

**Application for United Way Fund for Quality Early Childhood Education
Program Improvement Request**

Name _____ Social Security #: _____	
Home Mailing Address: _____ Tel #: _____ (Street or PO Box #, Town, State, Zip)	
_____ Registered Family Child Care Provider; VT Child Care Registration Certificate #: _____	
_____ Licensed Center Staff Member at: _____ (Center Name)	
Your Job Title at the Center: _____ Tel #: _____	
Address _____ (Street or PO Box #) (Town, State, Zip Code)	
AMOUNT OF FUNDS REQUESTED \$ _____	

Program Improvement

Write a brief description of the materials, equipment, furnishings or toys you need to improve your program. Include the following:

- Reasons why you chose these items and how it will impact the quality of care in your child care setting;
- Number of children in your program who will benefit from the items;
- Results of your Environmental Rating Scale assessment, the name of your assessor, and date the assessment was completed;
- The plan for improvement based on your Environmental Rating Scale assessment
- A list of items, cost, and source for purchasing
- If you have sought other funds to help support this project please list them along with the outcome of your request

Applications are accepted on a rolling basis and are viewed soon after the following quarterly deadlines

- August 15 – First Quarter
- November 15 – Second Quarter
- February 15- Third Quarter
- May 15 - Fourth Quarter

Unless we are told otherwise, applications received after each deadline will be held to be considered in the next quarter.

Your application will not be considered unless paperwork is submitted in full. Please remember to include the required supporting documents. Read the application carefully!

