

**The Santa Cruz County
Child Care Planning Council**
El Consejo de Planeación de Cuidado
Infantil del Condado de Santa Cruz
www.childcareplanning.org

Requests for Support of Grant Proposals

A. PRIORITIES FOR SUPPORT OF GRANT PROPOSALS

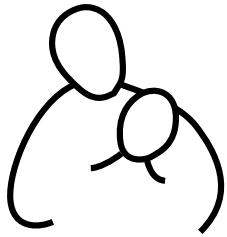
1. Proposed project/program meets goal(s) in Master Plan
2. Proposed project/program meets the child care/recreation needs of an underserved geographic area, age of children, or program type
3. The applicant agency demonstrates the capacity to implement the proposed project/program

B. PROCESS FOR REQUESTING SUPPORT OF PROPOSAL

1. A completed *Request for Support of Grant Proposal* form must be submitted to the Santa Cruz Child Care Planning Council no less than three weeks prior to a scheduled Planning Council meeting.
2. A representative from the applicant agency must be present to communicate the request at a scheduled Santa Cruz County Child Care Planning Council meeting.
3. The Santa Cruz County Child Care Planning Council may take action at the meeting in which the proposal is presented or, if further information is requested, table a discussion until the next scheduled meeting.
4. In order to respond in a timely manner, the Santa Cruz County Child Care Planning Council may direct the Executive Committee to review and respond to a request for support of a grant proposal.
5. If timelines determined by the funder do not allow an applicant agency ample time to follow this process, the applicant agency may request a special meeting with the Executive Committee.
6. Any Santa Cruz County Child Care Planning Council member who as an individual, or whose agency may benefit from a proposed project, must abstain from participating in the process.

Submit Requests for Support of Grant Proposals to:

Child Care Planning Council
County Office of Education
809-H Bay Ave.
Capitola, CA 95010
Phone: 831-477-5521
FAX: (831) 479-5236



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Request for Support of Grant Proposal

Applicant Agency:

Address:

Contact Person:

Daytime Phone Number:

Location of Project:

Amount of funding requested: \$

Proposed funding agency/organization/foundation:

1. Describe the proposed project/program.
2. How does the proposed project/program relate to the goals in the Santa Cruz County Master Plan for Child Care and Recreation Programs?
3. How does the proposed project/program meet the child care/recreation needs of underserved geographic areas, ages of children, and/or program types?
4. Describe your agency's capacity for implementation of this project.
5. Signatures:

Executive Director

Authorized Representative