



Child care providers are eligible to apply for funds to support social and/or emotional development and well-being of the children in their care. These funds should be used to help the provider reach one specific coaching goal and applications should be filled out by the provider and coach together. Social and Emotional Enhancement Grant funds can be used for anything that will enhance the children's social and/or emotional experiences while in care. There are funds set aside for each Rooted in Relationships community. As coaching goals change, a provider can apply for additional funds. Applications are generally reviewed the 1st Monday of each month.

Allowable items are:

Training: Including, but not limited to, specialized staff training (i.e. infant brain development, social-emotional early learning guidelines training, etc.), workshops, conferences, consultant fees, or a substitute to cover the classroom while the provider attends training. Does not cover transportation or lodging to attend.

Curriculum materials: Including, but not limited to books, educational software, instructional videos, etc.

Materials and/or equipment: Including, but not limited to children's indoor play equipment, children's art supplies, multi-cultural dolls, dramatic play items, shelves, chairs, cots, social-emotional books, etc.

For more information on specifics, to find grant instructions, and sample grants, please visit the [Rooted in Relationships Website](#).

**Providers in Year 3 are not able to apply after March 1st, as there is limited time for providers to receive and implement coaching around the materials.*

Social and Emotional Enhancement Grant Application

Provider Information

All fields on this page are required.

Date of request: _____

Provider Name: _____

Provider Phone Number: _____

Provider Email Address: _____

Program Name (if applicable): _____

Program Mailing Address: _____

Tax ID: _____

Make Check Payable to: _____

In what type of child care program do you work?

- Family child care Center-Based child care

Do you accept childcare subsidy?

- Yes No

Coach's Name: _____

Coach's Phone Number: _____

Coach's Email Address: _____

Name of Person Submitting Request: _____

Name and Email of Person Responsible for Ordering: _____

(IF DIFFERENT THAN PERSON ABOVE)

What are requesting on this application:

- Training Curriculum Materials Program Materials or Equipment

What year of Implementation are you in?

- Year 1 Year 2 Year 3

Social and Emotional Enhancement Grant Application

Request for Training

Examples of Allowable Items:

Training (i.e. infant brain development, social-emotional early learning guidelines training)

Workshops

Conferences

Consultant fees

Substitute to cover the classroom while the provider attends training

DOES NOT COVER TRANSPORTATION OR LODGING TO ATTEND TRAINING

For what will the funds be used? Be specific, include the name, date and location of training.

Name: _____

Date: _____

Location: _____

Cost: _____

Additional Cost: _____

Additional Cost: _____

Approved:
(for staff only)

Yes

No

Partially
approved

Why are you requesting this training?

What is the coaching goal you are working on that relates to this request?

How will participating in this training help you reach this goal?

Social and Emotional Enhancement Grant Application

Request for Curriculum Materials & Equipment

Examples of Allowable Curriculum Items:

- Resource Books
- Educational software
- Instructional videos
- Social Emotional teaching tools

Examples of Allowable Materials & Equipment:

- Developmentally appropriate toys/equipment including, but not limited to;
- Children's indoor play equipment
- Children's art supplies
- Children's books
- Multi-cultural dolls
- Dramatic play items
- Shelving and material organization systems
- Chairs
- Cots

Where will funds be used?

- Program wide
- In a specific classroom

For what will the funds be used? Provide a description of each material being requested and the individual cost. Include web-links to items that will be ordered online. Also, please specify shipping costs for these materials in this section. If you have additional items, please include those on a separate sheet.

Item: _____

Link: _____

Cost: _____ Shipping: _____

Item: _____

Link: _____

Cost: _____ Shipping: _____

Item: _____

Link: _____

Cost: _____ Shipping: _____

Approved: (for staff only)
<input type="checkbox"/> Yes
<input type="checkbox"/> No
<input type="checkbox"/> Yes
<input type="checkbox"/> No
<input type="checkbox"/> Yes
<input type="checkbox"/> No

Social and Emotional Enhancement Grant Application

Item: _____

Link: _____

Cost: _____ Shipping: _____

Item: _____

Link: _____

Cost: _____ Shipping: _____

Approved:
(for staff only)

Yes

No

Yes

No

Total amount requested: _____

TOTAL AMOUNT APPROVED (for staff only): _____

What is the one pyramid related coaching goal you are working on that relates to this request?

Why are you requesting these materials/equipment? What strategies have you already tried to support your goal?

How will the materials or equipment you are requesting help you reach this goal?

Describe how the materials being requested will help improve the quality of social and/or emotional experiences of young children in your care?

Social and Emotional Enhancement Grant Application

In the space below provide your timeline for implementing these materials, including at least three action steps that you will take to use the curriculum materials being requested. What are the steps you will take and the timeline for doing so?

For example: *After I order materials I will talk to the children about the changes that are going to happen. When the items arrive, I will spend time going over how to properly use the materials to meet my goal with my coach. When I begin implementing we will continue to touch base to make sure that it is helping me meet my goal and we will strategize if something is not going correctly.*

Assurances

By checking the box below, I acknowledge that I will submit receipts of my purchase(s) to rootedgrants@nebraskachildren.org within 30 days from approval of this grant request.

I agree

By checking the box below, I acknowledge that I will submit the required implementation reports, pictures, and delivery confirmation no more than 90 days (3 months) following approval of this grant request.

I agree

By checking the box below, I acknowledge that I have discussed this request with my coach and my program director (if in a center-based program) and have their full support in this request.

I agree

Social and Emotional Enhancement Grant Application

This section to be filled out by Rooted in Relationships Staff only

Approved

Partially approved

Denied

Total amount approved: _____

Name: _____ Date: _____

Receipts due: _____

Implementation report due: _____

Comments: