



Illinois State Board of Education

100 North First Street, Springfield, Illinois 62777-0001

ATTACHMENT 1

Uniform Application for State Grant Assistance

Agency Completed Section	
1. Type of Submission	<input type="checkbox"/> Preapplication <input checked="" type="checkbox"/> Application <input type="checkbox"/> Changed/Corrected Application
2. Type of Application	<input checked="" type="checkbox"/> New <input type="checkbox"/> Continuation (i.e. multiple year grant) <input type="checkbox"/> Revision (modification to initial application)
3. Date/Time Received by State <i>Completed by State Agency upon Receipt of Application</i>	
4. Name of the Awarding State Agency	Illinois State Board of Education
5. Catalog of State Financial Assistance (CSFA) Number	
6. CSFA Title	EARLY CHILDHOOD BLOCK GRANT - PREVENTION INITIATIVE FOR BIRTH TO AGE 3 YEARS
Catalog of Federal Domestic Assistance (CFDA) <input checked="" type="checkbox"/> Not applicable (No federal funding)	
7. CFDA Number	
8. CFDA Title	
9. CFDA Number	
10. CFDA Title	
Funding Opportunity Information	
11. Funding Opportunity Number	
12. Funding Opportunity Title	PREVENTION INITIATIVE FOR BIRTH TO AGE 3 YEARS
13. Funding Opportunity Program Field	EARLY CHILDHOOD
Competition Identification <input checked="" type="checkbox"/> Not Applicable	
14. Competition Identification Number	
15. Competition Identification Title	

**Uniform Application for State Grant Assistance
Illinois State Board of Education**

Applicant Completed Section

APPLICANT NAME (District Name and Number, if applicable)	REGION COUNTY DISTRICT TYPE CODE
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16.	Legal Name (Name used for DUNS registration and grantee prequalification)	
17.	Common Name (DBA)	
18.	Employer/Taxpayer Identification Number (EIN, TIN)	
19.	Organizational DUNS Number	
20.	SAM CAGE Code	
21.	Business Address (Street, City, State, County, Zip Code + 4)	

Applicant's Organizational Unit

22.	Department Name	Business Administration Office
23.	Division Name	

Applicant's Name and Contact Information for Person to be Contacted for *Program* Matters involving this Application

24.	First/Last Name	
25.	Suffix	
26.	Title	
27.	Organizational Affiliation	
28.	Telephone Number (Include Area Code)	
29.	Fax Number (Include Area Code)	
30.	E-Mail Address	

Applicant's Name and Contact Information for Person to be Contacted for *Business/Administrative Office* Matters involving this Application

31.	First/Last Name	
32.	Suffix	
33.	Title	
34.	Organizational Affiliation	
35.	Telephone Number (Include Area Code)	
36.	Fax Number (Include Area Code)	
37.	E-Mail Address	

**Uniform Application for State Grant Assistance
Illinois State Board of Education**

Applicant Completed Section (Continued)

Areas Affected

40.	Areas Affected by the Project (cities, counties, state-wide) <i>Add Attachments (e.g., maps), if needed</i>	
41.	Legislative and Congressional Districts of Applicant	
42.	Legislative and Congressional Districts of Program / Project <i>Attach an additional list, if needed</i>	

Applicant's Project

43.	Description Title of Applicant's Project <i>Text only for the title of the applicant's project.</i>	
44.	Proposed Project Term	Start Date: <u>July 1, 2020</u> End Date: <u>June 30, 2021</u>
45.	Estimated Funding <i>(Include all that apply)</i>	<input checked="" type="checkbox"/> Amount Requested from the State: \$ _____ <input checked="" type="checkbox"/> Applicant Contribution (e.g., in kind, matching): \$ _____ <input type="checkbox"/> Local Contribution: \$ _____ <input type="checkbox"/> Other Source of Contribution: \$ _____ <input type="checkbox"/> Program Income: \$ _____ <input checked="" type="checkbox"/> Total Amount: \$ <u>00</u>

Applicant Certification:

By signing this application, I certify (1) to the statements contained in the list of certifications* and (2) that the statements herein are true, complete and accurate to the best of my knowledge. I also provide the required assurances* and agree to comply with any resulting terms if I accept an award. I am aware that any false, fictitious, or fraudulent statements or claims may subject me to criminal, civil or administrative penalties. (U.S. Code, Title 18, Section 1001)

(* The list of certification and assurances, or an internet site where you may obtain this list is contained in the Notice of Funding Opportunity.

I agree

Authorized Representative

46.	First/Last	
47.	Suffix	
48.	Title	
49.	Telephone Number <i>(Include Area Code)</i>	
50.	Fax Number <i>(Include Area Code)</i>	
51.	E-Mail Address	
53.	Signature of Authorized Representative	
54.	Date Signed	



Illinois State Board of Education

Early Childhood Department
100 North First Street, E-225
Springfield, Illinois 62777-0001

FY 2021
PREVENTION INITIATIVE BIRTH TO THREE

APPLICANT OVERVIEW

DIRECTIONS: Complete the following Proposal information for the designated administrative agent. Include information specific to this application only.

PROPOSED PREVENTION INITIATIVE BIRTH TO THREE PROGRAM INFORMATION

Complete all that apply. Do not duplicate children between the PI Programs.

	Pregnant Women to Be Served* <i>To be served at any point in time (Case Load)</i>	Children to Be Served* <i>To be served at any point in time (Case Load or Classroom)</i>	Dollar Amount of Application	Cost per child in this Application <i>(Dollar amount of proposal divided by Number of children served.)</i>
<input type="checkbox"/> Home Visiting PI Program	_____	_____	_____	_____
<input checked="" type="checkbox"/> Child Care Center-Based PI Program	_____	<u>112</u>	<u>1.65M</u>	<u>14750</u>

* Pregnant women and children should not be duplicant counts.

Will children in center-based services in this application be in a:

- Half Day Sessions
- Full Day Sessions

What setting will the children in this application be served:

- Classroom
- Family Child Care Homes
- Home Visiting (Evidence-based)

What other funding do you receive to support the children in this application:

- Child Care Assistance Program (CCAP)
- Early Head Start (EHS)
- Illinois Department of Human Services (IDHS)
- Maternal Infant Early Childhood Home Visiting (MIECHV)
- Other _____

TYPE OF AGENCY (Check only)

- School District
- Regional Office of Education
- Higher Education
- Community – Based Organization
- Child Care Center – Not-for-Profit
- Child Care Center – For-Profit
- Faith – Based Organization
- Other _____

PROGRAM MODEL FOR PARENT EDUCATION HOME VISITING

- | | | |
|---|---|---|
| <input type="checkbox"/> Baby TALK | <input type="checkbox"/> Parents as Teachers | <input type="checkbox"/> Nurse Family Partnership |
| <input type="checkbox"/> Early Head Start | <input type="checkbox"/> Healthy Families America | <input type="checkbox"/> Other: _____ |

SUPPLEMENTAL SERVICES HOME VISITING OR CHILD CARE CENTER-BASED

- | | | |
|--|---|---|
| <input type="checkbox"/> Doula Services | <input type="checkbox"/> Touchpoints™ | <input checked="" type="checkbox"/> Other: <u>Baby Talk</u> |
| <input type="checkbox"/> Fussy Baby Network® | <input type="checkbox"/> Abriendo Puertas/Opening Doors | |

Is this application written by an external grant writer (not employed by applicant)? Yes No

(Check one) Agency Staff Independent Contractor

Grant Writer

Superintendent/Authorized Agency Official

Print Name of Superintendent or Authorized Agency Official



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Springfield, Illinois 62777-0001

FY 2021
PREVENTION INITIATIVE BIRTH TO THREE

JOINT APPLICATION

All joint recipients for funding must complete the joint application form.

Number of districts
in Joint Application 0

DIRECTIONS: If joint application, enter below the information requested for the participating school districts/entities.

SCHOOL DISTRICT/ENTITY		NAME AND SIGNATURE OF AUTHORIZED OFFICIAL
REGION, COUNTY, DISTRICT, TYPE CODE		NAME OF AUTHORIZED OFFICIAL
DISTRICT NAME AND NUMBER OR AGENCY/ENTITY NAME		
CITY	COUNTY	_____
		<i>Original Signature of Authorized Official</i>
REGION, COUNTY, DISTRICT, TYPE CODE		NAME OF AUTHORIZED OFFICIAL
DISTRICT NAME AND NUMBER OR AGENCY/ENTITY NAME		
CITY	COUNTY	_____
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REGION, COUNTY, DISTRICT, TYPE CODE		NAME OF AUTHORIZED OFFICIAL
DISTRICT NAME AND NUMBER OR AGENCY/ENTITY NAME		
CITY	COUNTY	_____
		<i>Original Signature of Authorized Official</i>
REGION, COUNTY, DISTRICT, TYPE CODE		NAME OF AUTHORIZED OFFICIAL
DISTRICT NAME AND NUMBER OR AGENCY/ENTITY NAME		
CITY	COUNTY	_____
		<i>Original Signature of Authorized Official</i>



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FY 2021
PREVENTION INITIATIVE BIRTH TO THREE

JOINT APPLICATION

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REGION, COUNTY, DISTRICT, TYPE CODE		NAME OF AUTHORIZED OFFICIAL
DISTRICT NAME AND NUMBER OR AGENCY/ENTITY NAME		
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CITY	COUNTY	_____
		<i>Original Signature of Authorized Official</i>
REGION, COUNTY, DISTRICT, TYPE CODE		NAME OF AUTHORIZED OFFICIAL
DISTRICT NAME AND NUMBER OR AGENCY/ENTITY NAME		
CITY	COUNTY	_____
		<i>Original Signature of Authorized Official</i>



PROGRAM NARRATIVE

APPLICANT NAME (District Name and Number, if applicable)	REGION, COUNTY, DISTRICT, TYPE CODE
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Directions: Address question 1 in the Program Narrative section of the RFP.

The XXX Prevention Initiative proposes to serve 112 children between the ages of 6 weeks and 3 years old who come from an area with high levels of poverty. Children and families live in the XXX , XXX , or XXX school district, all designated as Tier I because of high levels of poverty and a large number of people in need.

XXX currently serves 500 Illinois children in its early learning centers, the most in the XXX . Proposed services will emanate from four XXX centers located, two in XXX and one each in XXX , and XXX . All four centers qualify as ExceleRate Gold and have earned accreditation through the National Administrator Credential (NAC). We also oversee a network of home providers across Illinois that approaches 1,000 children on a daily basis; we will access this network to recruit qualified infants, toddlers, and their families for this Prevention Initiative and then matriculate 3-year-olds to a quality preschool program that meets their unique needs.

Sitting on the banks of the XXX a once bustling manufacturing community commonly referred to as the "XXX ," the 1980s recession hit the XXX and XXX hard with large companies including XXX , XXX and XXX shutting their factories. Today, only XXX remains. It has taken decades for the area to recover economically from the dramatic cuts of 40 years ago. Deserted factories still dot the XXX , with developments only recently turning them into other types of venues or greenspace. Today, the community primarily houses service industries along with large companies such as XXX , XXX , and XXX , in addition to XXX In fact, of the 30 largest companies in the XXX , only five have XXX headquarters.

The 2018 Census Population Estimates Program counted XXX County residents. The 2018 Small Area Income and Poverty Estimates found that 14.2% of XXX residents – more than 20,000 people – lived in poverty, more than the national average of 11.8% and state average of 12.1%. XXX 's per capita income of \$28,595 fell below the national average of \$32,621 and state average of \$34,463.

XXX 's unemployment rate also exceeded state and national averages. According to the U.S. Bureau of Labor Statistics December 2019 data, XXX County had an unemployment rate of 5.1%, compared to state and national rates of 3.5%. Obviously the COVID-19 crisis has exacerbated those numbers locally and around the county with record unemployment. XXX County with its large service industry has taken a hit, although we will not know the extent for weeks or months. We do know that this crisis has hit the most vulnerable hardest with projected increases in poverty, homelessness, domestic violence and child abuse. According to the 2016 Population Estimates Program, 10,794 XXX children had not yet reached their fifth birthday; 5,393 qualified as infants or toddlers (under the age of 3). Of these, 3,026 or 56% lived between 0 and 200% of the federal poverty level, according to 2016 estimates. 829 of these children lived in extreme poverty, defined as between 0 and 50% of the federal poverty level. As another indicator of poverty, 53% of XXX school children qualified for the federal free and reduced lunch program. Current data likely mirrors 2016 data, until the recent COVID-19 crisis exacerbated poverty and other indicators of risk. XXX children also experience other factors that compound poverty and have a deleterious impact on their kindergarten readiness. For example, it has a large immigrant and refugee population, primarily from XXX , XXX , and XXX with smaller numbers from other XXX countries. Across XXX , foreign-born residents comprise 8% of the population or nearly 11,500 individuals. 71.1% of residents indicate their race as White, leaving 41,473 residents who come from a minority group, mostly Hispanic or Latino (13%) or Black or African American (11%).

13.5% of XXX children under the age of 5 – 1,450 kids – speak a language other than English at home. XXX School District students – the largest district from which we will draw students for the proposed Prevention Initiative – speak more than 34 languages, not including dialects; most non-native English learners in that district speak Spanish, Karen, Kirundi, Swahili, or Arabic. All totaled, 11% of XXX School District students speak a language other than English as their primary language. The other two districts from which we will draw have similar numbers of English language learners: XXX with 13% and XXX with 23%.

XXX residents also have lower educational attainment than many other communities. The 2018 Census Population Estimates Program found that 88.9% of residents older than 25 had earned a high school degree or higher, leaving nearly 16,000 residents without a high school diploma, a percentage consistent with state and national data. However, only 23.2% of XXX residents had earned at least a bachelor's degree, compared to 31.5% nationally and 34.1% across the state. Lower educational attainment often equates to lower income. As the data in Question 2 demonstrates, these school districts also have higher rates of truancy, chronic absenteeism, teen pregnancies, and dropout than state or national averages which qualifies them as Tier I districts.

These data clearly indicate that the proposed XXX Prevention Initiative program will serve an area with high levels of poverty among its families and, more importantly, among its children from 6 weeks to three years of age.



PROGRAM NARRATIVE

APPLICANT NAME (District Name and Number, if applicable) XXX	REGION, COUNTY, DISTRICT, TYPE CODE XXX
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Directions: Address question 2 in the Program Narrative section of the RFP.

IECAM data and the Gap in Slot Analysis (Attachments 12 and 13) further demonstrate that XXX has a high number of children who experience poverty and other characteristics that qualify them as "at-risk." Furthermore, as elaborated below, their home and community environments give them language, cultural, or economic disadvantages, qualifying them as the most in need of the services provided by the Prevention Initiative program. However, XXX has no Early Head Start Program to meet the needs of these most at-risk children and families; most communities of our size and demographics do. XXX looks to fill that gap with this proposed Prevention Initiative program.

Because a disproportionately high number of at-risk children come from low-income families, we initially demonstrate that this program will serve a large at-risk population in three ways. First, we will offer the program in four locations that serve students from local Tier 1 school districts. Second, most children and families meet Department of Health and Human Services 2020Poverty Guidelines. Third, a majority receive XXX funds.

