Licensed Exempt Child Care
Guidance for SC Building Blocks Grant Application

**IMPORTANT: Information in this application is pulled directly from DSS Systems. If any information, such as hours of operation or quality level, has changed please contact your Child Care Licensing Specialist or ABC Quality Assessor BEFORE submitting your application.**

Step 1

Enter your CC number. This is the same number you use to obtain your SLED/FBI background checks. If you are unsure what your number is, you can contact your ABC Quality Assessor.

Step 2

- Exempt Child Care Details
  - Provider Name: Exempt Test Center 3
  - Street Address: 1628 Browning Rd
  - City: Columbia
  - State: SC
  - Zip Code: 29021
  - Facility Type: EX
  - ABC Quality Level: A
  - Equity Index: Located in equity index 1 area
  - Capacity: 

Information, except capacity, is automatically added from DSS system. Review Details for accuracy. If any information is incorrect, please contact your ABC Quality Assessor.

Equity Index is determined by the county your facility resides in. For more details on Equity Index visit [www.scchildcare.org](http://www.scchildcare.org).

Step 3

- Operator/Director Details
  - Operator/Director First Name
  - Operator/Director Last Name
  - Operator/Director Contact Email
  - Phone Number
  - Operator/Director Race
  - Operator/Director Ethnicity
  - Operator/Director Gender

Enter Director or Operator contact details. If more than one Operator click the button to enter details for second person.
Example Step 3:

If temporarily closed:

The status of your facility will need to be filled in. Either you are open or temporarily closed due to Covid19.

If the facility is closed for any other reason, the facility does not qualify for this grant.

If the facility is temporarily closed due to Covid19, you can still apply, but you must re-open within 30 days from the date of notification of payment from the state accounting system (SCEIS).

Update your ABC Quality Assessor when you have re-opened.

Questions that require an answer will be full color. Click on the button to change the answer to “Yes”.

Step 4

If Temporarily closed:

If temporarily closed due to Covid19 you can still apply, but you must re-open within 30 days from the date of notification of payment from the state accounting system (SCEIS).

Update your ABC Quality Assessor when you have re-opened.
Step 5

What is the licensed or identified capacity of your program?:
50

<table>
<thead>
<tr>
<th>Day of the Week</th>
<th>Hours of Operations</th>
<th>Total Operating Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday</td>
<td>3-6</td>
<td>3</td>
</tr>
<tr>
<td>Tuesday</td>
<td>4-6</td>
<td>2</td>
</tr>
<tr>
<td>Wednesday</td>
<td>1-4</td>
<td>3</td>
</tr>
<tr>
<td>Thursday</td>
<td>3-6</td>
<td>3</td>
</tr>
<tr>
<td>Friday</td>
<td>3-6</td>
<td>3</td>
</tr>
<tr>
<td>Saturday</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Sunday</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

Number of recipients of voucher paid in the last two years: 56

Step 6

What is your current average enrollment by age?:

- 0 years of age*
- 1 year of age*
- 2 years of age*
- 3 years of age*
- 4 years of age*
- 5 years of age not in Kindergarten*
- 5 years of age in Kindergarten or older*

Total Average Enrollment: *35

Example Step 6:

All lines must have a number. If no children enrolled at that age then place a 0 on the line.

0 years of age*
0

1 year of age*
0

2 years of age*
0

3 years of age*
0

4 years of age*
10

5 years of age not in Kindergarten*
15

5 years of age in Kindergarten or older*
10

Total Average Enrollment: *35

Enter Hours of Operation and Total Operating Hours for that day. If facility does not operate on a day leave it as 0.

All lines must have a number. If no children enrolled at that age then place a 0 on the line.
Step 7

**Base Funding**

- **Type of facility:** Exempt
- **What is your current ABC Quality level?** A
- **Total Base Funding Amount:** $40,000.00

Step 8

**Supplemental Funding**

- **Number of recipients of vouchers paid in the last two years:** 56
- **Total Supplemental Funding Amount:** $12,000.00

Step 9

- **Do you agree to the staff compensation expectation?** Yes
- **Funding you must allocate to staff compensation:** $15,000.00
- **Total Funding Amount:** $52,000.00

Example Step 9:

- **Total Funding**
  - **Total Potential Funding:** $52,000.00
  - **Do you agree to the staff compensation expectation?** Yes
  - **Funding you must allocate to staff compensation:** $15,000.00
  - **Total Funding Amount:** $52,000.00

All Information in this section is pulled from DSS Systems, if incorrect contact your ABC Quality Assessor to update before submitting application.

Answer "yes" to opt in for staff compensation options. If "no", then facility is only eligible for 75% of the potential funding amount.

If you answered “Yes” to staff compensation options the system will show you the amount that must be allocated to staff compensation options.
### Step 10

- **Funds Use Categories Information**

  - **Personnel Costs:** 25% $13,000.00
  - **Rent, utilities, facility maintenance, and insurance:** $NaN
  - **Personal Protective Equipment, Cleaning, and other health and safety practices:** $NaN
  - **Equipment and Supplies:** $NaN
  - **Goods and Services:** $NaN
  - **Mental Health Services:** $NaN
  - **Past Expenses:** $NaN
  - **Total:** NaN% $NaN

  **Percentage should be 100, to submit the application.**

  Circles explain allowable use of funds in each section.

  Determine the percentage of the funds that you will use in each Category.

  Total percentage must equal 100% to be able to submit the application.

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**Example Step 10:**

- **Total:** 100% $52,000.00
Step 11

All confirmation boxes must be checked to be able to submit application

Step 12

Sign by left clicking on your mouse and moving the cursor.

Example Step 12:
Questions about the SC Building Blocks grant?
Email scstabilizationgrant@dss.sc.gov or call Tameka Pauling at (800)476-0199.

Need help completing the SC Building Blocks Grant application or need assistance in planning how to use the grant funding?
Call the SC Child Care Resource and Referral Network at (888)335-1002 or complete a web referral at www.sc-ccrr.org.