

Continued Funding Application Fiscal Year 2021–22

Contractors who wish to be considered for continued funding for Fiscal Year (FY) 2021–22 must read the accompanying instructions and fully and accurately complete this application for continued funding. Please note that contractors have no vested right to a subsequent contract. Failure to timely respond to this application shall constitute notice to the Early Learning and Care Division (ELCD) of the intent to discontinue services at the end of the current contract year unless the contractor has received a written notice of extension of time from the ELCD. If this application is timely returned to the ELCD, but is not fully and accurately completed, funding for FY 2021–22, if awarded, may be delayed. Completion of this Continued Funding Application (CFA) does not guarantee a renewal of funding. Any contractors who are approved for continued funding will be expected to execute a contract with the California Department of Education (CDE) and comply with all applicable federal and state laws as well as all Funding Terms and Conditions and applicable Program Requirements incorporated into the contract. Please contact your regional consultant if your agency does not intend to continue services. Regional consultants may be contacted at the information on the CDE Regional Consultant Assignments web page at <https://www.cde.ca.gov/sp/cd/ci/assignments.asp>.

Instructions may be accessed on the CFA Web page at:
<https://www.cde.ca.gov/sp/cd/ci/cfaforms2122.asp>

Section I - Contractor Information

Legal Name of Contractor:

Contractor "Doing Business As" (DBA):

Headquartered County:

Vendor Number:

Executive Director Name:

Executive Director Telephone Number:

Executive Director Fax Number:

Executive Director E-mail Address:

Legal Business Address:

City:

Zip Code:

Mailing Address (if different from above):

City:

Zip Code:

Name of Person Completing Application:

Title of Contact Person Completing
Application:

Contact Person Telephone Number:

Contact Person E-mail Address:

Contractor Name

Vendor # County

Section II – Contract Types	
<p>Check all applicable boxes indicating the programs the contractor intends to continue to administer for the Fiscal Year 2021–22. The contractor agrees to continue implementation of these programs with funds provided by the California Department of Education.</p>	
<p style="text-align: center;">Center-Based Programs</p> <p><input type="checkbox"/> California State Preschool Program (CSPP) <input type="checkbox"/> Full-Year <input type="checkbox"/> Part-Year</p> <p><input type="checkbox"/> California Center-Based (CCTR) <input type="checkbox"/> Infant/Toddler <input type="checkbox"/> School-age</p> <p><input type="checkbox"/> Program for Special Needs (Handicapped) Children (CHAN)</p> <p><input type="checkbox"/> Migrant Center-Based (CMIG) and Migrant Special Services (CMSS)</p>	<p style="text-align: center;">Alternative Payment Programs</p> <p><input type="checkbox"/> Alternative Payment Program (CAPP)</p> <p><input type="checkbox"/> CalWORKs Stage 2 (C2AP)</p> <p><input type="checkbox"/> CalWORKs Stage 3 (C3AP)</p> <p><input type="checkbox"/> Migrant Alternative Payment (CMAP)</p> <p style="text-align: center;">Resource and Referral Programs</p> <p><input type="checkbox"/> Resource and Referral (CRRP)</p> <p style="text-align: center;">Family Child Care Home Programs</p> <p><input type="checkbox"/> Family Child Care Home Education Network (CFCC)</p>

Contractor Name

Vendor # County

Section III – Contractor’s Officers and Board of Directors Information				
Does the contractor have a board of directors?		<input type="checkbox"/> Yes		<input type="checkbox"/> No
If no, please explain the entity type and the governance structure (i.e., number of owners and partnership)				
Have any of the listed officers, board members, owners or other governing individuals ever served as an officer, board member, owner or governing individual with an agency that received state or federal funding and which agency funding was terminated or involuntarily non-renewed, or the agency was debarred from funding for any period of time?				
<input type="checkbox"/> Yes <input type="checkbox"/> No				
If yes, list on a separate page the officer(s), board member(s), owner(s) or other governing individual(s) to which this applies and include the former agency(ies) with which the individual(s) was/were previously affiliated and the circumstances leading to the termination, involuntary non-renewal or debarment.				
List all officers and board members/governing individuals (i.e., owner, director, etc.) Attach additional sheets as necessary.				
Officer, Board Member, Owner or Governing Individual Name	Title	Telephone Number	Mailing Address	Email Address