As Question 1 demonstrates, XXX's proposed Prevention Initiative program will draw students from a community with high levels of poverty. According to the Illinois State Board of Education Evidence-Based Funding for FY 2019 Quick Facts, all four of these centers sit in a TIER 1 SCHOOL DISTRICT. The XXX center enrolls students from the XXX, also a Tier 1 school district. Many children under the age of 3 in XXX also meet XXX GUIDELINES. As the data in Question 1 and Attachment 13 demonstrate, 3,026 XXX children under the age of 3 (56%) live in families that earn between 0 and 200% of the federal poverty level, according to 2016 estimates; 829 of these children lived in extreme poverty, defined as between 0 and 50% of the federal poverty level. These children will qualify for the proposed Prevention Initiative program based on poverty alone. Finally, more than 3,000 XXX children under the age of 3 qualify for XXX funds; 399 of these students currently use these funds to access quality early childhood education programs, leaving more than 2,600 eligible students not enrolled in early education.

Screening procedures outlined in Question 4 determine if a specific impoverished child and his or her family qualifies as "at-risk" as defined by this Prevention Initiative program. Specifically, XXX has a high number of children and families who come from the highest risk levels, namely homelessness, a language other than English as the primary language spoken in the home, teenage parents, single parent, or a history of child abuse or neglect, as enumerated below.

HOMELESS FAMILIES: No formal mechanism exists to count the number of XXX children under the age of 3 who experience homelessness. Instead, we can extrapolate from FY17 school district data that found 30 pre-K students and 81 kindergarteners without a permanent home.

FAMILIES WHO SPEAK A LANGUAGE OTHER THAN ENGLISH AT HOME: As noted in Question 1, the 2016 Census Population Estimates Program found that 1,888 XXX households (3.2%) speak limited English at home or have a primary language other than English, nearly half of these speak Spanish. IECAM data concurs that nearly 3% of XXX households qualify as "linguistically isolated" because they speak a language other than English. These children enter kindergarten less ready to learn because they fall behind their peers in language and early literacy skills.

FAMILIES WITH TEENAGE PARENTS: In 2015, 1.3% of XXX female teens – or 62 teens – had at least one child.

SINGLE PARENT FAMILIES: 2016 Census Population Estimates Program data indicated that 4,682 XXX children under the age of 5 (44%) lived with only one parent. Of these single parents, 3,775 (80%) worked, leaving 20% unemployed. According to IECAM data, 21% of XXX children age 5 and under (N=2,275) lived in a family with a female head of household and below the poverty level.

OTHER RISK FACTORS: Finally, students in the XXX, which our XXX and XXX centers feed, have higher rates of mobility (15%), chronic absenteeism (33%), truancy (31.7%) and dropout (8%) than their respective state averages (7%, 18%, 13.4%, 4%). XXX fares better than XXX but still falls below the state average on mobility (11% compared to state average of 7%), chronic absenteeism (20% compared to state average of 18%), and truancy (15.5% compared to a state average of 13.4%). Its dropout rate is only 3%, slightly better than the state average of 4%. XXX has 11% mobility (7% state average), 34% chronic absenteeism (18% state average), and a dropout rate of 5% (state average 4%). It has about half the rate of truancy with a 6.3% of its students chronically truant compared to the state average of 13.4%.



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PREVENTION INITIATIVE BIRTH TO THREE

PROGRAM NARRATIVE

APPLICANT NAME (District Name and Number, if applicable) XXX	REGION, COUNTY, DISTRICT, TYPE CODE XXX
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Directions: Address question 3 in the Program Narrative section of the RFP.

XXX has an insufficient number of programs and services to fully serve all children and families who live with conditions such as high levels of poverty that put them at-risk for future academic failure.

According to 2018 IECAM data, XXX has XXX licensed childcare centers with a capacity to serve 831 children under the age of 3. Of these, 369 slots exist in centers with an ExceleRate Silver rating and 344 in the centers that have earned an ExceleRate Gold rating. XXX operates 4 of the 14 Gold-rated centers and has 158 of these infants and toddler slots in the four Illinois locations proposed in this application for Prevention Initiative services. FY18 IECAM data shows that licensed family childcare providers add 421 slots in 144 sites, 57 of these slots at an ExceleRate Silver level and only 3 at ExceleRate Gold. When we add these data together, we find that only 1,252 slots exist across the county to serve 5,566 infants and toddlers, leaving a gap of 4,314 unserved infants and toddlers each year. Only 773 of these slots exist in agencies or home-based childcare providers at the Silver or Gold level of quality.

Attachment 13 shows that a significant gap of at least 1,660 slots exists for XXX children under the age of 3 who come from at-risk families (defined as below 200% of the Federal Poverty level). The true gap for these at-risk children and families likely exceeds this number because Attachment 13 does not consider the number of children and families who live above the 200% Federal Poverty Level enrolled in the 1,252 available slots. The fact that only 399 children use XXX funds to access early learning suggests that more than 2,500 low-income XXX children and families under the age of 3 do not attend an early learning program.

Anecdotal evidence also supports the lack of quality infant and toddler care opportunities for low-income families. Our experience tells us that longer waitlists exist for state-funded infants and toddler slots, largely due to the high teacher-to-child ratio and low reimbursement.

These data points also do not look at the comprehensive nature of services provided to at-risk children under the age of 3 and their families, only available slots. According to the Spring 2019 Illinois Risk and Reach Report, compiled by the Erikson Institute and based in part on IECAM data and data collected by Voices for Illinois Children, only 6.1% of eligible children statewide received the suggested scope of services defined by Illinois' Prevention Initiative program. The Risk and Reach report used risk factors including families who live at or below 200% of the federal poverty level, homelessness, English as their secondary language, or at least one teenage parent or parent without a high school education. XXX fared much worse than the state average with only with 1.9% of eligible kids served. These data suggest a gap of 2,856 XXX kids and families who qualify for Prevention Initiative services based on their risk factors but for whom no slots exist. As a result, these kids and families cannot get the critically important services that increase their chances of kindergarten readiness and future school success.

Unlike other counties of similar size, XXX does not have an Early Head Start program. We have one Prevention Initiative program, run by the XXX and housed in XXX buildings. This program serves 48 kids (12 kids from 15 to 24 months and 36 two-year-olds) in three sites (6 classrooms), leaving most at-risk XXX children and families without the additional services and support they need to thrive and for their children to enter kindergarten ready to learn.

This grant will help XXX families with infants and toddlers who live in poverty and with other risk factors better manage those risks. Opening infant and toddler slots dedicated to those most at risk provides quality early education for low-income families. The proposed XXX Prevention Initiative will more than double the county's capacity to work with the most at-risk infants and toddlers and their families with 112 more Prevention Initiative slots, staffed and run by XXX, to meet the needs of more at-risk children and families in our community. This will bring the total number of at-risk infants, toddlers and their families served to 160.



PROGRAM NARRATIVE

APPLICANT NAME (District Name and Number, if applicable) XXX	REGION, COUNTY, DISTRICT, TYPE CODE XXX
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Directions: Address question 4 in the Program Narrative section of the RFP.

To identify the 112 children and families served by the proposed XXX Prevention Initiative program, we will use weighted eligibility criteria and indicators based on the family's level of poverty and other indicators of child and family risk for which local service gaps exist. We base these criteria on the XXX Form provided in the Illinois Prevention Initiative Implementation Manual (2013). We find this form comprehensive and consistent with the needs we see in our at-risk populations and will adopt it for our proposed program.

XXX XXX t Specialists, hired specifically for this program, will serve as a prospective family's first contact with the program. They will answer general enrollment questions, tour the facilities with families to help them make an enrollment decision, facilitate completion of enrollment intake forms, and ease the family and child's transition into a XXX classroom.

Prior to enrollment, the XXX Specialist will screen all families for the XXX and other financial support programs based on the income eligibility requirements of the XXX . Those who qualify for financial support will complete a series of forms and verify income eligibility by identifying sources of income and expenses to determine their level of poverty. The family and child's file will retain proof of parental income verification and/or school enrollment.

For enrollment qualification for the proposed Prevention Initiative program, families with children under the age of 3 who qualify for the XXX and live within Tier I school district boundaries will undergo additional screening to assess their risks. With parental consent, the XXX Specialist and XXX Consultant will administer the XXX ® and XXX ®. These research-based tools qualify as evidence-based as defined by the Department of XXX Children and Families and appear on the administration's website as meeting the evidence-based program model criteria. Including outcomes of these tool will broaden the scope of the assessment to identify environmental factors beyond poverty and other demographic indicators that may adversely impact the child's development and school readiness. The XXX and XXX ® provides reliable, accurate developmental and social-emotional screening for children younger than 6.

Drawing on parents' knowledge, this questionnaire pinpoints developmental progress to catch delays in young children so teachers and caregivers can meaningfully develop next steps in learning, intervention, or monitoring. The XXX tool asks about incidences of trauma or abuse that may have a short-term or long-term impact on the child's social, physical, and emotional development. The higher number of adverse experiences that the child or parent has, the higher the risk for deleterious impacts on school readiness and future academic success.

A structured interview using the Parent Interview Form Sample (Illinois Prevention Initiative Implementation Manual, 2013) will further identify the children and families that most need Prevention Initiative services. Blending all of these data sources together, the program will base enrollment criteria on living in a high-poverty school district or coming from an impoverished household as well as how these factors have already impacted or will likely impact the child or family in order to focus services on those children and families at greatest risk and most in need of services.

Non-native English-speaking parents will have the option to have a translator present, either one identified by the family; secured through our XXX , an XXX funded program that regularly works with immigrants, refugees, and non-native English speakers; or a partner agency.

Once the family completes the assessment tools, the XXX Specialist will enter the results into the weighted Eligibility Form, adapted from the sample provided in the Illinois Prevention Initiative Implementation Manual (2013). The eligibility form will place greatest weight on family homelessness, involvement in the Illinois Department XXX system, living in deep poverty (between 0 and 50% of the Federal Poverty Level), and enrollment in or eligibility for an Early Intervention program. Each of these items has a value of 50 points.

Criteria that indicate the child has developmental delays as measured on the XXX and XXX or exposure to trauma as measured on the XXX receive 10 points each. Indicators in this section consider factors such as 2 or more developmental delays; member of the household serving in the armed forces; history of substance abuse or tobacco use in the home; chronic terminal or mental illness of the child or household member; death in the immediate family; parent or caregiver with a history of chronic incarceration; high mobility or transience; child experiencing any trauma; and a child with high lead levels.

Self-reported data that earn 10 points each include primary language other than English; immigrant or refugee status; parent or caregiver younger than 21, without a high school diploma or GED, or with low student achievement; family earning between 50 and 100% of the Federal Poverty Level; member of the household with a developmental delay or disability; non-parental caregiver; child born very prematurely, with low birth weight, prolonged stay in the Neonatal Intensive Care Unit, or failure to thrive; prenatal delay or diagnosis; and geriatric pregnancy.

The final set of indicators – worth 5 points each – include receiving services from another agency, social or geographic isolation, a parent had his or her first child as a teen, one identified developmental delay, single parent or caregiver, family earning between 100 and 200% of the Federal Poverty Level, and the child has other health issues.



PROGRAM NARRATIVE

APPLICANT NAME (District Name and Number, if applicable) XXX	REGION, COUNTY, DISTRICT, TYPE CODE XXX
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Directions: Address question 5 in the Program Narrative section of the RFP.

Upon completion of the Prevention Initiative Eligibility Form outlined in Question 4, the XXX Specialist will total the scores and, in consultation with the XXX Consultant, Site Supervisors and Prevention Initiative Onsite Director, develop a final enrollment recommendation that targets children and families most in need of services. As questions 2 and 3 demonstrate, all children and families we serve live within Tier I district boundaries and in a community with a documented gap in local services. Further evidence of this gap comes from local school districts that report that 1 in 7 children come to kindergarten without the tools to learn, making school readiness a clear gap in local service provision for children under 5, especially those that come from low-income and at-risk households.

The children and families with the highest scores on the Prevention Initiative Eligibility Form outlined in Question 4 receive priority consideration for open slots in the proposed XXX Prevention Initiative program. We will maintain a waiting list of children and families who qualify but for whom no open slots exist and refer them to other high-quality community childcare programs. Regardless of final enrollment status, we will maintain a copy of the Eligibility Form and any notes on qualifying status in the child and family's file. Once enrolled in the proposed Prevention Initiative program, the teacher will administer the XXX questionnaire to parents. These 40 research-based, positive internal qualities and external resources influence young people's development to help them become caring, responsible, and productive adults. Teachers will use the results of all screenings and assessments to work with parents (or caregivers), the XXX Consultant, XXX Specialist, Site Supervisor, and Prevention Initiative Onsite Director to target the specific needs of each child and family. As outlined in Question 12, each child and family will have an individualized plan that implements specific aspects of XXX, XXX, XXX, XXX, and XXX that builds on our 50 years working with the most at-risk students in the community. Our communication system includes a formal case review with families and allows for collaborative, unduplicated provision of services both internally and with referral partners (see Question 10) to improve child and family resilience.

For example, based on the results of the XXX questionnaire, we will help parents identify, build, and utilize their personal or social network asset(s). The XXX assessment identifies toxic stressors in the child's life. The XXX Consultant, teachers, XXX Specialist, Site Supervisor, and Prevention Initiative Onsite Director will create a team with the parents to design and implement learning strategies in the classroom and at home to assure that the child can adapt to his or her environment in a way that encourages learning and healthy development.

We will provide resources to help the family reinforce classroom learning to become their child's best first teacher and advocate. Family activities – designed by the XXX Specialist – will help parents and other caregivers positively influence child development, family effectiveness, and school readiness in the areas the assessments identify as most needed. XXX has an online assessment tool that teachers and families will use to track their child's progress. Families will view the ongoing assessment, add comments, and view "typical" development to aid in their work with their child. The home visit program will use XXX, a community-based family support model that provides a framework to nurture school readiness and optimal child development to support infants, toddlers, and their parents. The relationship-based approach works with families through implementation of critical concepts and age-specific protocols designed to create a framework for each encounter between the parent and child.

Finally, based on the results of the initial assessments, the XXX Specialist and/or XXX Consultant will target services beyond those specifically focused on the classroom and the child's academic and social-emotional growth by referring the family to the other services that XXX's parent company offers or through community partnerships (see Question 10). For example, our XXX has an on-site food pantry, clothing, computers, and relationships with other local childcare providers. We also collaborate with the XXX Food Bank to provide food to further reduce food insecurities. Our XXX works with community agencies, the Department of XXX, and community partners to provide immediate and intensive case management for families facing a crisis as well as linguistically and culturally sensitive case management and services for immigrants and refugees to help them secure services to meet their urgent needs. Coordinators at both programs connect people to community resources such as counseling, health services, employment, housing, and the full range of XXX's state-funded resources to target services that meet each person's and family's immediate needs. A partnership with XXX Credit Union also provides financial education. All Prevention Initiative families will have access to these free services with referrals and "soft-handoffs" from Prevention Initiative staff to staff at the appropriate agency or service.



PROGRAM NARRATIVE

APPLICANT NAME (District Name and Number, if applicable) XXX	REGION, COUNTY, DISTRICT, TYPE CODE XXX
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Directions: Address question 6 in the Program Narrative section of the RFP.

Data in Question 3 demonstrate that a service gap exists throughout XXX , especially in the cities of XXX , XXX and XXX . These data show a lack of slots for an estimated 2,856 XXX kids who qualify for Prevention Initiative services based on their poverty level and other risk factors. Based on these data alone, we feel confident that we can fully enroll our program by September 30, 2020. But lack of slots alone does not demonstrate our ability to fill the slots allocated to XXX through this program if we receive funding. Having three funded Prevention Initiative classrooms operated by the XXX in our buildings will provide the necessary scaffolding for these children and families and allow us to quickly get the mechanism in place to fully enroll the program by the end of September 2020.

