Tribal Early Learning Fund Grant Application

Introduction

The Washington State Department of Children, Youth, and Families (DCYF) is excited to share that a third round of Tribal Early Learning funding (TELF) is available to tribal early learning programs and tribal-serving organizations. This funding opportunity supports tribal children, prenatal to five, in early learning programs across Washington state in a culturally appropriate and inclusive manner.

Funding Timeline

| Request for Applications – Open | Friday, Oct. 18, 2024 |
|--|--------------------------------------|
| Technical Assistance | Wednesday, Oct. 23, 2024 |
| Zoom Meeting Link Meeting ID: 818 8720 6661 Passcode: 889940 | 9 a.m. to 11 a.m. |
| Technical Assistance | Wednesday, Oct. 30, 2024 |
| Zoom Meeting Link Meeting ID: 818 8720 6661 Passcode: 889940 | 9 a.m. to 11 a.m. |
| Technical Assistance | Wednesday, Nov. 6, 2024 |
| Zoom Meeting Link Meeting ID: 818 8720 6661 Passcode: 889940 | 9 a.m. to 11 a.m. |
| Request for Applications – Closes | Monday, Dec. 2, 2024 5 p.m. (COB) |
| Application Review | Dec. 2-6, 2024 |
| Award Notices | Dec. 13, 2024 |

Eligibility

To be eligible for funding, applicants must currently serve pregnant individuals or children, birth to 5 years of age, who are either members of the 29 tribes of Washington state or one of 574 Federally Recognized Tribes.



Eligible programs include, but are not limited to:

- 1. Tribal Head Start
- 2. Tribal Early Head Start
- 3. Tribal Early Childhood Education Assistance Programs (ECEAP), including tribal contractors and subcontractors
- 4. Tribal Early ECEAP, including tribal contractors and subcontractors
- 5. Tribal child care centers
- 6. Tribally licensed child care providers
- 7. Recognized American Indian Organizations (RAIOs) with an early learning program
- 8. Tribal/Native serving organizations with an early learning program
- 9. Certified/Certified for payment only tribal child care providers
- 10. Tribal home visiting programs
- 11. Family, Friends, and Neighbors (FFN)
- 12. Early Childhood and Assistance Program (ECEAP) contractors serving tribal children
- 13. Early ECEAP contractors serving tribal children
- 14. State licensed child care providers serving tribal children
- 15. Home visiting programs serving tribal children

Funding Priorities

Providers may apply for funds under the following priorities:

- Priority 1: Tribal Language Education
- Priority 2: Elders and Storytelling in the Classroom
- Priority 3: Culturally Responsive Books and Materials
- Priority 4: Incorporating Indigenous Foods
- Priority 5: Outdoor Based Education
- Priority 6: Traditional Music and Arts Instruction
- Priority 7: Curriculum Adaptation and Supplements
- Priority 8: Transportation to facilitate tribal child participation in early childhood
- education
- Priority 9: Supplemental Home Visiting, ECEAP Slots, Fund Non-Federal Shares (HS/EHS)
- Priority 10: Professional Development
- Priority 11: Mental Health Supports
- Priority 12: Educational Access (Wi-Fi)

The following priorities have been identified, but funding is not limited to these priorities and will be assessed during the review process.

Ineligible Cost and Activities

TELF grant funds cannot be used for capital expenses, materials, or activities that **do not** advance or inspire enhanced language access and practices that promote inclusive and culturally responsive learning environments.

Other ineligible costs and activities include:

- 1. Costs not related to the project outcome.
- 2. Religious activities or purposes, including worship or instruction.
- 3. Capital improvements/projects, such as major construction or renovation.
 - i. No Capital Purchases over \$5,000 (No single item purchase).
- 4. General operational costs, including:
 - i. Regular payroll costs for existing staff.
 - ii. Costs of purchasing, owning, or maintaining a vehicle.
 - iii. Regular facility costs, such as rent or utilities.
 - iv. Insurance.
 - v. Other business operating costs.
 - vi. Federal taxes.
- 5. Raises or bonuses for existing staff.
- 6. Gifts for families.

What is a capital project?

A capital project is a project to construct either new facilities or make significant, long term renewal improvements to existing facilities. Grants made by or passed through the state to fund projects for other entities are also included in the capital budget, and these instructions apply to those projects. Capital projects appropriated in the capital budget are public works under Chapter 39.04 RCW and subject to prevailing wage requirements and other applicable laws.

When to capitalize assets 30.20.20

The state's capitalization policy is as follows:

All other capital assets with a unit cost (including ancillary costs) of \$10,000 or greater, or collections with a total cost of \$10,000 or greater, unless otherwise noted.

Evaluation Criteria Rubric

Evaluation is made up of four criteria: Background Information; Proposed Project; Organizational Experience; Program Management and Experience.

| Criterion | Total questions | Total points | Description |
|-------------------------------|--------------------|-----------------|---------------------|
| Background information | 8 | 4 | 0.5 pt per question |
| Organizational Experience | 3 | 6 | 2 pts per question |
| Proposed Project | 6 | 30 | 5 pts per question |
| Program Management & Outcomes | 3 | 15 | 5 pts per question |

Evaluation Criteria Questions

1. Background Information:

- 1.1. What is the name of your program?
- 1.2. What is your mailing address?
- 1.3. Is your program operated by a Tribal Nation?
 - 1.3.1. What type of early education provider is your organization?
 - 1.3.2. Please select one, unless you are a tribe with multiple programs in Category 1.
- 1.4. What are your hours of operation serving tribal children and families?
- 1.5. Where are you located? (what is the physical/site location of your program?)
 - 1.5.1. What region are you located in? DCYF Regional Map
- 1.6. How many tribal children will be served by this project?
- 1.7. How many staff members does your organization employ, including bus drivers, cooks, security administrators, etc.?
- 1.8. How many years has your early learning program been in operation?

