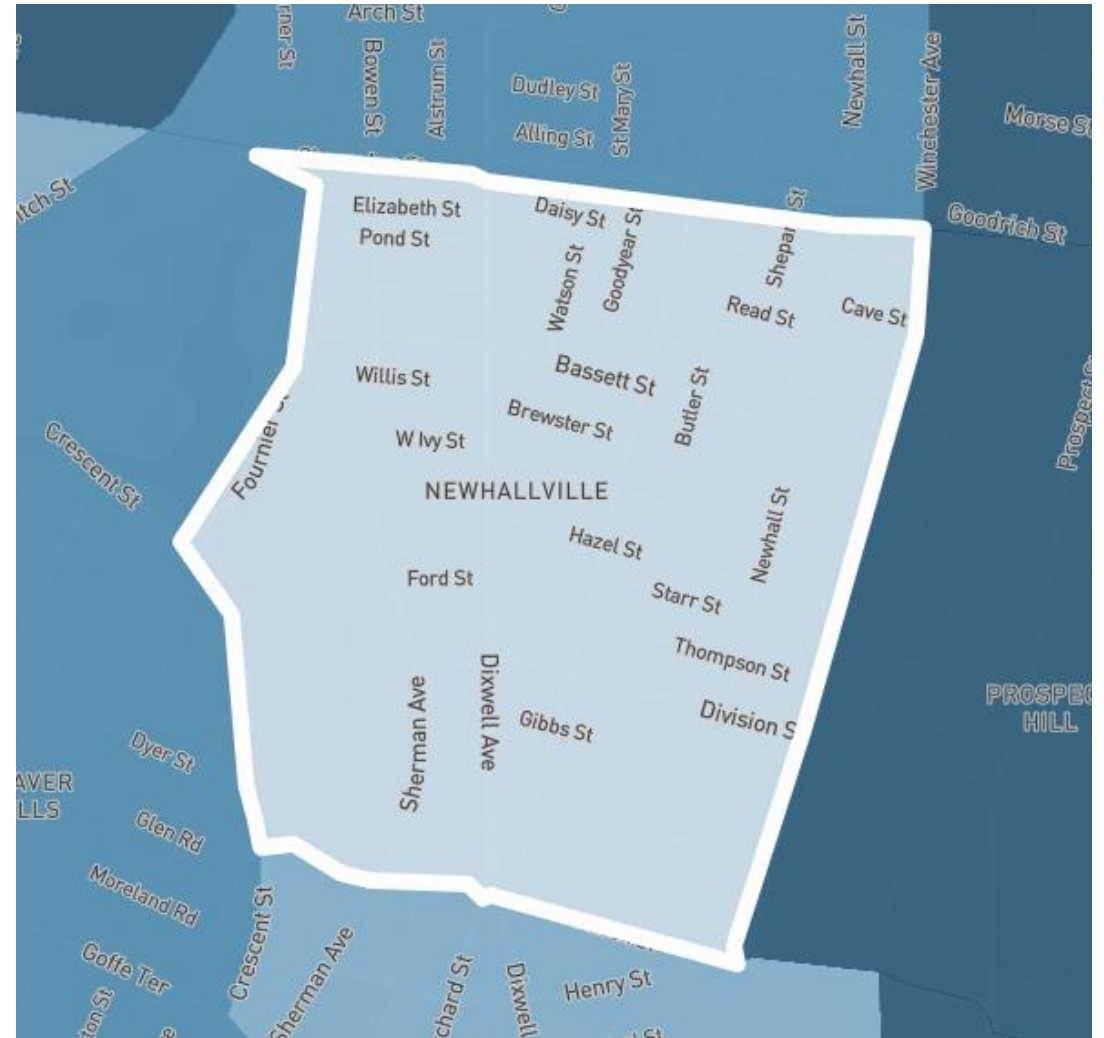
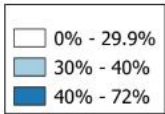
New Haven

PERCENTAGE OF POPULATION IN POVERTY