In reality, we will likely meet the funded enrollment target with children already enrolled in our 6 weeks to 3-year-old programs at these four centers. Together, they enroll 158 kids: 82 in XXX , 37 in XXX , and 39 at the two sites in XXX . All these kids live in a Tier I school district (XXX . Because an average of 85% of XXX students and families qualify for CCAP, we can assume that 134 of these infants and toddlers will qualify for the 112 Prevention Initiative slots requested in this application, at least at the first level that looks solely at Tier I status and poverty.

When we look at the other qualifiers, a significant portion of XXX 's current students still exhibit many of the risk factors that would qualify them for this proposed program. Currently, 77% of infants and toddlers in these four programs live with a single parent, 469 children (61% of our families) have a female head-of-household, 12 live in a home where they speak a language other than English, 5 have at least one teenaged parent, and 9 have at least one parent who did not graduate from high school. Based on this, we assume that most of these kids will still qualify for the proposed Prevention Initiative program when we administer the XXX and XXX .

Should we not fully enroll the Prevention Initiative program with currently enrolled infants and toddlers, we will look at our waiting list. We currently have 56 children under the age of 3 waiting for a slot in one of these four centers. Assuming wait listed kids have similar demographic characteristics and risk factors as those enrolled, we should have no problem filling any remaining slots by enrolling kids from our waiting list, prioritizing those qualified for Prevention Initiative services based on the weighted criteria outlined in Question 4. On the very off chance that all these methods still do not fill the proposed Prevention Initiative slots, we will reach out to partner organizations who work with at-risk populations to identify other children to fill any remaining slots. Our parent company, XXX, holds the Illinois XXX,' contract for XXX, and XXX, in XXX, and partners with nearly 3,000 childcare providers across the region. Many of them have children and families who would qualify for this program. We also work closely with the XXX, who has more than 240 families in theirXXX, program, all of whom qualify as at-risk and most, if not all, would qualify for this program. Finally, our partnership with the XXX, program provides for reciprocal recruitment and enrollment referrals. We can work with them to recruit younger siblings of their families for the proposed Prevention Initiative program.

Maintaining enrollment and filling vacancies has not historically caused problems for XXX. Our infant and toddler rooms have an average vacancy rate of 5-10%, with most openings remaining unfilled for less than 2 weeks. Again, our current waiting list provides a testament to the demand for infant and toddler care and the high-quality care that XXX provides to its youngest students. We will augment our current waiting list with children and families screened and qualified for Prevention Initiative services but for whom no available slots exist and enroll from there first. We also enroll a large number of siblings and can fill vacancies quickly this way. For parents or guardians looking for a Gold-rated center, only 3 others in XXX serve infants and only 4 others serve toddlers and two-year olds, giving us little competition for students. XXX also offers four of the eight programs in XXX accredited by XXX which demonstrates that we provide high-quality, linguistically and culturally responsive, comprehensive child development and family support services.



Illinois State Board of Education

Early Childhood Department
100 North First Street, E-225
Springfield, Illinois 62777-0001

FY 2021
PREVENTION INITIATIVE BIRTH TO THREE

SITE INFORMATION

APPLICANT NAME (District Name and Number, if applicable) XXX		REGION, COUNTY, DISTRICT, TYPE CODE XXX	
Enter below the information requested for all proposed sites. ALL applicants must complete this section for all proposed sites. See Appendix A of the RFP for a list of districts defined as Tier 1 or Tier 2.			
PROPOSED SITE LOCATION INFORMATION		SITE PROGRAMMING INFORMATION	
DISTRICT IN WHICH THIS SITE IS LOCATED XXX		Is this proposed site in a Tier 1 or Tier 2 District? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SITE		Attendance Days per Year <u>252***</u>	
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
		Program Hours per day <u>8***</u>	
		FTE Staff at this Site <u>48</u>	
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SITE		Attendance Days per Year <u>252***</u>	
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
		Program Hours per day <u>8***</u>	
		FTE Staff at this Site <u>28</u>	
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SITE		Attendance Days per Year <u>252***</u>	
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
		Program Hours per day <u>8***</u>	
		FTE Staff at this Site <u>22</u>	
County		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO	
DISTRICT IN WHICH THIS SITE IS LOCATED		Attendance Days per Year	
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
		Program Hours per day	
		FTE Staff at this Site	
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SITE		Attendance Days per Year	
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
		Program Hours per day	
		FTE Staff at this Site	
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SITE		Attendance Days per Year	
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
		Program Hours per day	
		FTE Staff at this Site	
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SITE		Attendance Days per Year	
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
		Program Hours per day	
		FTE Staff at this Site	
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SITE		Attendance Days per Year	
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
		Program Hours per day	
		FTE Staff at this Site	
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO	
NAME OF SITE		Attendance Days per Year	
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F	
		Program Hours per day	
		FTE Staff at this Site	



Illinois State Board of Education

Early Childhood Department
100 North First Street, E-225
Springfield, Illinois 62777-0001

FY 2021
PREVENTION INITIATIVE BIRTH TO THREE

SITE INFORMATION

APPLICANT NAME (District Name and Number, if applicable) SAL Family and Community Services		REGION, COUNTY, DISTRICT, TYPE CODE 49081020P2400000
Enter below the information requested for all proposed sites. ALL applicants must complete this section for all proposed sites. See Appendix A of the RFP for a list of districts defined as Tier 1 or Tier 2.		
PROPOSED SITE LOCATION INFORMATION		SITE PROGRAMMING INFORMATION
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SITE		Attendance Days per Year _____
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F
		Program Hours per day _____
		FTE Staff at this Site _____
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SITE		Attendance Days per Year _____
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F
		Program Hours per day _____
		FTE Staff at this Site _____
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SITE		Attendance Days per Year _____
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F
		Program Hours per day _____
		FTE Staff at this Site _____
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SITE		Attendance Days per Year _____
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F
		Program Hours per day _____
		FTE Staff at this Site _____
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SITE		Attendance Days per Year _____
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F
		Program Hours per day _____
		FTE Staff at this Site _____
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SITE		Attendance Days per Year _____
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F
		Program Hours per day _____
		FTE Staff at this Site _____
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SITE		Attendance Days per Year _____
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F
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DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SITE		Attendance Days per Year _____
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F
		Program Hours per day _____
		FTE Staff at this Site _____
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SITE		Attendance Days per Year _____
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F
		Program Hours per day _____
		FTE Staff at this Site _____
DISTRICT IN WHICH THIS SITE IS LOCATED		Is this proposed site in a Tier 1 or Tier 2 District? <input type="checkbox"/> YES <input type="checkbox"/> NO
NAME OF SITE		Attendance Days per Year _____
CITY	COUNTY	Attendance Days of the Week <input type="checkbox"/> M <input type="checkbox"/> T <input type="checkbox"/> W <input type="checkbox"/> Th <input type="checkbox"/> F
		Program Hours per day _____
		FTE Staff at this Site _____



OBJECTIVES AND ACTIVITIES

APPLICANT NAME (District Name and Number, if applicable) XXX	REGION, COUNTY, DISTRICT, TYPE CODE XXX
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Directions: Address question 7 in the Program Narrative section of the RFP.

XXX Guidelines require that quality early learning programs provide for (1) positive and secure relationships with important adults; (2) opportunities for social, emotional, physical, language, and cognitive development; and (3) an understanding and adaption of the environment to each child. XXX's current infant and toddler programs provide these elements. The proposed Prevention Initiative will invest its dollars to add more support to meet the needs of the most at-risk children and families. Specifically, it will: (1) decrease class sizes; (2) increase the number and training of teachers; (3) lower staff-to-child ratios; (4) provide dedicated mental health services; and (5) focus on intensive family supports with home visits, targeted education, and case management to meet each family's unique needs.

POSITIVE AND SECURE RELATIONSHIPS: Resilient and healthy infants and toddlers develop positive and secure relationships with their parents and primary caregivers. We achieve this goal in three ways. First, we decrease the class size and teacher-to-child ratios. Requested funds will pay for 15 teachers to decrease class sizes from 12 to 8 for infants (6 weeks to 15 months), from 15 to 10 for toddlers (15 to 24 months), and from 16 to 12 for 2-year-olds. These class sizes abide by the early childhood national criteria set by the XXX. Lowering class sizes also reduces the staff-to-student ratio to 1:4 for birth to 15 months, 1:5 for 15 to 24 months, and 1:6 for 2-year-olds, exceeding DCFS and ExceleRate Gold guidelines. With fewer students, each teacher will develop a meaningful relationship with each child and family, better responding to each child's needs to assure that he or she feels secure (Illinois Prevention Initiative Implementation Manual, 2013). A pool of qualified substitutes will guarantee that each classroom will always have a qualified teacher.

Second, we will hire qualified teachers and train, coach, and evaluate them on their ability to form these positive relationships (see Questions 15, 18, and 19). Budgeted funds will allow us to hire 15 associate-degree teachers. We would prefer to hire teachers with a 4-year degree in early childhood education, but not enough exist in our community. As Questions 15 and 16 explain, an extensive staff development program, oversight by Site Supervisors and the Prevention Initiative Onsite Coordinator, and relationships with local education providers will build the knowledge and skills of our teachers. The program will intentionally build high-quality teaching practices using XXX, XXX; XXX; XXX; and XXX. All teachers will receive training in and regular evaluations on these evidenced-based practices to expand their knowledge, making them better prepared and qualified to work with the most at-risk kids. Grant funds will provide training on each of the teaching practices and assessment tools noted throughout this application.

Third, working with the parents, staff will identify and develop programs to alleviate possible barriers to building positive relationships at home. An abundance of research shows that at-risk children enter school more ready to learn when teachers team with parents to reinforce classroom learning and development at home. Budgeted funds will hire two XXX Specialists (1 in XXX and a shared position between XXX and XXX), offer at least 4 family events each year (12 by 2023), and develop a new Family and Parent Resource Room at each site. XXX Specialists will work with families to identify their needs and barriers to success and then develop specific interventions to overcome these needs (see Question 12). They will also visit each child's home at least six times a year using the XXX home visit curriculum; develop parent meetings, classes, and resources; and refer to the XXX Consultant as needed. Eligible parents may receive reimbursement of reasonable transportation and childcare costs for participating in these activities.

DEVELOPMENT IN KEY DOMAINS: The proposed XXX Prevention Initiative will help each child develop social, emotional, physical, language, and cognitive skills. Using the XXX and XXX, teachers will design activities and interventions that encourage development in each of these key domains. The budget provides for teacher training and oversight as well as child and teacher assessments in these tools to assure appropriate implementation.

Budgeted funds also hire two XXX Consultants (1 in XXX and a shared position between XXX and XXX) who will augment classroom work in social and emotional learning. Having XXX Consultants dedicated to the Prevention Initiative will allow them to focus time and attention on children who show delays or risk for delays. In addition to classroom and face-to-face assessments of children and families, they will provide services such as classroom-based interventions, collaborative education and success plans, and referrals to community-based resources for families.

ADAPTING TO THE CHILD'S UNIQUE ENVIRONMENT: Question 4 identifies the process the program will use to identify each child's unique environment including cultural, demographic, and environmental factors that may impact his or her growth and development. Question 12 outlines how we will use these data to create an Individualized Family Plan. As elaborated upon in Question 9, XXX staff and providers effectively support children who have a primary language other than English by helping them develop a command of English while preserving their home language.

ENCOURAGING PLAY: Best practice (Illinois Prevention Initiative Implementation Manual, 2013) suggests that children under the age of 3 do best in an environment that promotes healthy growth, rich child-family relations, learning, and physical and emotional security with positive and enriching experiences that stimulate the child's mind and promote discovery. The budget includes funds that will improve each classroom with new equipment, toys, furniture, and supplies to create a more play-focused environment and add to the outdoor play environment to create more of a natural classroom, based on research that shows the positive benefits of nature for children's well-being.



OBJECTIVES AND ACTIVITIES

APPLICANT NAME (District Name and Number, if applicable) XXX	REGION, COUNTY, DISTRICT, TYPE CODE XXX
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Directions: Address question 8 in the Program Narrative section of the RFP.

The intensity of services in the proposed XXX Prevention Initiative will begin with the screening protocol outlined in Question 4. These screening tools will allow XXX staff to identify each child's and family's specific needs and individualize services accordingly (see Question 12). Budgeted funds will allow us to train teachers to better meet each child's and family's unique and often complicated needs and provide family support interventions that we could not otherwise afford.

Teachers will implement and assess effective services for each child in his or her classroom as well as each child's family and work with the Prevention Initiative team to adjust services as needed. The program will use XXX; XXX; XXX; and XXX to build intentional, high-quality teaching practices that specifically meet the needs of children under the age of 3. Question 11 elaborates on how these teaching strategies will build upon effective research about early childhood education and align to the Illinois Early Learning Guidelines for Children from Birth to Age 3 Years and the Illinois Birth to Five Program Standards. Proposed Prevention Initiative services will differ from those currently offered to XXX infants and toddlers in their scope, intensity, and focus; smaller class sizes and staff-to-child ratios will allow teachers to provide more individualized attention to each child and will allow them to get to know each family better.

The XXX Specialist will use the outcomes of the Eligibility Form and the assessments that inform it (XXX and XXX) both to determine program eligibility and begin to identify needed services. Based on these data, each eligible family will receive a personalized Family Needs Assessment and Individualized Family Plan (see Question

12) to overcome any identified challenges. This plan will include at least 6 home visits annually using the XXX curriculum and may include referrals for internal services or externally to one of our many partners (see Question 10). Internal resources will include the XXX Consultant and resources in our planned Parent and Family Resource Room. We will also use the many services available through our XXX and XXX (see Question 17) to provide for emergency and long-term family needs such as assistance obtaining employment or educational placements, food, housing, or other basic needs. We will connect families who work more than one job with XXXI and our XXX to find high-quality second shift or overnight care. These services will differ from those offered to other XXX infants and toddlers in their scope, intensity, and focus: the addition of two dedicated XXX Specialists will allow them to better know each Prevention Initiative family. The inclusion of at least six annual home visits will also differ from current programming for infants and toddlers who only receive one home visit at program initiation.

Both the XXX and XXX see family involvement as vital to the child's success. When home and school align, we know the child has a better rate of success. As such, XXX Consultants will support children, families, and teachers by implementing pro-social-emotional learning to improve child and family outcomes through a three-tiered system. (1) Classroom interventions will focus on proactive social-emotional skill development for all children to prevent future self-regulation and social-emotional challenges. Use of the XXX will provide data to help children develop resilience. (2) Working closely with classroom teachers, the XXX Consultant will model and mentor appropriate skills using the XXX approach of trauma-informed positive reinforcements and interventions. Integrating social and emotional interventions into the classroom will support the child rather than the traditional behavior management strategy of removing the child. This process successfully teaches children and families and supports Illinois' initiative of Preventing Expulsion of Children Birth to Five. XXX introduced a XXX Consultant at our XXX and XXX campuses in 2005 and has since had no expulsions. (3) Beyond the classroom, the XXX Consultants will work with the teacher and parents of children exhibiting challenging behavior; train teachers and parents in social-emotional skills development; demonstrate and teach Model Language to parents and teachers to help them develop the child's language skills using techniques like self-talk, parallel talk, expansion, and praise; and connect families to community resources. These services will differ from those currently offered to XXX infants and toddlers in their scope, intensity, and focus; the addition of two dedicated XXX Consultants will allow them to spend more time in each classroom, work more closely with each teacher, and get to know each Prevention Initiative family better.

While all staff will focus on the needs of each child and family, the Prevention Initiative Onsite Director and Site Supervisors will oversee the entire program including staff training, professional development, assessment, coaching, and mentoring. As participatory managers, they will empower staff as partners in the program's and participant's successes, implement program and budget specifics, supervise daily operations, communicate with program constituents, and evaluate program components. The Grants Manager will work with the Chief Program Officer to assess the overall effectiveness of the program, make more macro-changes when the data indicates, liaison with the state granting agency, and provide overall program oversight and support.