2. Organization Experience:

- 2.1. Who will manage this project?
 - 2.1.1. Please provide their contact information, phone number, and email.
- 2.2. Has the staff member or personnel managing this project worked with state or federal agencies before?
- 2.3. What types of projects or experience does this person have to meet your project's priorities and outcomes?

3. Proposed Project:

- 3.1. Have you worked with tribal populations before? If so, how and when?
- 3.2. How will your project address the purpose and priorities of the grant?
- 3.3. How will the priorities address the needs of tribal children and families?
- 3.4. What priority/priorities will your program deliver and how will the priority/priorities impact tribal children and families?
- 3.5. What is the total budget justification for your projects? (please itemize cost by priorities and expenses)
 - 3.5.1. Budget Excel Spreadsheet/File Upload. Please include all expenses such as personnel, supplies, professional development, travel, contracts, fringe, and administrative cost, Indirect Cost Rate Tribes, please work with your finance office for your Indirect Cost Rate.
- 3.6. How will your leadership team support the person in charge of TELF delivery?

4. Program Management & Outcomes:

- 4.1. How will you ensure your project is managed with fidelity?
- 4.2. How will you explain and share back the results, project's outcomes from the identified priorities to the children and families you are proposing to engage?
- 4.3. What types of processes or policies do you have in place that will allow you to collect and report your project's performance to DCYF?

NOTE: In addition to the application, each applicant must apply for Statewide Vendor Number (Provider Registration Form (W-9): https://dcyf.wa.gov/services/early-learning-providers/licensed-provider/vendor-number

Outcomes and Reporting Requirements

Reporting requirements on management and outcomes is required by DCYF. We want to hear your voices. For your reference, examples have been provided in the Request for Application (RFA) listed under "Share your story."

As you write your story, please consider how your project outcomes align with TELF grant purposes and priorities. Consider how many children and families it served, the types of activities you provided, and the overall outcome from the activity.

Our intent is that the outcomes, shared in a story, will help us make a case for continued funding. If you have questions or concerns, our TELF specialist is available to answer any questions you might have.

Terms and Conditions

TELF funding must be spent within the fiscal year which it was awarded and within the project scope described above.

- Agree. I certify that the information I have provided on this application is true and correct.
- Agree. I will spend TELF funding, if awarded, on the purchase outlined in this grant application.
- Agree. I will spend the TELF funding within the appropriate fiscal year of the date that the funds were received.
- Agree. I will report to DCYF's Office of Tribal Relations (OTR) on how I spend TELF funding. This will include keeping receipts and documentation (i.e. invoices) from all purchases made with this grant money and submitting an end of fiscal year report to DCYF at the end of the grant fiscal cycle (July 1, 2024 - June 30, 2025).
- Agree. I understand that OTR may ask me to provide these receipts for purchases made with money from this grant, and if I cannot provide these receipts and documentation when asked, I will be required to repay part, or all, of the grant money to DCYF.
- Agree. If I close my child care license or my license is suspended before the grant cycle ends, I will return any unspent grant funds to DCYF. I will still be responsible for providing reporting and receipts to OTR detailing funds I did spend, regardless of open or closed status.
- Agree. If I do not comply with DCYF's reporting requirements or cannot show that the funds were spent in accordance with my application, I understand that I am in violation of the terms of the TELF grant agreement and will return the grant funds to DCYF.
- Agree. I understand that my application will be denied if I request funding for any disallowed costs, listed above.
- Agree. I have reviewed my application and am ready to submit. I understand once my application is submitted, I cannot make any changes to my answers.

DCYF may include information on this contract in their periodic public reports and may make information about this contract public at any time in their web pages and as part of press releases, public reports, speeches, newsletters, and other public documents related to the Contract or the HVSA. DCYF must comply with Washington state public disclosure law (Chapter 42.56 RCW) and with regulations set forth in HIPAA and FERPA.

If the Contractor wishes to issue a press release or public report announcing this contract, or otherwise use DCYF's name or logo for purposes related to this contract, the Contractor shall contact the DCYF contract manager, identified on page 1 of this contract, at least five (5) business days before the desired announcement or publication date to obtain prior approval.

For all press releases or public reports approved by DCYF, the Contractor shall include the name and logo of DCYF and that the project is funded by the Washington State Department of Children, Youth, and Families and Home Visiting Services Account.

I certify that I have the authority to submit this proposal, and that the information in this proposal is true and accurate. If my organization is faith-based, I understand that federal and state law prohibits the use of public funds for religious worship, exercise, instruction, or support of any religious establishment: http://www.acf.hhs.gov/programs/occ/resource/equal-treatment-regulations-for-faith-based-organizations

I understand that my organization will not receive reimbursement for any costs incurred in preparing this proposal.

| Printed Name and Title | |
|------------------------------|--|
| Signature | |
| Date | |