BY CENSUS TRACT IN NEW HAVEN

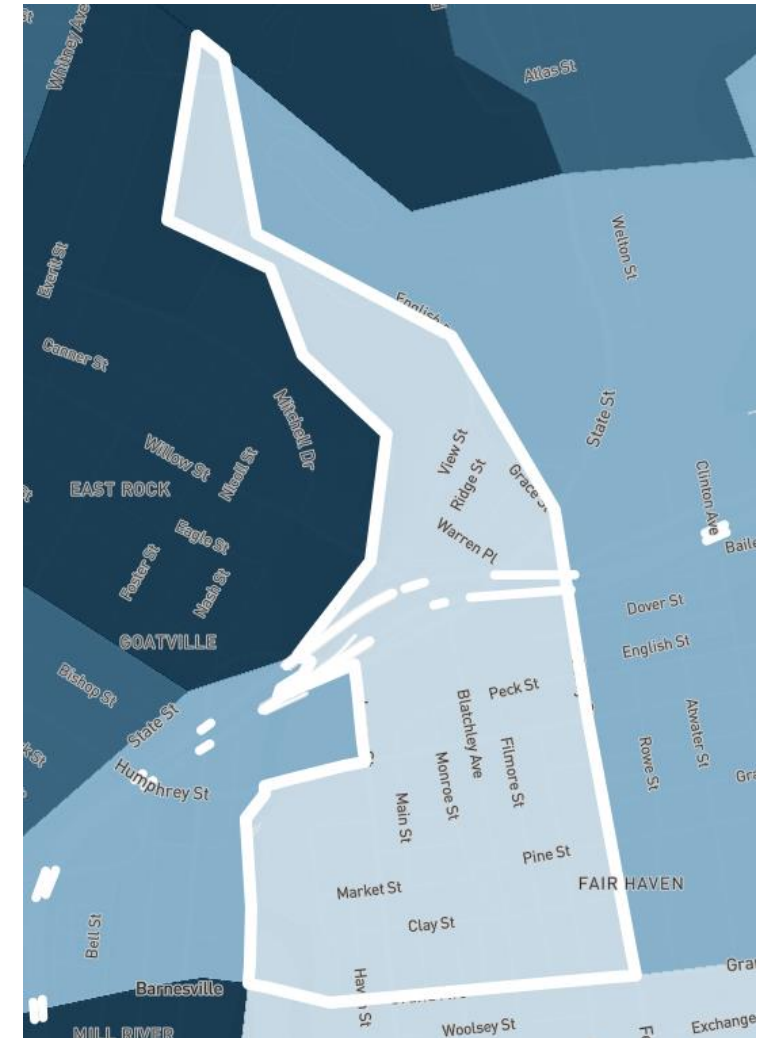
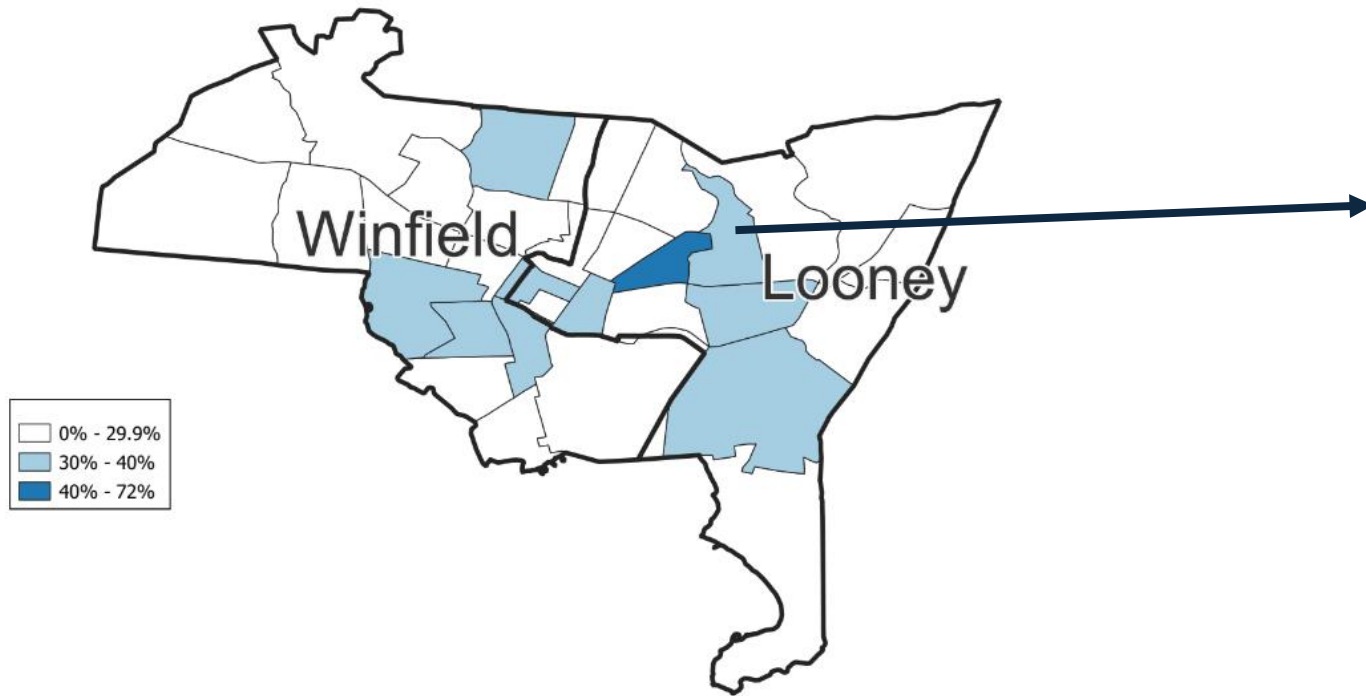


Census Tract: 1421