The planned Family and Parent Resource Room and improved classroom and outdoor play spaces will augment these personnel to create the environment and resources to help families and children enter preschool and kindergarten more ready to learn.

Taking together, these services will cost \$1,652,000 or \$14,750 per child and family served, cost-effective for the numbers served and the intensity of services provided.



OBJECTIVES AND ACTIVITIES

APPLICANT NAME (District Name and Number, if applicable) XXX	REGION, COUNTY, DISTRICT, TYPE CODE XXX
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Directions: Address question 9 in the Program Narrative section of the RFP.

XXX will target infants and toddlers because of our history of providing care to our youngest citizens, the lack of quality childcare opportunities for our community's most vulnerable and at-risk children and families, and a desire to support continuous quality improvements locally and across the state. As described below and in previous questions, this proposed Prevention Initiative program will expand on our current high-quality infant and toddler programs by intentionally implementing intensive and personalized services and activities for children and families identified as most at-risk. These services will enhance child development, family effectiveness, and ultimately school readiness. XXXs planned approach for enhancing child development, family effectiveness, and school readiness will begin by providing high-quality, full day (at least 8 hours) and full-year (230 days) care. The Prevention Initiative team (teachers, parents, XXX Specialist, XXX Consultant, and external resources) will provide each child with comprehensive, developmentally appropriate environments rich with choices, flexibility, and teachers who facilitate intentional learning opportunities through play. Classroom time will promote learning in all areas of development (language and literacy, cognition and general knowledge, approaches toward learning, physical well-being and motor development, and social and emotional development) in nurturing, home-like environments. Intentional and individualized teaching and learning environments, curricula, screening and assessment data, as well as partnerships with parents will foster and develop each child's school readiness. We chose to use the XXX, XXX because its intentionality creates a nurturing, consistent, and loving atmosphere that allows children to flourish and ultimately enter kindergarten ready to learn.

Research has shown that toxic stress, the stress of living in poverty, and the associated challenges of housing insecurity, lack of basic needs, and fear of violence can adversely impact educational achievement, leading to reduced preschool attendance and kindergarten readiness. People of color, non-English speakers, and children who experience stressors such as homelessness, involvement with the foster care system, family separation, social isolation, and/or low levels of parent education more likely live with these toxic stressors and their negative implications. As Question 2 outlines, our community has a significant number of individuals who meet these criteria. The proposed XXX Prevention Initiative program will provide the services to meet these kids' educational and basic needs to reduce the impact of these stressors on their development and kindergarten readiness.

XXX will provide an environment rich in oral and written language through songs, chants, and storybooks to provide every child a foundation in language learning. For dual language learners, XXX (2006) identified improved language and literacy development with the strategic use of the home language; consistent expectations, instructions, and routines; extended explanations and opportunities for practice; the use of physical gestures, visual cues, objects, and props to concretize learning; an explicit focus on the similarities and differences between English and the home language to promote vocabulary development; and frequent understanding checks. XXX uses all these strategies for English learners and will intensify their use in the proposed Prevention Initiative program to support this dual learning.

Our Illinois Department XXX' funded XXX also supports dual-language learners and families (see Question 10). This one-stop center provides linguistically and culturally sensitive case management and services for immigrants and refugees to help them become socially and economically self-sufficient. XXX Specialists will also support in the family's primary language by collaborating with XXX volunteers.

Over the last 10 years, XXX has worked with local homeless centers, domestic violence shelters, and other community resources to support children under the age of 3 with families who experience homelessness, following the McKinney Vento Homeless Act and using the extensive support network we have built for our families (see Question 10). Thus far, we have enrolled 12 homeless families, 3 of whom successfully secured a job; 4 moved away. This program will continue and expand under the proposed XXX Prevention Initiative to help move homeless families with children under 3 to more stable housing.

The child's mental and emotional health also impacts his or her development and school readiness. XXX has embedded XXX, a social and emotional curriculum, into our pedagogy of teaching. XXX provides social-emotional interventions, curriculum, and resources around building a "school family." The use of XXX in the proposed Prevention Initiative classrooms will augment the child's feelings of safety and security as precursors to learning and building resilience while teaching the parents positive discipline measures that decrease the chances of abuse or trauma.

An undiagnosed or untreated mental or emotional health issue can also impede family effectiveness. For children and families in the proposed Prevention Initiative program who need more support for their emotional health and well-being, we will use a multi-tiered therapeutic intervention model that aligns with XXX, XXX and developmentally-appropriate best practice models that help meet the needs of complex and multi-stressed children and families. Two highly trained XXX Consultants, dedicated to the Prevention Initiative program, will provide these critically important services to children, families, and teachers to expand the mental health support that we currently provide to infants and toddlers. Rather than having 2 XXX Consultants for all the children we serve, these two will dedicate their time and attention on the 112 children and families in the Prevention Initiative program.



OBJECTIVES AND ACTIVITIES

APPLICANT NAME (District Name and Number, if applicable) XXX	REGION, COUNTY, DISTRICT, TYPE CODE XXX
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Directions: Address question 10 in the Program Narrative section of the RFP.

For 50 years, XXX has developed a host of Illinois and Iowa public and private funding sources to meet the needs of targeted populations, including children who come from poverty and other situations that qualify them as "at-risk." Through these state partnerships, we have earned the respect of our communities and families as the go-to community agency for high-quality, comprehensive early learning services and one that quickly meets the needs of low-income, at-risk children and families. Our state funding allows us to target services to families that rely on welfare, the homeless, children with disabilities, and pregnant women. We maintain resources to provide childcare for children from 6 weeks to 12 years. However, these resources also limit the depth of services we can provide to any one child. Funds requested in this application for the proposed XXX Prevention Initiative program will allow us to concentrate resources and intervention on the infants and toddlers and their families who most need them.

Through its parent company, XXX, XXX has relationships with nearly all providers in XXX and XXX Illinois. According to IECAM data, XXX has 21 licensed childcare centers, 5 license-exempt childcare centers, 74 licensed family childcare homes, and 176 license-exempt family childcare providers that accept XXX funds. XXX has no XXX Program.

XXX manages the XXX that supports families needing non-traditional hours of childcare by contracting with 590 family childcare homes. Additionally, the XXX and XXX, sister programs funded by the Illinois Department XXX, support families needing childcare and helps licensed childcare homes and centers. Both programs offer databases of licensed childcare options for parents and work with families to pay for care through the XXX. We regularly refer to and receive referrals from these partner agencies which will not change with this Prevention Initiative program. In fact, this vast network will help us coordinate services and funds for the recruitment of children and families (Question 6) and transitioning our families to the appropriate preschool program (Question 13).

Beyond local educational programs that serve young children and their families, XXX partners with a myriad of agencies that meet the needs of at-risk children and families. All of these will become referral options for families in our proposed Prevention Initiative program. For example, our XXX crisis assistance program offers a "hand up" to individuals and families in crisis. With the main office located next to our XXX campus, XXX has an on-site food pantry, clothing, computers for job searches, and relationships with other local childcare providers. Coordinators connect people in need to community resources such as counseling, health services, employment, housing, and the full range of XXXs state-funded resources to meet each person's immediate needs, in a single visit if possible.

The XXX connects families in crisis with community agencies, Department of Human Services, and community partners to provide immediate and intensive case management for urgent needs (e.g., emergency child care, care for children with special needs, children on welfare, the homeless, dual language learners, and expectant families). Immigrant and refugee families can receive linguistically and culturally sensitive case management and services for social and economic self-sufficiency. A partnership with XXX Credit Union provides mentorships and financial education. All families enrolled in the proposed Prevention Initiative program will have access to these services as well with follow-up by Prevention Initiative staff.

Our state partnership with the XXX Program provides nutritious meals for children experiencing poverty who might otherwise not eat during the day. We maintain a XXXwith the XXX Food Bank to help reduce food insecurities for children and families in XXX. We collaborate with the XXX for XXX parent interaction and on-line learning tools. Children and families in the proposed Prevention Initiative will have ready access to these resources as well.

The expanded services for families enrolled in our proposed Prevention Initiative program will allow our XXX Specialists and XXXConsultants to better identify families' needs and connect them to the appropriate community resource(s) to alleviate their stressors with a "soft hand off" to these or other agencies. It will also give our staff enough time to follow up with partner agencies and families to assure they could access needed services and that the services helped alleviate the identified stressor(s).

Long-term collaborations – many of them decades long –will also give us ready access to the many community agencies with a willingness and ability to support families and young children including the XXX XXX, XXX, XXX, XXX, XXX, XXX, XXX XXX, XXX, XXX, XXX, and XXX. As appropriate, we will engage these agencies for more advanced or in-depth screenings and referrals for families with social-emotional needs that we cannot meet. Other program enhancements include partnerships with XXX Library, XXX, XXX, XXX, XXX, XXX, XXX, XXX, XXX XXX, XXX, XXX, and many more local and regional community organizations and businesses who offer unique and creative environments and programs for our children and families to learn and thrive.



OBJECTIVES AND ACTIVITIES

APPLICANT NAME (District Name and Number, if applicable) XXX	REGION, COUNTY, DISTRICT, TYPE CODE XXX
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Directions: Address question 11 in the Program Narrative section of the RFP.

The proposed XXX Prevention Initiative program will build on effective research about early childhood education with evidenced-based tools that align to the XXX and the XXX. These curricula will provide our children with planned, daily opportunities to experience research-based, intentional teaching environments in which to thrive. XXX has adopted the XXX, XXX and XXX as the set of research-based curricula upon which to establish a firm foundation of school readiness. The XXX, XXX, our developmentally, culturally and linguistically appropriate curriculum, has school readiness at its heart and aligns with the XXX Guidelines for XXX and the XXX

Program Standards. XXX organizes content around five domains of learning: language and literacy development, cognition and general knowledge, approaches toward learning, physical well-being and motor development, and social and emotional development. It aligns with our philosophy that children learn best through guided play in a quality teaching and learning environment. Instructional staff will plan using the XXX daily resources (e.g., IXXX XXX, XXX and XXX), routines and experiences, and child outcomes data. In the process, they will facilitate learning environments that invite and inspire experiential learning activities in which children freely express and experiment with creativity and develop critical thinking skills to prepare for their next educational placement.

XXX has embedded XXX an evidence-based, trauma-informed social and emotional curriculum, into our pedagogy of teaching in all classrooms including the proposed Prevention Initiative ones. Our XXX Consultant and teachers will use XXX, a social-emotional tool developed by XXX to provide social-emotional interventions, curriculum, and resources around building a "school family." Recognized by the XXX administered by the XXX, XXX focuses on positive reinforcement and intervention rather than rewards or punishments for behavior. As such, it will support each child's social-emotional needs and provide multiple resources for the XXX Consultant and XXX teaching staff to promote a positive-learning environment that aligns with the XXX Guidelines for Children XXX and the XXX Standards.

Through XXX, the school family – including teaching staff and children – will learn classroom self-regulation, communication of emotions, and constructive ways to build empathy and team-focused problem-solving to encourage social-emotional development. XXX emphasizes brain-based, trauma-informed, social and emotional learning and puts a focus on decreasing challenging behaviors (e.g., power struggles, impulsivity, aggression). The XXX Consultants will also use XXX techniques and activities to de-escalate classroom and one-on-one interactions and will teach parents to use them at home. Having this innovative practice model will allow children to learn self-regulation tools to prepare for kindergarten.

XXX curriculum stems from XXX. Our XXX Consultants will use XXX to model and coach parents in the development of attachment and attunement through social interactions with infants as young as 8 months old, vital to support our at-risk families. The XXX Specialists will use the XXX curriculum for home visits and his or her other work with families. This community family support model provides a framework for supporting infants, toddlers, and their parents in nurturing school readiness and optimal child development. The model provides a research-based curriculum for intensive home visiting and early childhood programs with foundational developmental information from the perspective of the child, parents, and professionals who comes alongside the family to support the parent-child relationship. This relationship-based approach works with families through the implementation of XXX, age-specific protocols designed to create a framework for each personal encounter between the parent and child. Among others, this curriculum meets XXX program standard XXX on the centrality of adult-child interactions and XXX by prioritizing family involvement.

Finally, we will approach resilience using the nationally standardized, strength-based measure of within-child protective factors, the XXX. Completed by both parents and caregivers, this tool will provide reliable and valid data to promote young children's social and emotional development, consistent with the standards of the XXX and the XXX. Strategy resources for teachers, XXX Specialists, XXX Consultants, Site Supervisors, the Prevention Initiative Onsite Director, and families will incorporate assessment data and screenings into intentional efforts in the home and early learning setting to strengthen each child's protective factors.



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APPLICANT NAME (District Name and Number, if applicable) XXX	REGION, COUNTY, DISTRICT, TYPE CODE XXX
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Directions: Address question 12 in the Program Narrative section of the RFP.

Identification of family needs will occur initially at the screening interview, using the XXX and XXX along with a structured family interview form design to detect family risk factors that research has identified as putting the child most at-risk (see Question 4). Structured family interviews using the Parent Interview Form Sample from the Illinois Prevention Initiative Implementation Manual (2013) will seek information on primary language; immigrant or refugee status; parent or caregiver age, educational status, and student achievement; member of the household with developmental delay or disability; non-parental caregiver; and geriatric pregnancy.

Once accepted into the program, the XXX Specialist will complete the XXX assessment which enables him or her to learn about the family's strengths and needs. He or she will then strategize with the parents how to address their family's unique needs. The XXX Specialist will work with the family, teachers, XXX Consultant, and other staff as appropriate to develop a written IXXX Plan for each family served in the program. These staff will become the family's interdisciplinary support team. A copy of the XXX Plan, based on the sample provided in the Illinois Prevention Initiative Implementation Manual (2013) and signed by a parent or guardian indicating that they helped develop the plan, will reside in the child or family's file for review. The interdisciplinary team will work with the family to update the plan at least every six months, more often as deemed appropriate.

The XXX Plan will look at educational and non-educational factors that may impede a child's success. Educational interventions – described in the next paragraph – will begin in the classroom with frequent communication and training of parents to carry into the home. Non-educational factors that might impede success could include things like food insecurity, unemployment or underemployment, language or health barriers, or insecure housing. Arranging for meaningful services for a family's real needs may include delivering intensive home visiting and family support to the most at-risk families, either using XXX resources or referring the family to community agencies that can provide more intense services than we provide (see Question 10). We may serve families with fewer risk factors through group encounters and community resources. Home visits at least six times throughout the year will re-examine the development or lessening of risk factors over time to continue to meet the family's evolving needs.

Family-centered assessment will continue through ongoing educational and developmental assessments using XXX@ and XXX. XXX will use these data and work with each parent and teacher to establish culturally and linguistically appropriate school readiness goals for each child enrolled in the proposed Prevention Initiative program. Data from several sources – e.g., XXX XXX – will help parents and

teachers better understand and measure the status of each child along the developmental continuum to further inform individualized XXX.

XXX will provide daily feedback on the child's progress toward meeting these individualized goals.

As a team, the XXX Consultant, teacher, and family will meet to review and reflect on the assessment scores and, if needed, create a XXX Plan to support the child's classroom and home needs. For example, if a child scores low on self-regulation, he or she may need guidance on expressing emotions and managing behaviors in healthy ways. The teacher might create an emotions chart using real pictures or symbols, posted on the wall at child's level. We would actively use the chart with the children throughout the day to help them identify their feelings and why they feel that way. We may encourage the family to create and use a similar chart at home to continue that learning. The XXX Consultant will meet weekly with the teachers and family as needed and will be in the classroom on a regular basis.

