

**Child Care Provider
Technology Grant Application**

Deadline to Apply: August 31, 2022

Program Name: _____

Program Site Address: _____

FEIN or SSN Number: _____ Telephone #: _____

Email Address: _____

License Number, if applicable: _____

Are you an ABC Quality Provider: Yes ___ No ___
(Please Check One)

Are you an Exempt provider: Yes ___ No ___

<i>Please check one</i>	Child Care Centers (Based on Licensed Capacity)	Grant Amount
	100+ children	\$50,000
	50-99 children	\$40,000
	Up to 49 children	\$30,000
	Family/Group Child Care Homes	\$10,000
	Licensed- Exempt Programs (ABC Quality)	\$35,000

Terms and Conditions:

- I also understand that it is my responsibility to maintain records and other documentation to support the use of funds I receive. Providers will maintain documentation supporting the expenditure of grant funds which may include records of application approval, receipts, invoices, and/or any other supporting documentation indicating how funds were used. Documentation must remain on file at the facility for a period of three (3) years from the date the grant is completed as needed to satisfy a possible audit.
- Documentation may be requested at any time by DSS and, if requested, will need to be provided within fifteen (15) calendar days of the request. If funds are determined not to be used for purchases according to the definition of operating expenses provided, recoupment of the funds will be initiated.

I HEREBY certify that, to the best of my knowledge, the provided information is true and accurate:

Director's Signature: _____ Date Signed: _____

Print Name: _____

Note: Please send completed application to decetechnologygrant@dss.sc.gov.

DSS USE ONLY	
Approved By: _____	Date: _____
Date Keyed in Voucher System: _____	
Date Sent to Finance: _____	