Section III – Contractor’s Officers and Board of Directors Information (additional page)				
Officer, Board Member, Owner or Governing Individual Name	Title	Telephone Number	Mailing Address	Email Address
Josie Gonzales	Fifth District Supervisor	909-387- 4565	385 N Arrowhead Ave, 5th Floor, San Bernardino, CA	jgonzales@bos.sbcounty.gov

Contractor Name

Vendor # County

Section IV – Program Narrative

A. The following types of contracts **do not** have programmatic **or** calendar changes (select all that apply). **NOTE:** Program calendars must be submitted for all contract types.

- | | |
|---|--|
| <input type="checkbox"/> California State Preschool Program (CSPP) | <input type="checkbox"/> CaWORKs Stage 2 (C2AP) |
| <input type="checkbox"/> California Center-Based (CCTR) | <input type="checkbox"/> CaWORKs Stage 3 (C3AP) |
| <input type="checkbox"/> Program for Special Needs (Handicapped) Children (CHAN) | <input type="checkbox"/> Migrant Alternative Payment (CMAP) |
| <input type="checkbox"/> Migrant, Center-Based (CMIG) and Migrant Specialized Services (CMSS) | <input type="checkbox"/> Resource and Referral (CRRP) |
| <input type="checkbox"/> Alternative Payment Program (CAPP) | <input type="checkbox"/> Family Child Care Home Education Network (CFCC) |

B. The following types of contracts **do** have programmatic and/or calendar changes (select all that apply). For each contract type selected in this section, complete a separate form ELCD 3704A. This form is available on the CFA web page at: <https://www.cde.ca.gov/sp/cd/ci/cfaforms2122.asp>.

NOTE: Program calendars must be submitted for all contract types. Making changes to Minimum Days of Operation (MDO) does not change the contract Maximum Reimbursable Amount (MRA).

- | | |
|---|--|
| <input type="checkbox"/> California State Preschool Program (CSPP) | <input type="checkbox"/> CaWORKs Stage 2 (C2AP) |
| <input type="checkbox"/> California Center-Based (CCTR) | <input type="checkbox"/> CaWORKs Stage 3 (C3AP) |
| <input type="checkbox"/> Program for Special Needs (Handicapped) Children (CHAN) | <input type="checkbox"/> Migrant Alternative Payment (CMAP) |
| <input type="checkbox"/> Migrant, Center-Based (CMIG) and Migrant Specialized Services (CMSS) | <input type="checkbox"/> Resource and Referral (CRRP) |
| <input type="checkbox"/> Alternative Payment Program (CAPP) | <input type="checkbox"/> Family Child Care Home Education Network (CFCC) |

Contractor Name

Vendor # County

Section V – Personnel Certification for Center-Based Programs and Family Child Care Home Education Networks	
<p>The State of California requires any contractor receiving child care and development funds, disbursed by the CDE to employ fully qualified personnel as stipulated in <i>California Education Code (EC)</i>; <i>California Code of Regulations, Title 5 (5 CCR)</i>; and Funding Terms and Conditions.</p>	
<p>I certify, as the authorized agent representing this contractor, that I have read and understand the staffing requirements for Program Director, Site Supervisor, and Teacher. All child care staff employed in CDE funded program(s) are fully qualified for their respective positions. The exception to this certification is a person employed as Program Director or Site Supervisor who possesses a current Staffing Qualifications Waiver approved by the Early Learning and Care Division (ELCD).</p>	
Signature of Contractor's Authorized Representative:	
Printed Name and Title of Contractor's Authorized Representative:	
Date of Signature:	
Authorized Representative's Telephone Number:	
Authorized Representative's Email Address:	