The Prevention Initiative Onsite Director or Site Supervisor will regularly convene interdisciplinary team meetings around each XXX Plan. Teams will consist of the child's teacher and parents and the center's XXX Consultant and XXX Specialist who, at least three times a year, will meet to review all the screenings, assessments and plans to move the family forward. As

needed – and with the permission of the family – we can invite external providers or resources to join the meeting to help us best meet the family's needs.



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Directions: Address question 13 in the Program Narrative section of the RFP.

XXX offers a comprehensive continuum of education services that moves the infants and toddlers and their family to the program of their choice from several service options.

Through the XXX Specialists, the proposed XXX Prevention Initiative program will implement full case management with a formal plan that transitions participating children and families in, through, and out of the program. All coordinators and front-line staff working with the family will participate and contribute to the successful transitions of the child and family. Because children and parents in the Prevention Initiative will have received comprehensive services from a cadre of internal and external resources, we will consult these individuals as well to recommend the best placement for the child.

Because we maintain relationships with most early childhood providers in the community (see Question 10), we have a strong knowledge of their services, programs, and how well each program would meet the unique needs of each child. XXX also offers preschool programs in each of its buildings and accepts XXX to pay for this care; XXX has free Preschool for All in XXX's buildings for those families who prefer that model. We also collaborate with the XXX program for dual recruitment and referral of qualified families. We remain committed to helping families choose the program option that best meets their family and child's needs as the child grows out of the Prevention Initiative program or as the family's circumstances change.

Beginning six months prior to the child's third birthday, the XXX Specialist will discuss options with the family to gauge their preferences and prepare for the transition from the proposed Prevention Initiative program to a preschool classroom. Formal transition planning will include discussions with and training of the family regarding future services and other matters related to the transition; procedures to prepare the family and child for changes in service delivery, including steps to help them adjust to and function in a new setting; and sharing information about the child and family with another early childhood program, with the family's consent.

Should a family decide to move to a program outside of XXX, the parents will receive a referral packet that includes a signed consent forms to send the child's information to the school district, special education cooperative, or other agency or program(s) they may want to explore. If the child transitions to a non-XXX facility or one of XXXs 317 Head Start program slots, the current XXX teacher – and members of the child's interdisciplinary team – will communicate with the parent and child about continuity and reinforcing learning and services provided at XXX. The XXX Specialist will also work with the family approximately three months before the transition to schedule any screenings or evaluations of the child or family required of the new site.

Prior to leaving XXX, the XXX Specialist will conduct a formal exit interview using a form that we will develop upon award of funds, with notes kept in the child and family's file. With the parent's permission, we will share assessments, services, and progress reports with the new teacher and program and any referral partner with whom the child or family works. We will also discuss the upcoming transition with the child and parent, including the child's feelings about the transition. Following the transition, the teacher will continue to respond to any concerns or questions the parent has and communicate with the new center to determine adjustment success, if requested. Our XXX Specialist and XXX Consultant will also remain available to answer transition-related questions until the child and family become fully integrated with the services at their new center.

If the child transitions to a classroom within XXX we will take the child and parent to meet the new teacher and classmates and slowly transition them to the new room. Within 30 days, the new teacher will check in with the parents to ascertain any concerns and work together to adjust the child's routine.

Regardless of whether the child transitions within or away from XXX, the family will attend a transition planning conference four months and two months prior to the planned transition date. From these meetings, we will create a written Transition Plan for each child, developed by the child's interdisciplinary team and led by the XXX nt Specialist. The written Transition Plan will provide documentation and follow-up information regarding transition activities to minimize disruptions.



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APPLICANT NAME (District Name and Number, if applicable)

REGION, COUNTY, DISTRICT, TYPE CODE

Directions: Address question 14 in the Program Narrative section of the RFP.

XXX uses its website to recruit candidates for vacant staff positions. Our CEO actively works in local, county, and state early childhood committees, work groups, and initiatives which has enabled her to build a strong network within the early education field, share strengths and challenges, and recruit staff. We will use those networks to recruit and hire racially diverse and qualified staff for each position in the proposed XXX Prevention Initiative program.

Our stated policies and procedures ensure racial equity in recruitment and hiring practices. Specifically, our employee handbook states that "XXX is an equal opportunity employer and believes in equal opportunity for all employees and applicants. Accordingly, all employment decisions are based on the principles of equal opportunity. These decisions include recruitment, selection, promotion, transfer, discipline, compensation, benefits, training and other personnel actions involving persons in all job titles and shall occur without regard to race, creed, color, religion, sex, age, ancestry, national origin, disability, genetic information, military status or discharge status, sexual orientation, gender identity, marital status, citizenship status, order of protection status, pregnancy, homelessness or any other characteristic protected by law. No individual will be denied nor receive special employment opportunities based on membership status in any protected category. Every employee of XXX is expected to support this equal opportunity and non-discrimination commitment by conducting him/herself in a manner that is consistent with the intent and spirit of this policy. XXX will make reasonable accommodations for qualified individuals with known disabilities unless doing so would result in an undue hardship. This policy governs all aspects of employment, including selection, job assignment, compensation, discipline, termination, and access to benefits and training. Any individual who believes he or she has experienced or observed behavior contrary to this policy is expected to report that information to their supervisor or Human Resources. All such reports of action contrary to this policy will be taken seriously and investigated promptly. Individuals found to have violated XXX's Equal Employment Opportunity Policy will be subject to corrective action, up to and including termination of employment."

Teaching staff (full-time and substitutes) will hold an AA degree in early childhood education to qualify for the lead teacher positions. We will require original transcripts from the awarding school to verify they have these qualifications.

We will assure that we have a sufficient number of racially diverse, qualified teachers for the program in the future by working with XXX to provide their students with CDA credentials upon high school graduation and continuing to talk to XXX to implement this program as well. We will also work with XXX who provides programs to move teachers with

CDA credentials to a bachelor's degree and beyond. Partnerships with XXX and XXX have begun to create career pipelines to cultivate XXXs early education staff and future workforce. These relationships allow us to directly impact the needs of the field on course syllabi. A successful Prevention Initiative program will put us in a position to elevate the efficacy of early childhood education students and childcare colleagues by sharing the expertise and knowledge we intend to build in our education team.

XXX Consultants will have a master's degree in social work or counseling and an active Illinois license in clinical social work, independent social worker, or clinical professional counselor or will obtain such license within six months of their start date. We require original transcripts from the awarding school to verify they have these qualifications.

The XXX Specialists must have at least a BA in Social Work. We require original transcripts from the awarding school to verify they have these qualifications.

The Site Supervisors must have at least a BA in Early Childhood Education and the requisite skills and experience to supervise and mentor the XXX Specialists, XXX Consultants, and teachers. We require original transcripts from the awarding school to verify that he or she has these qualifications.

The Prevention Initiative Onsite Director must also have at least a BA in Early Childhood Education and the requisite skills and experience to supervise the Site Supervisors and provide overall program oversight. We require original transcripts from the awarding school to verify that he or she has these qualifications.

All staff will also have to possess personal qualifications as required in Section 407.100 of the Illinois XXX

Centers including emotional maturity, respect for children and adults from various cultures and backgrounds, flexibility, patience, and good personal hygiene and pass a personal background check.

As Question 15 outlines, our extensive training and individualized staff development plans will assure that all staff have the qualifications and experiences necessary to successfully implement a high-quality early childhood program.

While we have retained many of our staff, we also experience attrition, especially in teaching positions, due to salary competition among early childhood programs. To address this, we have conducted a wage analysis and built our pay scale with a higher salary and three-step advancement as staff meet educational requirements (Level 1 – Teacher with an AA degree; Level 2 – Teacher with a BA Degree; Level 3 – Teacher with a Master's degree). Our HR director examines XXXs funding streams annually to reflect accurate compensation, market trends, best practice guidelines, and state and federal benchmarks to ensure that we remain competitive. Our generous benefits package also helps with teacher retention. Wages we will offer to proposed Prevention Initiative staff are on par with the local public-school districts.



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Directions: Address question 15 in the Program Narrative section of the RFP.

Each Prevention Initiative staff member will have a comprehensive, personalized staff development plan that includes internal and external training and education or degree attainment goals based on the resources and guidelines of ExceleRate Illinois for the skills and experiences they need to successfully work with children from various racial and ethnic backgrounds. With the Prevention Initiative Onsite Director and Site Supervisor, each Prevention Initiative staff member will complete a professional development plan following their annual performance evaluation with data and conversations gleaned from the performance evaluation process. New employees will develop a professional development plan within their first 30 days of hire. Through XXX Development Plans, XXX educational leaders (Chief Program Officer, Prevention Initiative Onsite Director, and Site Supervisors) will help staff develop specific skills related to competencies for their current or future positions. These forward-thinking professional development plans will establish clear and measurable goals based on the employee's strengths and areas for development. All professional development plans will include (1) short- and long-term goals; (2) step(s) needed to complete the goals; and (3) an estimated time and resources for achieving the goals.

The onboarding process and mentoring system developed by our Human Resources Director fully supports the capacities of our staff to deliver high-quality, comprehensive services and implement curriculum with fidelity. As she does for all teaching staff, she will counsel and support Prevention Initiative teachers to earn their Child Development Associates, partner with higher education institutions for degrees, and facilitate enrollment in the ExceleRate Illinois statewide quality recognition and improvement system. For Child Development Associates, XXX will pay for assessment and book expenses and support all teachers as they attend school with help in tuition (reimbursed through Child Care Resource and Referral), time off to attend class, and paying for fingerprinting and physical exams. We also will create career ladders that lead to greater responsibilities and career development opportunities.

Our Human Resources Director also tracks the XXX website for staff competencies. This voluntary XXX defines what a person working with children from birth to age 8 should know and demonstrate at various levels within the early care and education field. She will enroll Prevention Initiative staff in this program to assure that they have had or will develop the skills to work with these high-risk children and families.

Staff and supervisors will also use the Statewide Online Training Calendar that lists professional development events (e.g., workshops, conferences, and training series) that practitioners can use to meet licensing requirements, obtain credentials, and work toward the quality rating and improvement system. We will focus on those training sessions that better prepare staff to work with children from various racial and ethnic backgrounds. Training in XXX, XXX; XXX; XXX XXX; XXX; and XXX all emphasize cultural diversity and sensitivity when working with children and parents of different races and cultures. We will prepare staff to work with children and families with a primary language other than English using the XXX, a project of the XXX and XXX. This resource provides guiding principles, research, and best practices for early learning professionals working with young Dual Language Learners and English Language Learners, their families, and their communities and meets the requirements set forth under 23 Illinois Administrative Code Part 228 Transitional Bilingual Education (https://www.isbe.net/Documents/preschool_faqs.pdf).

To specifically address the additional educational and training needs for the proposed Prevention Initiative, our program leadership (Prevention Initiative Onsite Director and Site Supervisors) will attend extensive training and build their efficacy in TXXX; XXX; XXX; XXX; XXX; and XXX to coach and mentor our teachers as they build intentional, high-quality teaching practices. The Prevention Initiative Onsite Director and Site Supervisors will oversee and ensure that all education staff reinforce the role of the parent as their child's primary educator by offering monthly staff workshops on topics such as parenting, school readiness, brain development, attachment and bonding, and developmental milestones.

The XXX will guide implementation of quality learning environments by measuring the quality of interactions and activities using indoor and outdoor observations and staff interviews. This tool and the XXX will capture the degree to which staff demonstrate competencies in assigned services and responsibilities, in addition to compliance with all regulations, policies, and procedures. Resultant data will support individualized and group professional development by identifying areas of expertise or needed skill development.

The Site Supervisors and Prevention Initiative Onsite Director will share outcomes from these monitoring reviews soon after completion of the forms. Our standard operating procedures connect observations and feedback conversations – documented in the XXX Plan – to professional development, coaching, improvements in practice, and annual evaluations. Ongoing monitoring will occur by implementing the Practice-Based Coaching model and reflective supervision practices, a research and evidenced-based, cyclical process of teacher development created by the XXX. Observations will result in written professional development plans (training, coaching, technical assistance, modeling) and timelines as well as programmatic Quality Improvement Plans

(see Question 19).



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XXX	XXX

Directions: Address question 16 in the Program Narrative section of the RFP.

Of highest priority, we will build our capacity to intentionally offer a high-quality child development and education experience for our high-risk children and families. We will do this by first building the capacity of our education leadership team. We will build an extensive professional development training plan to build their professional intentionality in applying XXX, XXX; XXX; and XXX to, in turn, train, coach, mentor, and monitor for the continuous quality improvements of our teachers and Prevention Initiative staff. Strong staff-child interactions will focus on providing a thorough framework around core competencies like implementing curricula and use of assessments so that even newer staff can provide effective and nurturing interactions. For example, training on XXX and XXX as well as ongoing classroom evaluation, coaching, and mentoring by the XXX Consultant will train staff on social-emotional development of children and families. Local kindergarten teachers share that 1 in 7 XXX children enroll not ready to learn on their first day of school. We will work to change the data with intentional social-emotional learning, increased feeling identification, and effective problem solving for young children by offering teachers and parents the expertise of XXX Consultants dedicated to the proposed Prevention Initiative program. Currently, we are one of only three centers in Illinois to offer on-site and dedicated master level therapists. Over the past three years, we have partnered with XXX and XXX to successfully integrated XXX Consultants into XXX classrooms. This project expands that initiative by funding two XXX Consultants dedicated to the high-risk children and families served by our proposed Prevention Initiative. As described in Question 8, these master-level professionals will support children, their families, and teachers by implementing social-emotional learning to improve child outcomes through a three-tiered system that includes ongoing training and evaluations that will expand the teachers' ability to support each child and each parent's social-emotional skills. Training in XXX and participation in the local XXX and their training programs will help all of the proposed Prevention Initiative staff better understand the impacts of childhood trauma to create a trauma-informed curricula and environment for these children and families. Training, consultation, and direct work with children and families by the XXX Consultant as described above will also help staff better understand the impacts of childhood trauma on families so they can effectively deliver program activities to meet the needs of each child and family. We will augment that training with trauma-informed classes and seminars offered locally that describe the impact that Adverse XXX have on learning and development as well as ways to create a safe physical environment in which all children and families can thrive. Finally, XXX; XXX; XXX; XXX; and XXX all provide training in cultural diversity and sensitivity when working with children and parents of different races and cultures. Staff development in implementing these specific tools will provide the foundation for teaching in a culturally diverse and sensitive way.



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APPLICANT NAME (District Name and Number, if applicable) XXX	REGION, COUNTY, DISTRICT, TYPE CODE XXX
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Directions: Address question 17 in the Program Narrative section of the RFP. *Applies only to non-school district applicants and joint agreement applicants.*

The mission of XXX– XXXs parent company – is to strengthen children, families, and individuals to build and enhance thriving communities. That mission statement appears on program brochures and paperwork, and is posted in the buildings where children, staff, and families gather. What began in 1970 in a church basement has evolved into a large, highly respected, multi-state and multi-county nonprofit with a commitment to quality, accountability, and sustainability. In fact, we serve more XXX children than any other early learning center in the community.

XXX operates as one of six programs under the umbrella of XXX that provides high-quality early care and education in both centers and licensed homes, crisis assistance, childcare referrals, and training and development for early care educators. The XXX helps families who need non-traditional childcare hours by supporting high-quality licensed family childcare environments throughout XXX. The XXX crisis assistance programs – located in XXXand XXX– offer a “hand-up” to individuals and families in crisis. XXX and XXX connect families across 16 Illinois counties with assistance to pay for childcare, support families seeking childcare, and provide training and technical assistance to Illinois childcare homes and centers.