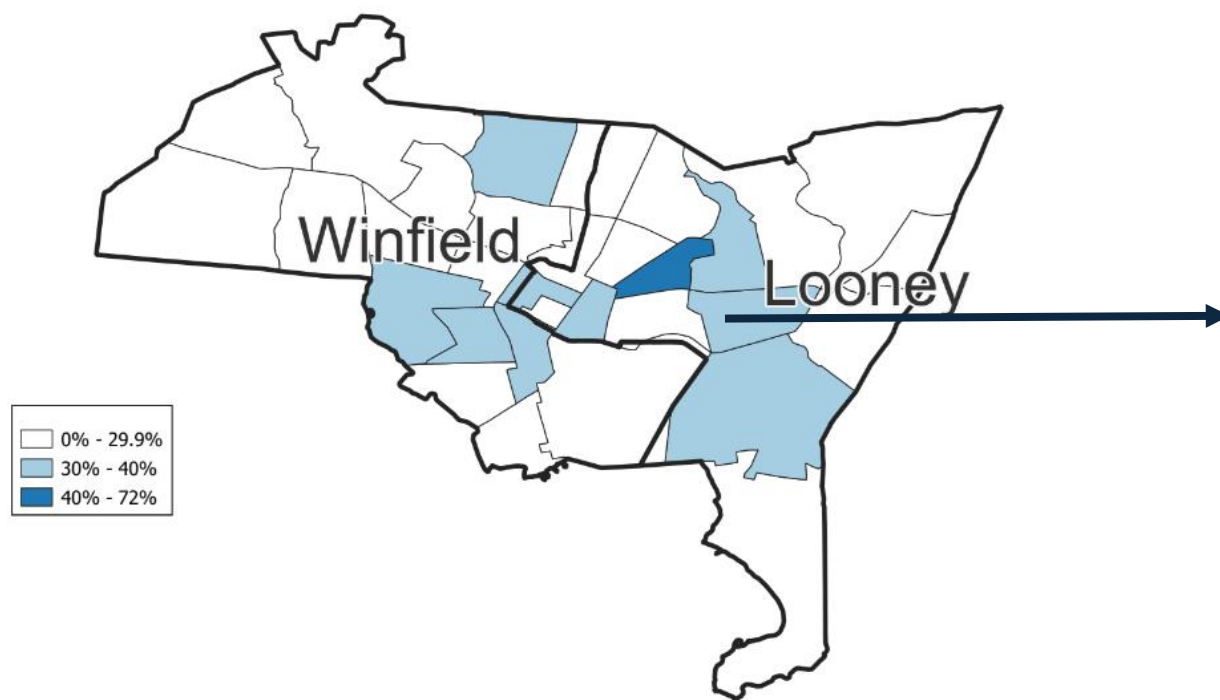




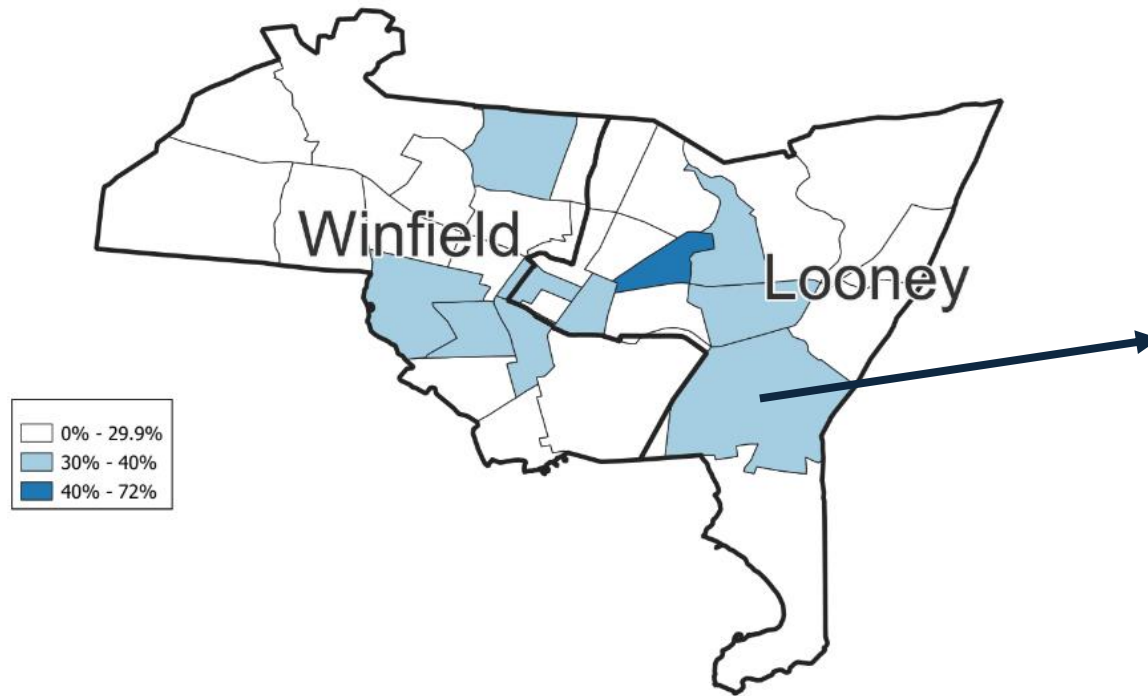
Census Tract: 1424