Contractor Name

Vendor # County

Section VI – Subcontract Certification	
<p>A. The following types of contracts do not have subcontractors (check all that apply):</p> <p><input type="checkbox"/> California State Preschool Program (CSPP)</p> <p><input type="checkbox"/> California Center-Based (CCTR)</p> <p><input type="checkbox"/> Program for Special Needs (Handicapped) Children (CHAN)</p> <p><input type="checkbox"/> Migrant Center-Based (CMIG)</p>	
<p>B. The following types of contracts do have subcontractors (check all that apply). For each contract type selected, submit a separate form ELCD 3704B. The form is available on the CFA web page: https://www.cde.ca.gov/sp/cd/ci/cfaforms2122.asp.</p> <p><input type="checkbox"/> California State Preschool Program (CSPP)</p> <p><input type="checkbox"/> California Center-Based (CCTR)</p> <p><input type="checkbox"/> Program for Special Needs (Handicapped) Children (CHAN)</p> <p><input type="checkbox"/> Migrant Center-Based (CMIG)</p>	
<p>I certify that the contractual arrangement(s) listed above are made in adherence to the required subcontract provisions contained in the 5 CCR, and the Funding Terms and Conditions.</p> <p>I understand that signing this certificate does not lessen the legal responsibility for the child care and development service contract requirements. As the contractor, it is my responsibility to monitor the performance of the subcontractor to ensure services are provided appropriately through the entire contract term.</p>	
Signature of Contractor’s Authorized Representative:	
Printed Name and Title of Contractor’s Authorized Representative:	
Date of Signature:	
Authorized Representative’s Telephone Number:	
Authorized Representative’s Email Address:	

Contractor Name

Vendor # County

Section VII – Contractor Certification

Under penalty of perjury, I certify the following:

- I am authorized by the Contractor’s Board of Directors or other governing authority to execute this CFA.
- On behalf of the Contractor and its governing authority, we understand some information requested in this application is intended for use by CDE auditors in connection with future audit work and performance reviews and may not be used or even reviewed or considered by the CDE until well after the contract has expired, if ever. Therefore, we further understand that the information (and any underlying transactions) disclosed by this Application shall not be considered properly noticed to the CDE nor approved, accepted or authorized by the CDE, even if our request for continued funding by the CDE is subsequently approved.
- The governing board members have been trained in understanding conflict of interest requirements associated with their positions on the board and have reported all known conflicts of interest.
- I have supervisory authority over the child development program, have actual, personal knowledge of the information provided in this Application and certify that it is true and correct in all material respects.
- I am familiar with and will ensure that the Contractor complies with all applicable program statutes and regulations, including:
 - Subcontracting requirements, including competitive bidding, CDE approval, and audit requirements in 5 CCR, §18026 et. seq.
 - Prohibitions on conflicts of interests, including (i) the assurances required to establish that transactions with officers, directors and other related party transactions are conducted at arm’s length, and (ii) employment limitations stated in *Education Code* §8406.9.
 - Cost reimbursement requirements, including reimbursable and non-reimbursable costs, documentation requirements, the provisions for determining the reimbursable amount and other provisions in 5 CCR, §18033 et. seq.
 - Accounting and reporting requirements in 5 CCR, §18063 et. seq.
 - Operational and programmatic requirements.

Signature of Contractor’s Authorized Representative:

Printed Name and Title of Contractor's Authorized Representative:

Date of Signature:

Authorized Representative’s Telephone Number:

Authorized Representative’s Email Address:

Contractor Name

Vendor # County

Section VIII
Certification of Contractor Information in the CDMIS

Contractors are required to review all information in the Child Development Management Information System (CDMIS) and update any outdated information. To review the information and submit changes, log on to the CDMIS at <https://www4.cde.ca.gov/cdmis/default.aspx>

I certify, as the authorized representative of the agency listed below, I have reviewed all the information for

Contractor Name

and updates, additions, or deletions have been submitted as needed for information in all of the areas below:

Executive Director/Superintendent information
Program Director information
Sites and Licenses and/or Office information
Family Child Care Home summary information

To the best of my knowledge, the information on the CDMIS Web site reflects accurate information for

Contractor Name

as of the date this certification was signed.