XXX provides early care and education with the goal that every child has adequate preparation to succeed in school and life. Its five campuses – located in XXX, XXX, XXX and XXX – hold the highest state quality ratings and serve more than 700 children from birth to age 12 each day. Written policies provide guidance for staff to comply with mandated reporting laws for child abuse and neglect and expulsion and suspension laws.

XXX has 50 years of experience working with children who live in poverty; on average, 85% of children attending XXX programs receive XXX funds. We can accurately track and complete the paperwork required for this program and provide high-quality services to children and families who come from poverty, as explained throughout this application and evidenced by our ExceleRate Gold ratings and XXX. With the XXX running six Prevention Initiative classrooms in three of our sites, we clearly have experience with this type of program and our buildings meet the criteria for operating a Prevention Initiative program.

All XXX sites have appropriate licensure by the Illinois Department XXX (DCFS License Numbers:

1XXX

XXX. In 2010, XXX's XXX site earned XXX accreditation which means that we demonstrated to the national early childhood organization that we provide high-quality, linguistically and culturally responsive, comprehensive child development and family support services. The XXX and XXX sites followed with that accreditation in 2012. This process has taught us a foundation of early care and education from practice, policy, and research. We plan to take that knowledge and add the hallmark of the Prevention Initiative's comprehensive services to better prepare our children and families for their next educational placement.

Our proposed sites have also participated in the XXX and achieved and maintained Gold ratings for demonstrating the highest quality of care and education since 2014 XXX) and 2015 (XXX).

Our Chief Program Officer, XXX manages all XXX programs with 7 staff members in teaching and support roles. With more than 40 years of experience running an early childhood education center and passion for birth to 3, she serves as one of the leadership team members and reports directly to the XXX , XXX . A centralized Business Administration office manages financial administration of all XXX programs, including XXX and a budget in excess of \$13 million. We strive to have three months of operating on hand as part of our sustainable business plan to remain fiscally solvent and programmatically relevant.

An all-volunteer Board of Directors governs and provides financial oversight and strategic planning for XXX . Each board member serves on at least one committee: governance, finance, organizational development, advocacy, or executive. In addition to the board, XXX consistently engages more than 300 volunteers each year to add value and enhance the quality of programming. Whether through STEAM education, gardening, grounds maintenance, or reading to children, volunteers make a significant impact on a regular basis.

The CEO and the CFO have experience and background administering grants and contracts. As an agency that manages XXX funds, staff have experience managing and administering childcare funding contracts, including meeting the contractual requirements set by the State of Illinois and determining eligibility for families who need such service. On average, we manage \$10 million in grant funds and contracts annually. For example, XXX received an IDHS site contract for \$6.5 million in FY19 (\$6.3 million in FY20), XXX contract for \$3.1 million, an Iowa Attorney General contact for

\$120,000 for XXX , Illinois Department XXX for \$75,000 for the XXX and \$450,000 in XXX funds between Illinois and Iowa. We remain in full compliance with Illinois GATA rules and individual contract deliverables with each of these state agencies.



Illinois State Board of Education

Early Childhood Department
100 North First Street, E-225
Springfield, Illinois 62777-0001

FY 2021
PREVENTION INITIATIVE BIRTH TO THREE

PROPOSAL EVALUATION DESIGN

DISTRICT NAME AND NUMBER (if applicable)

REGION, COUNTY, DISTRICT, TYPE CODE

Directions: Address question 18 in the Program Narrative section of the RFP.

The proposed XXX Prevention Initiatives will follow two self-assessment plans. The first will include progress on the measurable outcomes for children and families to effectively gauge the success of the program for each individual participant. The second will measure the effectiveness of the program as a whole with sufficient data to improve the program through a continuous quality improvement approach (see Question 19).

The XXX Specialists will enter all data from the family assessments, family goals, parent interests and needs into XXX to measure baseline data, progress, and outcomes for each child, family, and the program as a whole. Disaggregated data report outcomes for each child and family in the proposed program. The Prevention Initiative Onsite Director will work with the Chief Program Officer to aggregate collected services data to report program progress monthly for program analysis, review, and continuous improvement (see Question 19).

Outcome data will focus on each child's readiness to enter kindergarten by removing barriers that prevent children and families from taking advantage of quality early learning environments that promote school readiness. According to data collected by the XXX 1 in 7 local kindergarteners start school not ready to learn. XXX has partnered with both XXX and XXX schools to improve these scores which will help benchmark our efforts on that effectiveness measure both for the individual child and the program.

To assess kindergarten readiness and the developmental milestones a child should reach in their first three years, teachers will conduct XXX assessments every six months and formally report assessment results to the family at annual spring and fall parent conferences. Each day, teachers will complete XXX, the accompanying assessment tool for the XXX that directly ties to the curriculum's objectives for development and learning. It will establish and measure school readiness goals for children through data collection consisting of anecdotal notes, artifacts, and videos to show progress in nine domains including

social-emotional learning. Teachers will observe children in the context of their everyday XXX planned individualized and group experiences to determine what they know and can do, then rate them on the development continuum. The XXX Specialists will use these assessment findings at the home visits to inform interventions. Parents will have immediate access to XXX data from the classroom via the online portal and receive formal XXX data reports three times per year, more often if indicated by the assessment. Parents and teachers will develop home and school activities to scaffold growth and development in these learning domains. Both tools will guide us in effectively developing individual and group goals that promote progress toward school readiness and help the teacher ensure that she or he addresses needed school readiness goals in the weekly lesson plans.

The XXX will collect social-emotional assessment for each child with the goal of increasing each child's social-emotional skills. This framework examines specific skills of initiative, self-regulation, attachment, relationships, and behavioral concerns. The classroom teacher and child's family will complete the checklist; the XXX Consultant will review and enters the data into XXX. As a team, the XXX Consultant, teacher, and family will meet to review and reflect on the assessment scores and, if needed, create a Behavior Intervention Plan to support the child's needs in the classroom and at home. When the team sees progress or a planned transition occurs, the teacher and family will again complete the checklist. Both tools align with the XXX curriculum and provide measurable outcome data to effectively gauge the success of the program and yield sufficient data for program evaluation.

An annual parent survey will ask parents and families to assess their perceptions of the quality of care their child receives at XXX which we will use to continue to meet XXX accreditation standards.

Self-report and observational data will measure improvements in parenting skills that enhance child development and school readiness based on the reported outcomes for the XXX program. Administered at the beginning of the program then biennially thereafter, the assessment will measure (1) parental stress; (2) improvements in parenting skills and confidence; (3) child engagement; (4) increased knowledge of and use of family resources; and (5) child's language development.

XXX also participates in the XXX, a unique partnership between XXX, XXX, local school districts, and nonprofits to gain a holistic view of education across the region. Partners can cross-correlate data at the individual student level without accessing another organization's data. These data allow us to make accurate, community-wide measurements and determine the impact different services have on students' long-term academic success. That is, for students enrolled in the proposed Prevention Initiative, we will measure their progress while enrolled in the program as well as their kindergarten readiness three years later and, for some, their academic progress throughout K-12 and ultimately their graduation rate.

The first of its kind, the XXX has gained nationwide attention as a promising model for nonprofit data analysis, earning the XXX recognition as a XXX by the Campaign for Grade-Level Reading in 2019 for this innovative work.



PROPOSAL EVALUATION DESIGN

DISTRICT NAME AND NUMBER (if applicable)	REGION, COUNTY, DISTRICT, TYPE CODE
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Directions: Address question 19 in the Program Narrative section of the RFP.

Regular program and agency practice demonstrate how XXX routinely takes adaptive action based on outcome data. As outlined in Question 18, the individual assessments used to measure outcomes for each individual child and family yield enough data to evaluate and continuously improve the program. The Chief Program Officer will follow the written evaluation plan to prepare a written self-assessment based on the findings from the collected data to develop and implement a continuous quality improvement plan.

Continuous quality improvement of the proposed Prevention Initiative program will occur through systematic reports, analysis, and actions plans, reviewed monthly by the Site Supervisors, Prevention Initiative Onsite Director, Chief Program Officer, CEO and CFO, and submitted and presented to the Board. XXX managers and directors have requisite skills in data analysis and theory construction to properly carry out outcome-based evaluations while making of use of outcomes data for program decision, program direction, revision of goals or objectives and evaluating progress on child and family outcomes. Continuous quality improvement will occur at both the individual and program level. For example, because XXX collects data in the classroom and at home, it will effectively evaluate a child's skills in nine development domains. We will use these data to immediately design activities and lessons for both home and school to address identified areas of concern. The teacher will assess the student daily and formally reports to the family at least three times a year, more often if needed. As these lessons occur, we can again collect data on the effectiveness of our teaching methods depending on how much movement we see in the outcome measures. The data must show the child advancing in his or her development. If not, we will redesign our activities to better fit the child's learning style. Based on these assessments, teachers will adjust their classroom methods with the child, discuss possible changes with the parent, refer to the child to the XXX Consultant, brainstorm possible service changes with the Prevention Initiative Team (XXX Consultant, other teachers, Site Supervisor, Prevention Initiative Onsite Director) or refer to a community agency (see Question 10). Adding the XXX and XXX twice a year will allow for more specific and comprehensive data, especially for children who consistently struggle at home and school. As described in Question 16, ongoing assessment of staff will determine if they need additional professional development, learning opportunities, or mentoring to effectively implement these curricula.

The XXX will guide implementation of quality learning environments by measuring the quality of interactions, environments, materials, activities, space, etc. using indoor and outdoor observations and staff interviews. Ratings data will support individualized and group professional development (see Question 15) or making purchases to ensure that learning environments – both at XXX and at home – support children's school readiness. These data will also guide program and individual evaluations (see Question 18) and inform continuous quality improvements plans.

Three complementary modes of inquiry collect as much information as possible to inform program assessment and individual evaluations:

1. Observations of classrooms, socializations, and home visits will assess teaching and learning practices. Continuous Quality Improvement observation tools (like IXXX and XXX) will capture the degree to which staff demonstrate competencies in the services and responsibilities assigned, in addition to compliance with all regulations, policies, and procedures.
2. Management and supervisors will interview front-line staff to support a common understanding and application of policies, procedures, and practices, as well as parents and community partners to ascertain their perspectives on experiences with our services.
3. Teachers and management staff will regularly review child and family files, XXX and child outcomes reports, results of fidelity surveys, self-assessment data, training evaluations, case management data, and any other pertinent data to measure degrees of quality and make any needed changes to improve student and program outcomes.

Amendment No. _____
 Multi-State Application

ILLINOIS STATE BOARD OF EDUCATION
 Early Childhood Department
 100 North First Street, E-225
 Springfield, Illinois 62777-0001

STATE AGENCY IDENTIFICATION CODE: _____
 SUBMISSION DATE: 04/07/2020

FY 2021 PREVENTION INITIATIVE BIRTH TO THREE
 STATE BUDGET SUMMARY AND PAYMENT SCHEDULE

CONTACT PERSON: _____ TELEPHONE NUMBER (Include Area Code): _____
 E-MAIL ADDRESS: _____

Use a black #000000 ballpoint pen. Sign all columns and enter the # on pg. 2434

ISBE USE ONLY

Base Grant
 COMPLETED Notice of State Award (NOSA)
 COMPLETED Letter Grant Agreement (LGA)

PROGRAM APPROVAL DATE AND INITIALS: _____

CURRENT FUND: _____

CURRENT FUND: _____

BEGIN DATE: _____ END DATE: _____

LINE	FUNCTION NUMBER (1)	EXPENDITURE ACCOUNT (2)	SALARIES (3) (Obj. 100s)	EMPLOYEE BENEFITS (4) (Obj. 200s)	PURCHASED SERVICES (5) (Obj. 300s)	SUPPLIES AND MATERIALS (6) (Obj. 400s)	CAPITAL OUTLAY (7) (Obj. 500s)	OTHER OBJECTS (8) (Obj. 600s)	NON-CAPITALIZED EQUIPMENT (9) (Obj. 700s)	TOTAL (11)	PAYMENT SCHEDULE
1	1000	Instruction									
2	2110	Attendance & Social Work Services									July-August
2	2120	Substance Services									137667
4	2130	Health Services	120000	28800	4461	5000				158261	September
5	2140	Psychological Services									137667
6	2150	Speech Pathology & Audiology Services									October
7	2210	Improvement of Instruction Services	145000	34800	1840	4000	30000			215640	137667
8	2220	Educational Media Services									November
9	2230	Assessment & Testing									137667
10	2300	General Equipment	17472	4193	7612	1000				30277	December
1	2400	School Administration									137667
12	2510	Direction of Business Support Services									January
12	2520	Fiscal Services									137667
14	2530	Facilities Administration and Construction									February
15	2540	Operation & Maintenance of Plant Services								0	137667
16	2550	Public Transportation Services									March
17	2560	Food Services									137667
18	2570	Personal Services									April
19	2610	Direction of Central Support Services									137667
20	2620	Planning, Research, Development & Evaluation Services									May
21	2630	Information Services									137667
22	2640	Staff Services									June
23	2660	Data Processing Services									137667
24	2900	Meal-Support Services									July-August
25	3000	Community Services	779440	187065	28105	80530	22500			1097640	137667
26	3700	Nonpublic School Pupil Services									TOTAL
27	4000	Payments to Other Districts or Government Units								0	\$ 1652004
28	5000	Debt Services								0	
29	Total Direct Costs		1061912	254858	42018	90530	52500	0	0	1501818	
30	INDIRECT COSTS (Direct Cost X _____ %)									150182	
31	TOTAL BUDGET									1652000	

FY 2021 PREVENTION INITIATIVE
BUDGET SUMMARY BREAKDOWN

APPLICANT NAME (District Name and Number, if applicable)

Directions: Prior to preparing this Budget Summary Breakdown request, please refer to the "State and Federal Grant Administration Policy, Fiscal Requirements and Procedures" handbook that can be accessed at https://www.isbe.net/Documents/fiscal_procedure_handbk.pdf. Obligations of funds based on this budget request cannot begin prior to July 1, or receipt of a substantially approvable budget request, whichever is later.

FUNCTION NUMBER (1)	EXPENDITURE DESCRIPTION AND ITEMIZATION (2)	SALARIES (3)	EMPLOYEE BENEFITS (4)	PURCHASES SERVICES (5)	SUPPLIES AND MATERIALS (6)	CAPITAL OUTLAY (7)	OTHER OBJECTS (8)	NON-CAPITALIZED EQUIPMENT (9)	TOTAL (11)
		(Obj. 100s)	(Obj. 200s)	(Obj. 300s)	(Obj. 400s)	(Obj. 500s)	(Obj. 600s)	(Obj. 700s)	
2130	Mental Health therapists	120000	28800						148800
	Mental Health Assessments			4000					4000
	Workers Compensation Insurance			109					109
	State Unemployment			312					312
	Liability Insurance			40					40
	Supplies				5000				5000
TOTAL		120000	28800	4461	5000				158261

APPLICANT NAME (District Name and Number if applicable)

**FY 2021 PREVENTION INITIATIVE
BUDGET SUMMARY BREAKDOWN**

Directions: Prior to preparing this Budget Summary Breakdown request, please refer to the "State and Federal Grant Administration Policy, Fiscal Requirements and Procedures" handbook that can be accessed at https://www.isbe.net/Documents/fiscal_procedure_handbk.pdf. Obligations of funds based on this budget request cannot begin prior to July 1, or receipt of a substantially approvable budget request, whichever is later.