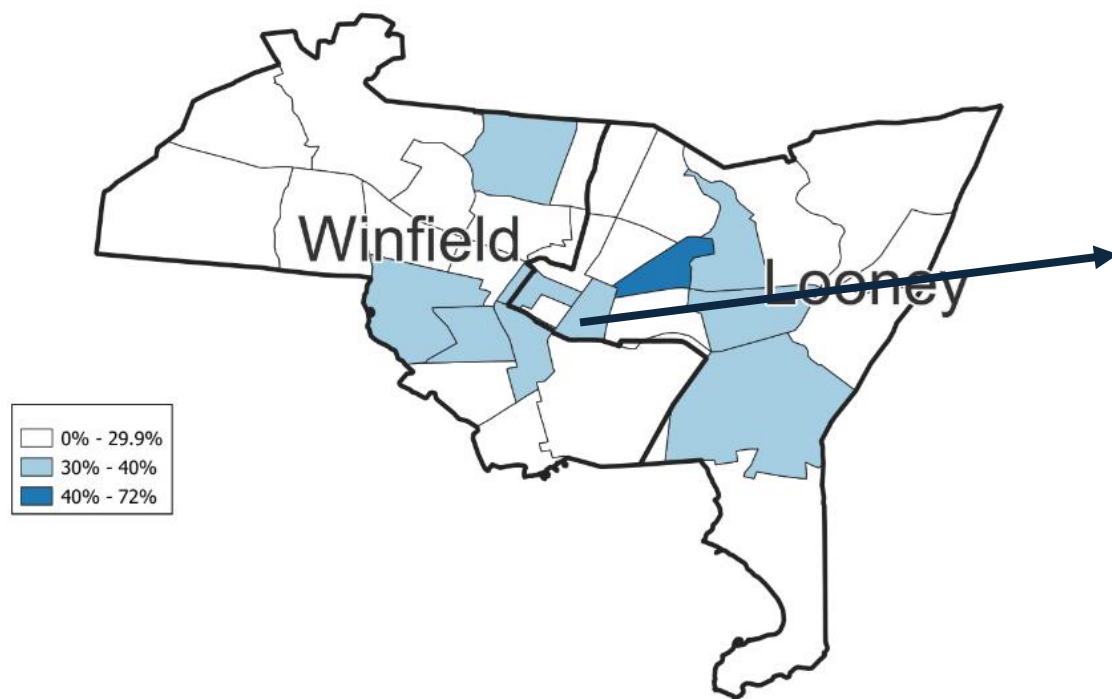
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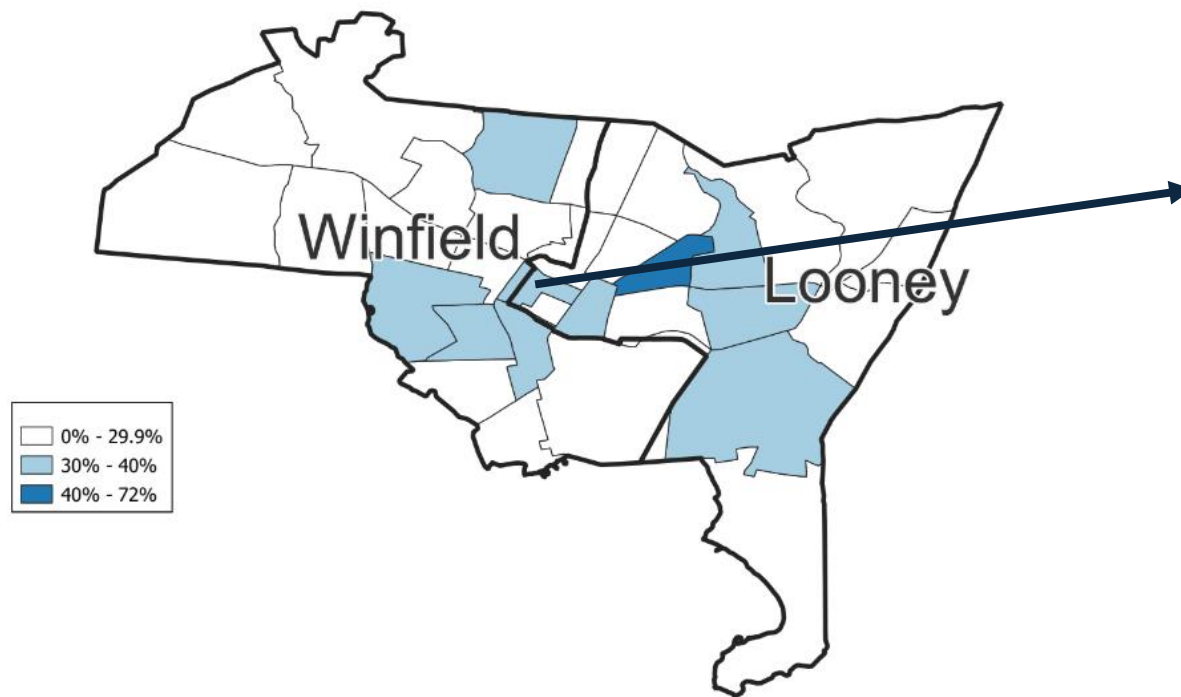
