



## **Application Information**

### **Minor Capital Transition Funding 2012**

#### **Things you need to know!**

Your request for funding will be considered based on a detailed application submission identifying needs as follows:

- Room and building renovations
- Playground renovations to reconfigure age groupings

Please note Minor Capital Transition Funding does not cover equipment or furniture.

**Please read all instructions carefully.** There is an application form for each of the categories above. You will find detailed instructions on the back of each form with specific examples.

Your application will be prioritized in accordance with the following:

- Participation in Quality First
- Program history
- Potential impacts of future Full Day Kindergarten (FDK) sites in 2012 or 2013
- Number of children receiving fee subsidy
- Loss of children to FDK in 2012 or 2013
- Inclusion involvement
- Financial history and viability
- Ministry of Education (EDU) and prior MCYS licensing history
- Local area income levels (will be applied by Halton staff)
- Full Day licensed programs

All the above require supporting documentation. Only those programs with supporting documentation as per instructions will be considered for funding.

Please note:

- Ensure you have addressed all areas of the application
- Ensure your application reaches us before the deadline of XXXX. We regret that any applications received after the due date will not be eligible for funding
- For programs with more than one location, photocopy the package and provide funding requests for each location separately
- For reimbursement, we require **original receipts** showing payment has been made. These must be forwarded to Halton Region before funds can be issued. Detailed instructions will be given with approval letters.
- Funding must be paid out by December 31, 2012. Renovations must be planned with appropriate timelines for funding distribution.

**Halton Region reserves the right to deny any or all funding applications.**

**Halton Region reserves the right to audit and ensure funding was spent as per approval.**



## Applicant Checklist Minor Capital Transition Funding

Complete all paperwork, and then complete this checklist (✓).  
This checklist must be returned with your application package.

Name of Child Care Program			
Operator			
Please check (✓)	✓		
Contact Information complete		(pg. 5)	
Acknowledgement to Reimburse, signed and dated		(pg. 6)	
<b>Itemized application forms for each category:</b> (Have you attached completed forms and two quotes as necessary?)	✓	<b>Total Requested</b> (including tax & shipping - Quote 1 from page 7,9)	
▪ Room and building renovations		\$	
▪ Playground renovations		\$	
<b>Grand Total</b>		\$	
<b>Supporting information (please be brief):</b>		<b>Notes</b>	
Are you enrolled in Quality First and in good standing? - Enrolment date - Current level			
Program history - Year opened			
Number of children receiving fee subsidy at this time and the number of children expected to receive subsidy in the Fall of 2012		April 2012	Sept. 2012
Inclusion - do you have children with special needs integrated into your program? <b>(Yes/No, brief info)</b>			



Have any of Phase One to Three FDK schools had an impact, or will Phase Four have an impact on your enrolment? Please list the schools below (see attached school listing for reference).

Phase One	Phase Two	Phase Three	Phase Four
<input type="checkbox"/> N/A	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A	<input type="checkbox"/> N/A

What impact has FDK had on your program? E.g., decline in enrolment, decrease in wait list, more demand for younger children, hiring RECE's etc.

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Will this renovation change your licensed capacity?  Yes  No

Current capacity \_\_\_\_\_ Proposed capacity \_\_\_\_\_

In which age group will the new spaces be?

Infant <input type="checkbox"/> How many? ____	Toddler <input type="checkbox"/> How many? ____
Preschool <input type="checkbox"/> How many? ____	



Provide a brief overview of your program and how the funding for the changes you wish to make will support your program.

Have you consulted with your Ministry Program Advisor about any proposed changes?

- Yes
- No
- N/A

Provide brief details of the consultation:

Other comments:

**Return complete package to:**

Dawn Monckton,  
Halton Region - Children's Services Division  
690 Dorval Drive, 5<sup>th</sup> floor, Oakville, ON L6K 3X9



Date Stamp
Approval status
Halton Region use only

## Application Package

### Minor Capital Transition Funding 2012

Date:	
Name of Operator	
Address of Operator	
Name of Child Care Program	
Address of Child Care Program	
Contact Person	
Phone Number	
Licensed Capacity	
Application Completed By:	Name:
	Position:
	Signature:

Please note:

- Incomplete application packages will be returned.
- For programs with more than one location, please photocopy the package and provide funding requests for each location separately.
- For reimbursement, we require original receipts showing payment has been made. These must be forwarded to Halton Region before funds can be issued. Detailed instructions will be given with approval letters.

