

**Hawaii P-20 Partnerships for Education
 Preschool Development Grant Birth to Five Renewal Grant
 Early Childhood Workforce Stabilization & Compensation Assistance Program Application**

Section 1: Applicant Information	
Name of Applicant: _____	Applicant's Title: _____
Telephone Number: _____	Email Address: _____
Facility Name: _____	
Licensee Name (If applicable): _____	Enrollment Capacity: _____
Facility Physical Address: _____	
City: _____	County: _____ Zip Code: _____
Facility Mailing Address (If different from above): _____	
City: _____	County: _____ Zip Code: _____
Section 2: Applicant Bonus Request and Current Status	
Number of Full-Time Staff positions on the facility's payroll to receive bonus (Full-Time is defined as working more than 25 hours per week):	
Number of Part-Time Staff positions on the facility's payroll to receive bonus (Full-Time is defined as working more than 25 hours per week):	
Is licensed, registered, or licensed-exempt? Provide documentation.	__ Yes __ No
Is ineligible to participate in the DHS Child Care Stabilization Grant Program. Provide reason for ineligibility.	__ Yes __ No
Is currently in good standing with DHS (if applicable).	__ Yes __ No __ N/A
Is currently open and operating for in-person services at the time the application is submitted (not including temporary closures consistent with the ordinary course of business)?	__ Yes __ No
Is committed to remain open and operating for a period of one (1) year from the date of receiving the award (not including temporary closures consistent with the ordinary course of business).	__ Yes __ No

Section 3: Acknowledgment of Terms of Program, Certification

By submitting this Application, Applicant certifies and agrees:

1. To be bound by any and all Early Childhood Workforce Stabilization and Compensation Assistance Program requirements as set forth in the Request for Application, and the terms set forth below, including the terms and conditions set forth in the Research Corporation of the University of Hawai'i (RCUH) Agreement for Services and Attachment 32a, Terms and Conditions Applicable to Contracts and Purchase Orders (Under Federal Grants);
2. To submit the Early Childhood Workforce Stabilization and Compensation Assistant Program Employee Roster, and any requested payroll/payment documentation (i.e., bank statements, check stubs, payroll report, etc.) within thirty (30) days after the disbursement of the bonuses;
3. To continue paying at least the same amount of weekly wages and maintain the same benefits (such as health insurance and retirement) for the duration of the program for each employee (including lead teachers, aides, etc.) and to not involuntarily furlough employees from the date of submission of this Application through the duration of the program (December 30, 2024);
4. This Application does not create a contractual relationship with the RCUH, the University of Hawai'i (UH), Hawai'i P-20 Partnerships for Education (Hawai'i P-20) or the Executive Office on Early Education (EOEL), and any failure to distribute funds pursuant to this Application does not create a cause of action nor does it carry any appeal rights;
5. To only expend the funds in a manner as defined in this Application and to expend the total payment approved within thirty (30) days of receipt of approved funds, unless prior written approval has been granted;
6. To keep detailed, accurate, and truthful accounting records of the receipt and disbursement of all funds received pursuant to this Application;
7. To allow Hawai'i P-20, or its representative(s), unlimited access to audit and examine any and all records related to the funds disbursed pursuant to this Application, including, but not limited to, all records, reports, distributions, account ledgers, balance sheets, bank records, credit card statements, electronic payment records, receipts, and/or other documents related to the receipt and distribution of funds pursuant to this Application; failure to provide accurate documentation will be construed as filing a false statement;
8. To allow the Hawai'i P-20 or its representative(s) to interview any employee or agency in relation to funds disbursed pursuant to this Application;
9. That any funds received pursuant to this Application are subject to repayment, reclaim and recapture if (a) the funds are not used in the manner provided for and set forth in this Application, or (b) if access to records or information as set forth in the preceding paragraphs is refused or denied by the person(s) or entity receiving funds pursuant to this Application or, (c) if any information provided in the Application is found to be false or misleading; any agency action in requesting or demanding repayment, reclaim, and/or recapture is a final determination and is not subject to appeal;
10. That, if funding is reduced or restricted prior to distribution by legislative action, federal or state allocations, or executive action, the amount approved for distribution will be reduced or eliminated accordingly;
11. That this Agreement does not and will not violate any conflict-of-interest provisions in any respect and Applicant agrees not to pay a bonus to an individual that would result in a violation of law;
12. Will not use any funds disbursed under this application for lobbying or any other prohibited use;
13. To comply with Executive Order No. 11246, as amended and as supplemented by U.S. Department of Labor regulations (41 CFR, Part 60-1, et. seq.), which prohibits discrimination based on race, creed, color, religion, national origin, sex, or age; and
14. The information included in this Application is true and correct; and the person whose signature is below is the applicant/owner/licensee or the authorized designee with the authority to sign the Application and agree to the terms and requirements of the Program.

Signature: _____ Date: _____

Name: _____ Title: _____