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		(Obj. 100s)	(Obj. 200s)	(Obj. 300s)	(Obj. 400s)	(Obj. 500s)	(Obj. 600s)	(Obj. 700s)	
2210	Prevention Initiative Onsite Director	55000	13200						68200
	Supervisors	90000	21600						111600
	Workers Compensation Insurance			1312					1312
	State Unemployment			468					468
	Liability Insurance			60					60
	Supplies				4000				4000
	Equipment					30000			30000
TOTAL		145000	34800	1840	4000	30000			215640

FY 2021 PREVENTION INITIATIVE
BUDGET SUMMARY BREAKDOWN

APPLICANT NAME (District Name and Number, if applicable)

Directions: Prior to preparing this Budget Summary Breakdown request, please refer to the "State and Federal Grant Administration Policy, Fiscal Requirements and Procedures" handbook that can be accessed at https://www.isbe.net/Documents/fiscal_procedure_handbk.pdf. Obligations of funds based on this budget request cannot begin prior to July 1, or receipt of a substantially approvable budget request, whichever is later.

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		(Obj. 100s)	(Obj. 200s)	(Obj. 300s)	(Obj. 400s)	(Obj. 500s)	(Obj. 600s)	(Obj. 700s)	
2300	Grant Management	17472	4193						21665
	Workers Compensation Insurance			158					158
	State Unemployment			156					156
	Liability Insurance			20					20
	Audit Fees			5460					5460
	HRIS System Fees			1818					1818
	Supplies				1000				1000
TOTAL		17472	4193	7612	1000				30277

FY 2021 PREVENTION INITIATIVE
BUDGET SUMMARY BREAKDOWN

APPLICANT NAME (District Name and Number if applicable)

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FUNCTION NUMBER (1)	EXPENDITURE DESCRIPTION AND ITEMIZATION (2)	SALARIES (3) (Obj. 100s)	EMPLOYEE BENEFITS (4) (Obj. 200s)	PURCHASES SERVICES (5) (Obj. 300s)	SUPPLIES AND MATERIALS (6) (Obj. 400s)	CAPITAL OUTLAY (7) (Obj. 500s)	OTHER OBJECTS (8) (Obj. 600s)	NON-CAPITALIZED EQUIPMENT (9) (Obj. 700s)	TOTAL (11)
3000	Lead Teachers with AA	570000	136800						706800
	Family Engagement Specialists	68000	16320						84320
	Part-time substitute teachers	141440	33945						175385
	Workers Compensation Insurance			705					705
	State Unemployment			3902					3902
	Liability Insurance			498					498
	Family Events			12000					12000
	Teacher Training			9000					9000
	TS Gold			2000					2000
	Parent and Family Resources				20000				20000
	Teacher Resources				21530				21530
	Toys				25000				25000
	Supplies				14000				14000
	Computers					22500			22500
TOTAL		779440	187065	28105	80530	22500			1097640



PROGRAM-SPECIFIC TERMS OF THE GRANT

1. Subcontracting: No subcontracts or sub-grants are allowed without prior written approval of the State Superintendent of Education. If subcontracts or sub-grants are allowed, then all project responsibilities are to be retained by the grantee to ensure compliance with the terms and conditions of the grant. All subcontracts and sub-grants must be documented and must have the prior written approval of the State Superintendent of Education. Approval of subcontracts and sub-grants shall be subject to the same criteria as are applied to the original proposal/application. The following information is required if any subcontracts/sub-grants are to be utilized:
 - o Name(s) and address(es) of subcontractor(s)/sub-grantee(s);
 - o Need and purpose for each subcontract/sub-grant;
 - o Measurable and time specific services to be provided;
 - o Associated costs (i.e., amounts to be paid under each subcontract/sub-grant); and
 - o Projected number of participants to be served.

The grantee may not assign, convey or transfer its rights to the grant award without the prior written consent of the Illinois State Board of Education.

2. If the Early Childhood Block Grant program is operated in or by a child care center subject to the licensure requirements of the Illinois Department of Children and Family Services (DCFS), then that child care center must hold the appropriate licensure in accordance with rules promulgated by DCFS (see 89 Ill. Adm. Code 403 (Licensing Standards for Group Homes), 405 (Licensing Standards for Day Care Agencies), 406 (Licensing Standards for Day Care Homes), 407 (Licensing Standards for Day Care Centers) and 408 (Licensing Standards for Group Day Care Homes).
3. Beginning in FY 2019 school year, each grantee that operates a center-based Prevention Initiative program shall participate in ExceleRate Illinois (see <http://www.exceleerateillinois.com> and click on INFORMATION FOR PROVIDERS). ExceleRate Illinois is the State's quality rating and improvement system that emphasizes continuous quality improvement for early learning and development programs and uses a consistent set of standards organized into four domains of teaching and learning; family and community engagement; leadership and management; and qualifications and continuing education.
4. Financial Reports: Grant recipients with an approved state and/or federal grant program are required to submit quarterly expenditure reports. The quarterly reports are due twenty days following the end of the reporting quarter (e.g. September 30 expenditure report is due at ISBE on or before October 20). Failure to submit the report by the due date will result in scheduled payments being withheld until the required report is received. Expenditure Reports must be filed electronically to the Division of Funding and Disbursement Services four times a year.

Report	Cumulative Through	Due in ISBE Office
1	September 30, 2020	October 20, 2020
2	December 31, 2020	January 20, 2021
3	March 31, 2021	April 20, 2021
Final	June 30, 2021	July 20, 2021

5. Reporting: All grantees must enroll each Prevention Initiative student in the ISBE Student Information System (SIS) by November 15 of each year. This reporting activity is continuous throughout the year. All grantees must exit each Prevention Initiative student at the end of the year or when the child leaves the program. All grantees must submit the following data to the Illinois State Board of Education (ISBE), via the ISBE Web Application Security (IWAS) system, for the Prevention Initiative projects for which the grantee is funded:
 - a) Student Information System (SIS) Birth to 3;
 - b) Student Information System (SIS) Caregiver Demographic Data;
 - c) Student Information System (SIS) Prenatal;
 - d) 0-3 Prevention Initiative - Parent Questionnaire;
 - e) 0-3 Prevention Initiative - Outcomes Questionnaire.

6. Each grantee funded to serve 100% students at risk of academic failure. For the purpose of Prevention Initiative "at risk" is defined as those children who because of their home and community environment are subject to such language, cultural, economic and like disadvantages to cause them to have been determined as a result of screening procedures to be at risk of academic failure.
7. Any grantee that fails to enroll the required percentage of at risk children (100 percent) for which the proposal was funded will have its grant award reduced proportionate to the decrease in percentage of such children enrolled.
8. Each program shall be monitored on site at least once every four years to determine the extent to which it is complying with all operational requirements and to assess the quality of the developmental and/or educational components offered. Each program shall receive a monitoring report with the results of the operational compliance checklist and the quality assessment. Using those results, the program shall complete a continuous quality improvement plan addressing operational compliance and a continuous quality improvement plan addressing the quality assessment. Each continuous quality improvement plan shall, at a minimum, address:
 - a. the specific issue or indicator for which a deficiency was noted;
 - b. the actions to be taken to remedy the deficiencies and, as applicable, the resources and professional development that will be targeted towards improvement efforts; and
 - c. The person responsible and the timelines in which the deficiencies are expected to be corrected, provided that no continuous quality improvement plan shall be in effect for more than two school years.

The continuous quality improvement plan shall be signed by the person legally authorized to submit the plan, shall bind the applicant to its contents, and shall be electronically submitted to the State Board of Education not later than 30 days after the program's receipt of the monitoring report. For each year in which the continuous quality improvement plan is in effect, the program shall submit a progress report to the State Board of Education that describes the progress the program has made relative to remedying the deficiencies identified. The progress report shall be submitted electronically no later than June 1 of each year. A program that fails to reach the goals of the continuous quality improvement plan within the timelines specified in the plan shall be subject to additional sanctions, including, but not limited to, removal of grant approval.

9. Supplanting: Funds received under Prevention Initiative shall be used to supplement, and not supplant, funds that would otherwise be used for the proposed activities. (Sections 2-3.71 and 2-3.89 of the School Code)
10. No fees will be charged of parents or guardians and their children who are enrolled and participate in Prevention Initiative programs.
11. Fiscal Monitoring: All activities are subject to an audit at the local, state and federal level. Staff from ISBE may conduct a financial review of your program to audit records and offer technical assistance. This review will ascertain on a sample basis whether such records are adequately and properly maintained on a current basis. The purpose of this review is to determine if the project meets legal requirements and to verify the eligibility of expenditures by examining sample documentation for the following:
 - a) Funds disbursed to the grant recipient were received and properly recorded in separate accounts/general ledger;
 - b) Payments recorded by the grant recipient were actually made to vendors, contractors and employees and that they conform to applicable laws and regulations, including procurement requirements and support the program intent;
 - c) Refunds, discounts, etc., were properly credited to specific expense classifications as reductions of the gross expenditure;
 - d) Payments are supported by adequate evidence of the delivery of goods or performance of services;
 - e) Obligations included in the report of expenditures were actually incurred during the budget period for which the expenditures were claimed and upon liquidation were properly adjusted;
 - f) The same item is not reported as an expenditure for two or more years, e.g., encumbrance is one year and payment in another; items are properly recorded in the program year;
 - g) All expenditures that were claimed were made for the approved project and are easily identifiable with this project;
 - h) All books and materials obtained with the grant funds are plainly marked with appropriate identification;
 - i) All inventory items have been allocated an inventory number and the number has been plainly affixed on each piece of equipment and plainly labeled;
 - j) An inventory register has been maintained of those items required to be inventoried which shows:
 - Description;
 - Serial number or other identification number;
 - Funding source for purchased property;
 - Who holds title;
 - Acquisition date and cost;
 - Location, use and condition of property; and
 - Disposition date.

- k) Inventory items moved from one location to another have been duly authorized in writing and that the transfer has been recorded in the inventory register, and each item of the equipment purchased was listed in the approved budget breakdown and is being used solely for authorized purposes;
 - l) Prorated expenditures, such as salaries (supported by time and effort documentation), travel, etc., are divided correctly between two or more accounts and that the basis of such division can be substantiated as reasonable and equitable (the auditor will compare actual expenditures with the approved budget and note variations);
 - m) Unexpended state funds advanced or overpaid were promptly returned to the Illinois State Board of Education;
 - n) Payments to an administrator who is employed by the Board of Education under the terms of the contract covering a twelve-month period of service were not included in administrative expenses;
 - o) Obligations were liquidated within 90 days after the end of the budget period and adjusted to the amount finally paid; and,
 - p) Expenditures were incurred for activities in addition to those that have been provided previously for public and not-profit private school students and teachers.
 - q) Transfer: the Illinois State Board of Education reserves the right to transfer equipment if the grant activities cease to exist for the grant recipient for which the equipment was originally acquired.
12. Applicants should be aware that grant awards may not be used to provide religious instruction, conduct worship services, or engage in any form of proselytization; assist, promote, or deter union organizing; finance, directly or indirectly, any activity designed to influence the outcome of an election for any public office; or impair existing contracts for services or collective bargaining agreements.
13. No funds may be used to help support or sustain any institution controlled by any church or sectarian denomination (Article 10, Section 3 of the Illinois Constitution; Ill., Const. 1970, Art. X, Sec. 3).
14. Grant recipients are not allowed to begin an activity, obligate or expend funds that will be charged to a state or federal grant until a substantially approvable initial application has been received at ISBE. Grant recipients that submit a state or federal initial application prior to the program begin date (usually July 1) will be granted an appropriate project begin date for the following fiscal year unless state appropriation authority has not been approved. Grant recipients that submit a state or federal initial application after July 1 will be assigned a project begin date no earlier than when the initial application was received at ISBE or the program begin date (whichever is later). Grant recipients of a state competitive program should not begin any activity, obligate or expend funds until ISBE provides formal approval of the application and grant amount. Grant recipients that submit a state or federal budget amendment between the project begin and end date are not allowed to begin an activity, obligate or expend funds prior to the date of receipt at ISBE provided the scope or intent of the approved project has not changed. If the scope or intent of a project significantly changes through an amendment, ISBE programmatic approval should be obtained prior to the obligation of funds for the new activities provided in the amendment.
15. Each grantee which operates a program in a facility licensed by the Illinois Department of Children and Family Services (DCFS), shall require all employees and volunteers who are persons subject to background checks, as defined by Section 385.20 of Title 89 of the Illinois Administrative Code [89 IAC 385.20] to authorize DCFS to perform a Child Abuse and Neglect Tracking System (CANTS) background check. Required individuals shall execute an Authorization for a background check, as defined by Section 385.20 of Title 89 of the Illinois Administrative Code and shall submit the Authorization to DCFS for completion of the CANTS background check. Evidence of completion of required CANTS checks for all persons subject to background checks shall be maintained by the grantee and copies of the same shall be provided to the administrator of the DCFS-licensed facility. The requirement applies to any paid or unpaid individual, including any certified teacher employed by a school district or other entity but working in the facility, who is used to perform essential staff duties as evidenced by being counted in the staff-child ratio or being allowed to be alone with children in a licensed child care facility outside the visual or auditory supervision of facility staff.
16. Payrolls must be supported by time and attendance or equivalent records for individual employees. Salaries and wages of employees chargeable to more than one grant program or other cost objective will be supported by appropriate time distribution records/cost allocation plans.
17. A Cost Allocation Plan (CAP) is a document that states how a grant recipient will identify, accumulate and distribute certain allowable administrative costs in grants and identifies the allocation methods used for distributing the costs. A written plan for allocating joint costs is required to support the distribution of those costs to the grant program. When a grant recipient completes a grant application/amendment, it must determine to either utilize its restricted indirect cost rate as calculated by ISBE or utilize a CAP which must then be documented via personnel time and effort information as well as formal accounting records according to generally accepted governmental accounting principles to substantiate the propriety of the eventual charges. All applicable documentation must be available for review upon request by a local auditor or ISBE auditor.

18. Joint Applications for Funding: Grantees participating in a joint application are advised that the member grantees are individually and jointly responsible to the Illinois State Board of Education for compliance with all of the terms and conditions of the grant agreement. The administrative agent is responsible to the participating grantee and is the agent designated to receive funds and submit reports.
19. Travel expenses, including transportation costs and, when overnight stay is required, lodging and per diem, are subject to the State rates published by the Governor's Travel Control Board for State employees and posted at <http://www.illinois.gov/cms/employees/travel/pages/travelreimbursement.aspx>.

The undersigned affirms, under penalties of perjury, that he or she is authorized to execute the terms of the grant set forth above on behalf of the applicant.

-ty

CEO

Title



Illinois State Board of Education

Early Childhood Department
100 North First Street, E-225
Springfield, Illinois 62777-0001

FY 2021
PREVENTION INITIATIVE BIRTH TO THREE

GRANT APPLICATION CERTIFICATIONS AND ASSURANCES

APPLICANT'S NAME: _____

The applicant/award recipient (hereinafter the term applicant includes award recipient as the context requires), hereby certifies and assures the Illinois State Board of Education that:

1. Applicant is a(n): (Check one)

- Individual
 Corporation
 Partnership
 Unincorporated association
 Government entity

Region/County/District/School Code or Federal Employer Identification Number, as applicable. Individuals or other entities with neither of the foregoing, include Social Security Number.

The applicant has the necessary legal authority to apply for and to receive the proposed award. The filing of this application has been authorized by the governing body of the applicant, and the undersigned representative has been duly authorized to file this application for and on behalf of said applicant, and otherwise to act as the authorized representative of the applicant in connection with this application and any award in relation thereto.

DEFINITIONS

"Applicant" means an individual, entity or entities for which grant funds may be available and has made application to the Illinois State Board of Education for an award of such grant funds.

