



**Early Childhood Development Services  
2009/10  
NOVA SCOTIA CHILD CARE STABILIZATION GRANT  
APPLICATION (Page 1 of 3)**

All full day licensed Child Care Centres in the Province of Nova Scotia are entitled to apply for the Nova Scotia Child Care Stabilization Grant. This funding has been made possible by the Government of Canada and the Government of Nova Scotia to improve and expand Early Childhood Development / Early Learning and Child Care programs and services.

**I. CHILD CARE CENTRE PROFILE**

Child Care Facility Name:		
Facility Mailing Address:		
		Postal Code:
Contact Person:		Position Title:
Phone #: (902)	Fax #: (902)	E-Mail:
Date Child Care Facility Opened:		
Hours of Operation:		
Expected Operating Days from April 1, 2009 - March 31, 2010 (Maximum 260 days):		

**II. CERTIFICATION BY APPLICANT**

**I have read and understand the following :**

- A. The Child Care Centre must have a valid license to operate a child care facility. Failure to comply with the Day Care Act and Regulations may result in the facility not being eligible for the Stabilization Grant.
- B. Compliance with the **2009/10 Terms and Conditions of the Nova Scotia Child Care Stabilization Grant Program** is essential to ensure continued funding support.
- C. 80% of the Stabilization Grant must be used to increase wages of eligible on-site child care staff. The remaining 20% must be used to increase wages and/or benefits of eligible on-site child care staff.
- D. There will be an annual accountability process to monitor funding allocations, utilization and outcomes. Through this process, information specific to the distribution of the allocated monies within the Child Care Centre will be collected. I agree to provide the Department of Community Services with such additional information as may be required under this grant initiative.
- E. The operator agrees to disburse the 2009/10 Stabilization Grant in an equitable manner to staff based on the time lines established in the **Terms and Conditions of the Nova Scotia Child Care Stabilization Grant Program**.
- F. If a new staff member has been hired since the 2008/09 Stabilization Grant application, or if a staff member has become trained as defined in the Day Care Act and Regulations, documentation demonstrating proof of training must be submitted with this application.

**I, the undersigned, do hereby certify that all the information provided is true and complete to the best of my knowledge and belief. By applying my signature below, I agree and commit to the foregoing Child Care Stabilization Grant Terms and Conditions.**

Director Signature:	Print Name:	Date:
<input type="checkbox"/> Chair of Board or <input type="checkbox"/> Operator Signature:	Print Name:	Date:



# NOVA SCOTIA CHILD CARE STABILIZATION GRANT APPLICATION

## Instructions for Completion of the Child Care Stabilization Grant Application (pg. 3 of 3)

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The first two pages of the Child Care Stabilization Grant Application package must be completed in full. Please refer to the **2009/10 Nova Scotia Child Care Stabilization Grant Program Terms and Conditions**, included with this package, before completing this application form. Where an organization operates multiple sites, an application is to be **completed for each licensed child care facility**. If an application which is incorrect or incomplete, is submitted prior to the application deadline, Department staff will contact the Child Care Centre for clarification. **If the required information is not provided by the deadline, the application will be treated as incomplete and may not be processed in time for the next scheduled installment.** If you have any questions please call (902) 424-4824. Once this application form is completed, please make a copy for your records and mail the **signed original** by **Friday May 1, 2009** to your Early Childhood Development Officer (ECDO). Addresses for ECDO's are included with the covering memo.

### I. Child Care Centre Profile

1. Please provide the full address of the child care facility. If your mailing address is different from the location address, please specify.
2. The contact name, phone number, fax number and e-mail address, should be of the person who completed the Nova Scotia Child Care Stabilization Grant Application.
3. Include the date the child care facility opened and hours of operation that the facility is open to provide child care.
4. Indicate whether the Child Care Centre is operated by a non-profit Board of Directors or by an individual/company.
5. Indicate the expected operating days of the Child Care Centre for the fiscal year April 1, 2009 to March 31, 2010. You may include the following recognized holidays in your calculation; New Year's Day, Good Friday, Easter Monday, Victoria Day, Canada Day, Civic Holiday, Labour Day, Thanksgiving Day, Remembrance Day, Christmas Day, and Boxing Day. Do not include all other days the centre closes for holidays, etc.

### II. Certification by Applicant

1. It is very important that the designated signing authorities from the organization have read and agree to abide by the **2009/10 Terms and Conditions of the Nova Scotia Child Care Stabilization Grant Program** enclosed. The signature of both the Director and the Operator or Chair of Board must therefore be included on the application before the application can be processed.
2. If the Director is also the Owner/Operator please sign under **both** positions. Be sure to date the application form in the space provided.

### III. Capacity/Staff Information

1. Please do not include any part day programs that are included within the full day license. As stated in the Terms & Conditions, funding is only available to centres providing *full day child care*. See Definitions 2.3.
2. Licensed Capacity - should be in accordance with what is stated on the facility's full day license.
3. Column 1 - The child care facility's total approved program capacity for each age group should be in accordance with group size per the Day Care Act and Regulations.
4. Column 2 - Please specify your **actual enrollment** of children in each age group during the week of **April 20 - 24, 2009**.
5. Column 3 - Calculate the Full Time Equivalent value of the Actual Children Enrolled.
6. Column 4 - Please record the number of teachers required to meet ratio as per the Day Care Act and Regulations based on the actual enrollment of children in each Child Age Group per Column 3.
7. Column 5 - Record the Child Care teaching staff who work in the full day program.  
Please print - their name and Social Insurance Number  
- indicated whether they are ECE or EQU (based on the training requirements identified in Regulation 21A(5)(a,b,c) of the Day Care Act.)  
- Record the Full Time Equivalent (FTE) for each staff member.  
The On-Site Director can put her FTE value based on the hours she works directly with children. Administrative hours are not to be included. Do not include maternity or sick leave relief staff. The person who normally fills the position and will be returning to that position should be included.
8. Column 6 - Provide the centre's current Daily Fee for each child age group.