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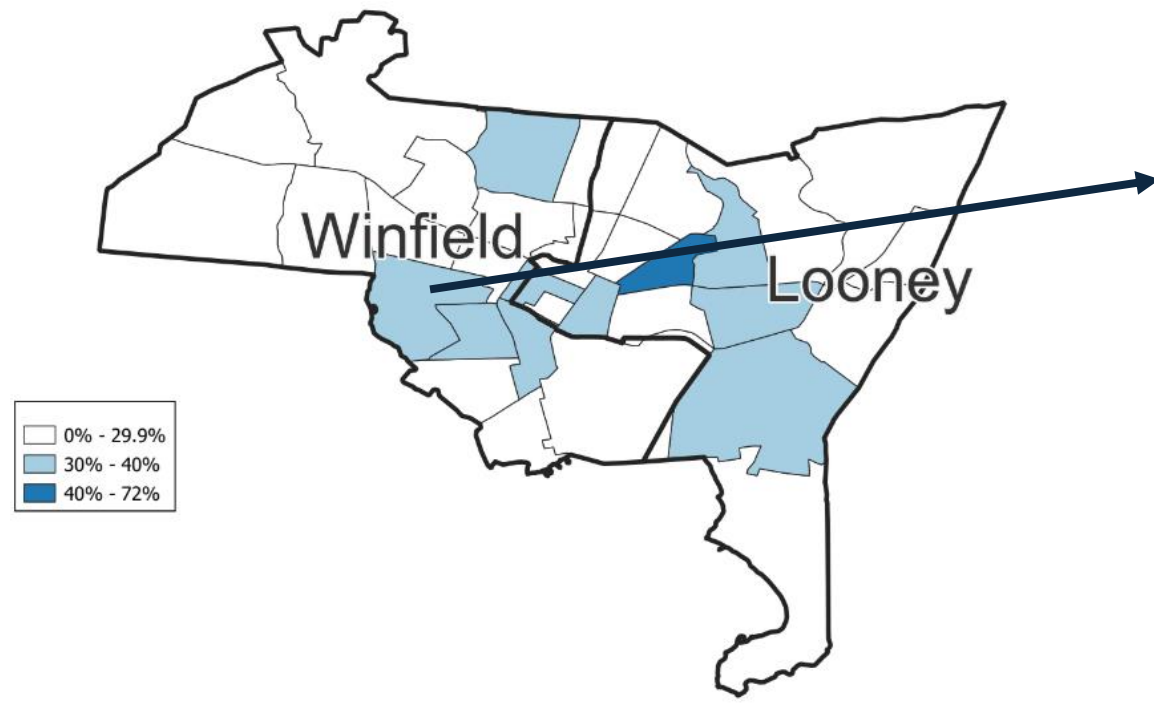
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