**Halton Region reserves the right to deny any or all funding applications.**  
**Halton Region reserves the right to audit and ensure the funding was spent as per approval.**

**Return to:** Dawn Monckton,  
 Halton Region - Children's Services Division  
 690 Dorval Drive, 5<sup>th</sup> floor, Oakville, ON L6K 3X9

**Please keep a copy for your records!**



## Acknowledgement to Reimburse Halton Region Minor Capital Transition Funding 2012

TO: THE REGIONAL MUNICIPALITY OF HALTON

Name of Child Care Program	
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In consideration of receiving Minor Capital Transition Funding, I/we agree to:

- a) Notify Halton Region immediately in the event the child care program for which I/we received the funding ceases operation, dissolves, is sold or otherwise disposed of, commits an act of bankruptcy or changes corporate status. In such an event, Halton Region will determine if any reimbursement is required.
- b) Reimburse Halton Region for any amounts of funding received through the Minor Capital Transition Funding in excess of expenses that I/we actually incur.

I/We, \_\_\_\_\_ currently own the site or have a long-term lease of approximately five years.

Provide two Agency Authorized signatures – e.g., Board Members, Owner/Operators

Signature 1	Signature 2
_____ <b>Agency Authorized Signature</b> <small>"I/we have authority to legally bind the Child Care Service Provider."</small>	_____ <b>Agency Authorized Signature</b> <small>"I/we have authority to legally bind the Child Care Service Provider."</small>
Title: _____	Title: _____
Name (Print): _____	Name (Print): _____
Contact Phone No. _____	Contact Phone No. _____
Email _____	Email _____
Date: _____	Date: _____



## Itemized Room and Building Renovations Minor Capital Transition Funding 2012

Name of Child Care Program: \_\_\_\_\_

	<b>Room and Building Renovations</b>  Item	Expected date renovation will take place	Quote 1 Cost (low)	Quote 2 Cost (medium)
	Supporting documentation required – see other side for further instruction.		Include company name and cost. See other side for further instruction.	
1				
2				
3				
4				
5				
6				
Sub Total – Add rows 1 – 6			\$	
Tax – Multiply Sub total by 13% . Add Tax and Sub total together			\$	
Note:		Shipping Cost	\$	
Note:		Grand Total Carry totals over to Applicant check list	\$	\$

Photocopy this page if you require more space. See other side for further instruction. **Please keep a copy for your records!**



## Instructions for Itemized Room and Building Renovations Minor Capital Transition Funding 2012

Renovations include, but are not limited to the following items:

- Walls
- Flooring
- Doors
- Cabinets/countertops
- Painting the renovated space
- Washrooms
- Windows

### ***Quotes are required for all items in this category***

- **Two** quotes are required for all renovation projects
- Attach quotes for renovations to **this** form

Please note - Funding must be paid out by December 31<sup>st</sup>, 2012. Renovations must be planned with appropriate timelines for funding distribution.

Supporting Documentation:

- **Approval is needed from Ministry of Education, Child Care Quality Assurance and Licensing Branch** for all renovations and changes to program. Approval letter from must accompany application. For the initial request for funding this could be an email communication from the Program Advisor.





## Itemized Playground Renovations to Reconfigure Age Groupings Minor Capital Transition Funding 2012

Name of Child Care Program: \_\_\_\_\_

	<b>Playground Renovations</b>  Item	Expected date renovation will take place	Quote 1 Cost (low)	Quote 2 Cost (medium)
	Supporting documentation required – see other side for further instruction.		Include company name and cost. See other side for further instruction.	
1				
2				
3				
4				
5				
6				
Sub Total – Add rows 1 – 6			\$	
Tax – Multiply Sub total by 13% . Add Tax and Sub total together			\$	
Note:		Shipping Cost	\$	
Note:		Grand Total Carry totals over to Applicant check list	\$	\$

Photocopy this page if you require more space. See other side for further instruction. **Please keep a copy for your records!**



## Instructions for Playground Renovations to Reconfigure Age Groupings Minor Capital Transition Funding 2012

Renovation or repair includes, but is not limited to the following items:

- Shade Protection -structure
- Re-surfacing
- Trees (for shade)
- Large Equipment
- Shed
- Repair/retrofit fencing

### ***Quotes are required for all items in this category***

- **Two** quotes are required for all playground renovation projects
- Attach quotes for playground renovations to **this** form

Please note - Funding must be paid out by December 31<sup>st</sup>, 2012. Renovations must be planned with appropriate timelines for funding distribution.

Supporting Documentation:

- **Approval is needed from Ministry of Education, Child Care Quality Assurance and Licensing Branch** for all renovations and changes to program. Approval letter from must accompany application. For the initial request for funding this could be an email communication from the Program Advisor.