"Grant" means the award of funds, which are to be expended in accordance with the Grant Agreement for a particular project. The terms "grant," "award," "program," and "project" may be used interchangeably.

"Grantee" means the person, entity or entities that are to receive or have received grant funds through an award from the Illinois State Board of Education. The terms "grantee" and "award recipient" may be used interchangeably.

"Project" means the activities to be performed for which grant funds are being sought by the applicant. The terms "project" and "program" may be used interchangeably.

The capitalized word "Term" means the period of time from the project beginning date through the project ending date.

LAWS AND REGULATIONS REGARDING FEDERAL AND STATE AWARDS

The applicant acknowledges and agrees that this grant is subject to the provisions of:

2 CFR Part 200 – Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards
http://www.ecfr.gov/cgi-bin/text-idx?tpl=/ecfrbrowse/Title02/2cfr200_main_02.tpl

Illinois Grant Accountability and Transparency Act (GATA), 30 ILCS 708/1 et seq.
<http://www.ilga.gov/legislation/ilcs/ilcs3.asp?ActID=3559&ChapterID=7>

Administrative Rules for GATA, 44 Ill. Admin. Code Part 7000 <ftp://www.ilga.gov/JCAR/AdminCode/044/04407000sections.html>

NO BINDING OBLIGATION

- The applicant acknowledges and agrees that the selection of its proposal for funding, or approval to fund an application shall not be deemed to be a binding obligation of the Illinois State Board of Education until such time as a final Grant Agreement is entered into between the applicant and the Illinois State Board of Education. Prior to the execution of a final Grant Agreement, the Illinois State Board of Education may withdraw its award of funding to the applicant at any time, for any reason.
- Payment under this grant is subject to passage of a sufficient appropriation by the Illinois General Assembly or sufficient appropriation by the U.S. Congress for federal programs. Obligations of the Illinois State Board of Education will cease immediately without further obligation should the agency fail to receive sufficient state, federal, or other funds for this program.

PROJECT

4. The project proposed in the application, and as negotiated and finalized by the parties in the Grant Agreement, is hereinafter referred to as the "project." In planning the project there has been, and in establishing and carrying out the project there will be (to the extent applicable to the project), participation of persons broadly representative of the cultural and educational resources of the area to be served, including persons representative of the interests of potential beneficiaries.
5. Applicants may be asked to clarify certain aspects of their proposals/applications or proposed amendments prior to final agreement on the terms of the project or amendment.
6. All funds provided shall be used solely for the purposes stated in the approved proposal/application, as finalized in the Grant Agreement.
7. The project will be administered by or under the supervision of the applicant and in accordance with the laws and regulations applicable to the grant. The applicant will be responsible for and obtain all necessary permits, licenses, or consent forms as may be required to implement the project.

GENERAL CERTIFICATIONS AND ASSURANCES

8. The applicant will obey all applicable state and federal laws, regulations, and executive orders, including without limitation: those regarding the confidentiality of student records, such as the Family Educational Rights and Privacy Act (FERPA) (20 U.S.C. 1232g) and the Illinois School Student Records Act (ISSRA) (105 ILCS 10/1 et seq.); those prohibiting discrimination on the basis of race, color, national origin, sex, age, or handicap, such as Title IX of the Amendments of 1972 (20 U.S.C. 1681 et seq.) and 34 CFR part 106, the Illinois Human Rights Act (775 ILCS 5/1-101 et seq.), the Individuals with Disabilities Education Act (20 U.S.C. 1400 et seq.), Section 504 of the Rehabilitation Act of 1973 (29 U.S.C. 794) and 34 CFR part 104, the Age Discrimination in Employment Act of 1967 (29 U.S.C. 621 et seq.), the Age Discrimination Act (42 U.S.C. 6101 et seq.) and 34 CFR part 110, Titles VI and VII of the Civil Rights Act of 1964 (42 U.S.C. 2000d et seq., 2000e et seq.) and 34 CFR part 100, the Public Works Employment Discrimination Act (775 ILCS 10/0.01 et seq.), and the Americans with Disabilities Act of 1990 (42 U.S.C. 12101 et seq.); and the Illinois School Code (105 ILCS 5/1-1 et seq.). Further, no award recipient shall deny access to the program funded under the grant to students who lack documentation of their immigration status or legal presence in the United States (*Plyler v. Doe*, 457 U.S. 202, 102 S.Ct. 2382 (1982)).
9. The applicant certifies it has informed the State Superintendent of Education in writing if any employee of the applicant/grantee was formerly employed by the Illinois State Board of Education and has received an early retirement incentive under 40 ILCS 5/14-108.3 or 40 ILCS 5/16-133.3 (Illinois Pension Code). The applicant acknowledges and agrees that if such early retirement incentive was received, the Grant Agreement is not valid unless the official executing the agreement has made the appropriate filing with the Auditor General prior to execution.
10. The applicant shall notify the State Superintendent of Education if the applicant solicits or intends to solicit for employment any of the Illinois State Board of Education's employees during any part of the application process or during the Term of the Grant Agreement.
11. The applicant is not barred from entering into this contract by Sections 33E-3 and 33E-4 of the Criminal Code of 1961 (720 ILCS 5/33E-3, 33E-4). Sections 33E-3 and 33E-4 prohibit the receipt of a state contract by a contractor who has been convicted of bid-rigging or bid-rotating.
12. If the applicant is an individual, the applicant is not in default on an educational loan as provided in 5 ILCS 385/3.
13. The applicant certifies it does not pay dues or fees on behalf of its employees or agents or subsidize or otherwise reimburse them for payment of their dues or fees to any club which unlawfully discriminates (775 ILCS 25/1).
14. The applicant certifies that it is (a) current as to the filing and payment of any applicable federal, state and/or local taxes; and (b) not delinquent in its payment of moneys owed to any federal, state, or local unit of government.
15. Any applicant not subject to Section 10-21.9 of the School Code certifies that a fingerprint-based criminal history records check through the Illinois State Police and a check of the Statewide Sex Offender Database will be performed for all its employees, b) volunteers, and c) all employees of persons or firms holding contracts with the applicant/grantee, who have direct contact with children receiving services under the grant; and such applicant shall not a) employ individuals, b) allow individuals to volunteer, or c) enter into a contract with a person or firm who employs individuals, who will have direct contact with children receiving services under the grant who have been convicted of any offense identified in subsection (c) of Section 10-21.9 of the School Code (105 ILCS 5/10-21.9(c)) or have been found to be the perpetrator of sexual or physical abuse of any minor under 18 years of age pursuant to proceedings under Article II of the Juvenile Court Act of 1987 (705 ILCS 405/2-1 et seq.).

16. The applicant hereby assures that when purchasing core instructional print materials published after July 19, 2006, the applicant/grantee will ensure that all such purchases are made from publishers who comply with the requirements of 105 ILCS 5/28-21 which instructs the publisher to send (at no additional cost) to the National Instructional Materials Access Center (NIMAC) electronic files containing the contents of the print instructional materials using the National Instructional Materials Accessibility Standard (NIMAS), on or before delivery of the print instructional materials. This does not preclude a grantee school district from purchasing or obtaining accessible materials directly from the publisher.
17. The applicant certifies that notwithstanding any other provision of the application, proposal, or Grant Agreement, grant funds shall not be used and will not be used to provide religious instruction, conduct worship services, or engage in any form of proselytization.

JOINT APPLICATIONS – ADMINISTRATIVE AND/OR FISCAL AGENT

18. Applicants/grantees participating in a joint application hereby certify that they are individually and jointly responsible to the Illinois State Board of Education and to the administrative and fiscal agent under the grant. An applicant/grantee that is a party to the joint application and is a legal entity, or a Regional Office of Education may serve as the administrative and/or fiscal agent under the grant.
19. The entity acting as the fiscal agent certifies that it is responsible to the applicant/grantee or, in the case of a joint application, to each applicant/grantee that is a party to the application; it is the agent designated and responsible for reports and for receiving and administering funds; and it will:
 - (a) Obtain fully executed Grant Application Certifications and Assurances forms from each entity or individual participating in the grant and return the forms to ISBE prior to award of the grant;
 - (b) Maintain separate accounts and ledgers for the project;
 - (c) Provide a proper accounting of all revenue from the Illinois State Board of Education for the project;
 - (d) Properly post all expenditures made on behalf of the project;
 - (e) Be responsible for the accountability, documentation and cash management of the project, the approval and payment of all expenses, obligations, and contracts and hiring of personnel on behalf of the project in accordance with the Grant Agreement;
 - (f) Disburse all funds to joint applicants/grantees based on information (payment schedules) from joint applicants/grantees showing anticipated cash needs in each month of operation (The composite payment schedule submitted to ISBE should reflect monthly cash needs for the fiscal agent and the joint applicants/grantees.);
 - (g) Require joint applicants/grantees to report expenditures to the fiscal agent based on actual expenditures/obligation data and documentation. Reports submitted to the Illinois State Board of Education should reflect actual expenditure/obligations for the fiscal agent and the data obtained from the joint applicants/grantees on actual expenditures/obligations that occur within project beginning and ending dates;
 - (h) Be accountable for interest income earned on excess cash on hand by all parties to the grant and return applicable interest earned on advances to the Illinois State Board of Education;
 - (i) Make financial records available to outside auditors and Illinois State Board of Education personnel, as requested by the Illinois State Board of Education;
 - (j) Have a recovery process in place with all joint applicants/grantees for collection of any funds to be returned to the Illinois State Board of Education; and

DRUG-FREE WORKPLACE CERTIFICATION

20. This certification is required by the Drug-Free Workplace Act (30 ILCS 580/1). The Drug-Free Workplace Act, effective January 1, 1992, requires that no grantee or contractor shall receive a grant or be considered for the purposes of being awarded a contract for the procurement of any property or services from the State unless that grantee or contractor has certified to the State that the grantee or contractor will provide a drug-free workplace. False certification or violation of the certification may result in sanctions including, but not limited to, suspension of contract or grant payments, termination of the contract or grant, and debarment of contracting or grant opportunities with the State of Illinois for at least one (1) year but not more than five (5) years.

For the purpose of this certification, "applicant," "grantee," or "contractor" means a corporation, partnership, or other entity with twenty-five (25) or more employees at the time of issuing the grant, or a department, division, or other unit thereof, directly responsible for the specific performance under a contract or grant of \$5,000 or more from the State.

The applicant certifies and agrees that it will provide a drug-free workplace by:

- (a) Publishing a statement:
 - (1) Notifying employees that the unlawful manufacture, distribution, dispensing, possession, or use of a controlled substance, including cannabis, is prohibited in the grantee's or contractor's workplace
 - (2) Specifying the actions that will be taken against employees for violations of such prohibition.
 - (3) Notifying the employee that, as a condition of employment on such contract or grant, the employee will
 - (A) Abide by the terms of the statement; and
 - (B) Notify the employer of any criminal drug statute conviction for a violation occurring in the workplace no later than five (5) calendar days after such conviction.
- (b) Establishing a drug-free awareness program to inform employees about:
 - (1) The dangers of drug abuse in the workplace;
 - (2) The grantee's or contractor's policy of maintaining a drug-free workplace;
 - (3) Any available drug counseling, rehabilitation, and employee assistance programs; and
 - (4) The penalties that may be imposed upon an employee for drug violations.
- (c) Providing a copy of the statement required by subsection (a) to each employee engaged in the performance of the contract or grant and posting the statement in a prominent place in the workplace.
- (d) Notifying the contracting or granting agency within ten (10) calendar days after receiving notice under part (B) of paragraph (3) of subsection (a) above from an employee or otherwise receiving actual notice of such conviction.
- (e) Imposing a sanction on, or requiring the satisfactory participation in a drug abuse assistance or rehabilitation program by, any employee who is so convicted, as required by section 5 of the Drug-Free Workplace Act.
- (f) Assisting employees in selecting a course of action in the event drug counseling, treatment, and rehabilitation are required and indicating that a trained referral team is in place.
- (g) Making a good faith effort to continue to maintain a drug-free workplace through implementation of the Drug-Free Workplace Act.

21. The applicant represents and warrants that all of the certifications and assurances set forth herein, in the application, all attachments, and the Grant Agreement are and shall remain true and correct through the Term of the grant. During the Term of the grant, the award recipient shall provide the Illinois State Board of Education with notice of any change in circumstances affecting the certifications and assurances within ten (10) calendar days of the change. Failure to maintain all certifications and assurances or provide the required notice will result in the Illinois State Board of Education withholding future project funding until the award recipient provides documentation evidencing that the award recipient has returned to compliance with this provision, as determined by the Illinois State Board of Education.

The undersigned affirms, under penalties of perjury, that he or she is authorized to execute the above Certifications and Assurances on behalf of the applicant. Further, the undersigned certifies under oath that all information contained herein is true and correct to the best of his or her knowledge, information and belief, that grant funds shall be used only for the purposes described in this agreement, and that the award of this grant is conditioned upon this certification.

Title

Marcy Mendenhall

Name of Authorized Official (Type or Print)



Illinois State Board of Education

Early Childhood Department
100 North First Street, E-225
Springfield, Illinois 62777-0001

FY 2021
PREVENTION INITIATIVE BIRTH TO THREE

DEMONSTRATION OF NEED

APPLICANT NAME (District Name and Number, if applicable)

REGION, COUNTY, DISTRICT, TYPE CODE

Directions: Select the option you are using to demonstrate need for an early childhood block grant program within your community per program narrative and objectives and activities sections of RFP.

- A letter(s) from the local program providing similar services, home visiting or center-based services (Early Head Start, current Early Childhood Block Grant (ECBG) programs, current Illinois Department of Human Services (IDHS) programs, current Maternal, Infant, and Early Childhood Home Visiting (MIECVH) programs, or locally funded programs), which demonstrates a need for additional services in the community (attach to proposal).
- Completion of Form 13 to indicate gap in slots compared to eligible population.
- IECAM data showing a gap in services and the need for additional slots in the community (Reflected in Program Narrative section, #2 and #7).
- Information from the programs community needs assessment showing a gap in services and the need for additional slots in the community (Reflected in Program Narrative section, #2 and #7).



Illinois State Board of Education

Early Childhood Department
100 North First Street, E-225
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SLOT GAP ANALYSIS

APPLICANT NAME (District Name and Number, if applicable)	REGION, COUNTY, DISTRICT, TYPE CODE
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Directions: Complete all questions below. Information can be requested from IECAM. Other resources can be utilized, such as census information.

Question	Response
How many children age 1 to 3 years are located within the service area?	5,566
What is the birth rate in your community? (IECAM Data)?	2,320
If you are currently serving students through Prevention Initiative, how many children are you funded to serve?	0
What is the capacity for enrollment at the local Early Head Start?(contact local EHS program)	0
What is the capacity for enrollment for other community based organizations serving children birth to age 3 years (i.e., other current Prevention Initiative programs, current Illinois Department of Human Services (IDHS) programs, current Maternal, Infant, and Early Childhood Home Visiting (MIECVH) programs, or locally funded programs)?	1,252
How many children are located within district boundaries birth to age 3 years with FPL less than 100%?(IECAM information)	1,498
How many children are located within district boundaries birth to age 3 years with FPL 100-200%?	1,414
How many children are located within district boundaries Birth to age 3 years with FPL 200-400% FPL?	1,799
Taking in to consideration number of children in the area needing to be served and the number of community slots currently available, how many students are still in need of services? (Total number of children less than 200% FPL – Early Head Start slots, Prevention Initiative slots, Community-Based Organization slots = total need)	1,660
How many children is your program requesting to serve?	112