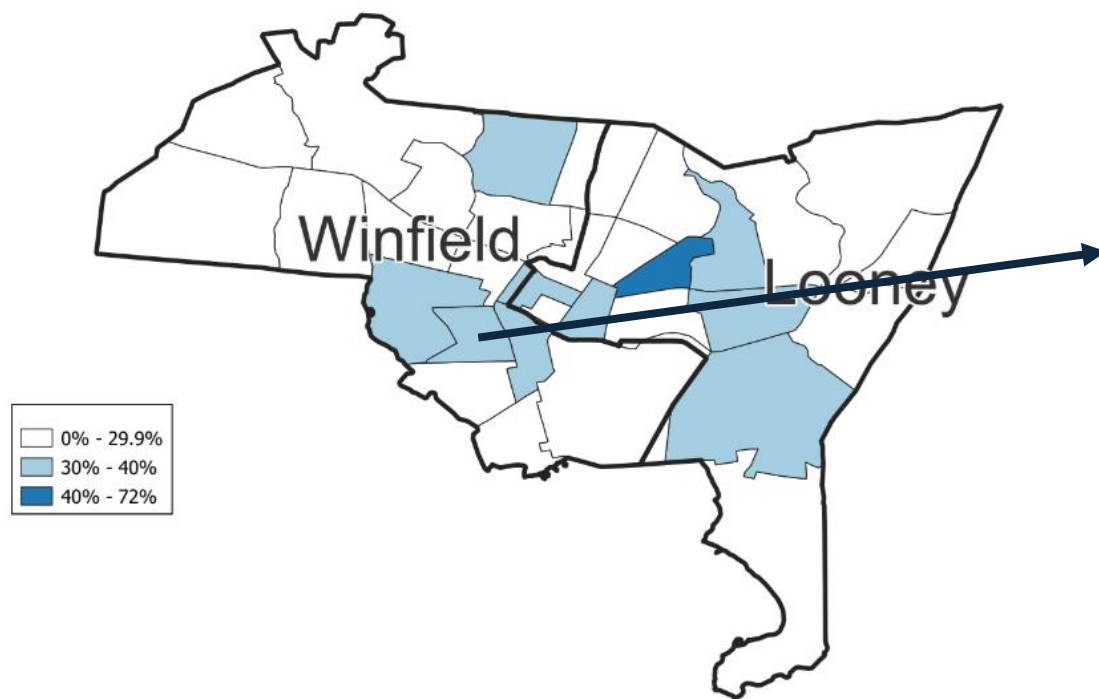
Census Tract: 3614



Census Tract: 1408



Census Tract: 1406



Census Tract: 1403

