





## **Hero Relief Program Grant**

## **Agreement to Terms and Conditions**

Please ensure you adhere to the requirements as outlined in the signed Agreement to Terms and Conditions section of the grant application listed below. If you have questions, contact Child Care Aware of Kansas to explain the requirements in greater detail.

- Child care centers and family child care programs must be licensed by and in good standing with Kansas Department of Health and Environment (KDHE).
- Child care centers and family and group child care programs must hold a current Kansas Child Care Center License; Kansas Day Care Home License; or Kansas Group Day Care Home license providing full time, full year child care slots.
- Child care centers and family child care programs must agree to remain in business for at least 8 months from the date of the approval letter.
- Child care centers and family child care programs must purchase items agreed upon in the grant application.
- Receipts for all items/expenses paid with grant funds must be kept by the child care centers and family child care programs for 5 years.
   These funds are subject to state, federal and Child Care Aware of Kansas audits. Receipts may be requested anytime within a 5-year timeframe.
- Supply grant funds must be spent with 90 days from the award date. A 30-day extension will be provided if needed to expend any
  remaining funds.
- Sustainability grant funds must be spent by October 31, 2020.

I certify that to the best of my knowledge all the information in the Hero Relief Project application is correct. I further agree that if my grant application is accepted, I will comply with all grant guidelines listed on the Grant Guideline page.

In addition to the terms and conditions listed above I agree the **Supply Grant** funds will be spent in accordance with the award and intended purpose.

Supply Grant				
Program Name				
Name of Authorized Representative				
(please print)				
Authorized Signature		Date		

I certify that to the best of my knowledge all the information in the Hero Relief Project application is correct. I further agree that if my grant application is accepted, I will comply with all grant guidelines listed on the Grant Guideline page.

In addition to the terms and conditions listed above I agree the **Sustainability Grant** funds will be spent in accordance with the award and intended purpose. It is an **expectation** of child care providers receiving these funds, that a portion of the funds received be utilized to continue to pay the salaries/wages of staff employed through the licensed child care facility.

Sustainability Grant				
Program Name				
Name of Authorized Representative				
(please print)				
Authorized Signature		Date		

## **Program Consent to Share Information Form**

In accepting funds awarded through the Hero Relief Program, I am authorizing Child Care Aware of Kansas to collect and share information on your program with the agencies listed below for the purpose of supporting child care program needs as a result of the COVID-19 outbreak. It is further agreed that all identifying information shared among agencies will be held as confidential, unless otherwise required by law.

- Kansas Department for Children and Families (DCF)
- Kansas Department of Health and Environment (KDHE)