Program Director/Authorized Representative Signature

Date Signed

Printed Name of Program Director/Authorized Representative

Contractor Name

Vendor # County

Section IX – Required Attachments
All attachments must be completed and included with the application. These attachments are located on the CFA web page at: https://www.cde.ca.gov/sp/cd/ci/cfaforms2122.asp
A. Fiscal Year 2021–22 Program Calendar (ELCD-9730)
B. Payee Data Record (STD. 204) (Non-public agencies only)
C. Secretary of State (Non-public agencies only)
D. Verification of School District Name and Address
E. Program Narrative Change (ELCD 3704A)
F. Subcontractor Certification (ELCD 3704B)

Fiscal Year 2021–22 Program Calendar

Name of Contractor	Vendor Number	County	Contract Type

Instructions: Enter an UPPERCASE X on each day your program will operate. Your days of operation will auto-calculate in the boxes below each month, and in the Total Days of Operation box at the bottom of the form. The asterisks (*) in the month tables refer to days which fall in either the preceding or the following month. Do not enter any values in boxes with an asterisk.

July 2021						
Sun	M	Tu	W	Th	F	Sat
*	*	*	*			

August 2021						
Sun	M	Tu	W	Th	F	Sat
			*	*	*	*

September 2021						
Sun	M	Tu	W	Th	F	Sat
*	*	*				
					*	*

July Days of Operation

August Days of Operation

September Days of Operation

First Quarter Subtotal

October 2021						
Sun	M	Tue	W	Th	F	Sat
*	*	*	*	*		
	*	*	*	*	*	*

November 2021						
Sun	M	Tu	W	Th	F	Sat
*						
			*	*	*	*
						*

December 2021						
Sun	M	Tu	W	Th	F	Sat
*	*	*				
						*

October Days of Operation

November Days of Operation

December Days of Operation

Second Quarter Subtotal

January 2022						
Sun	M	Tu	W	Th	F	Sat
*	*	*	*	*	*	
		*	*	*	*	*

February 2022						
Sun	M	Tu	W	Th	F	Sat
*	*					
		*	*	*	*	*

March 2022						
Sun	M	Tu	W	Th	F	Sat
*	*					
					*	*

January Days of Operation

February Days of Operation

March Days of Operation

Third Quarter Subtotal

April 2022						
Sun	M	Tu	W	Th	F	Sat
*	*	*	*	*		

May 2022						
Sun	M	Tu	W	Th	F	Sat
			*	*	*	*

June 2022						
Sun	M	Tu	W	Th	F	Sat
*	*	*				
					*	*

April Days of Operation

May Days of Operation

June Days of Operation

Fourth Quarter Subtotal

Total Days of Operation

ELCD Consultant Initials (for CDE use only)

Date approved by ELCD Consultant (for CDE use only)

EESD Contractor Data Sheet

Agency Name: San Bernardino Co T A D County: San Bernardino

Vendor Number: 2236 Assigned Consultant: Deborah Wacker

Headquarters Address
 Mailing Address: (Transitional Assistance Dept)
 Street Address: 150 South Lena Road
 City: San Bernardino
 State: CA
 Zip: 92415

Executive Director and Contact Information
 Name: Mr. Phalos Haire
 Title: Executive Director
 EMail: phaire@psd.sbcounty.gov
 Phone: (909)383-2044
 FAX: (909)383-2080

Program Director Information:

Name:	Contact Information:	Address:
Jacquelyn Greene	Phone: (909)383-2025 FAX: (909)383-2086 Email: jgreen@psd.sbcounty.gov	662 Tippecanoe Ave San Bernardino, CA 92415

Contract Information:

Contract #	MDO	MRA	Program Director
CSPP0437	240	\$4,712,718.00	Jacquelyn Greene

EESD Contractor Data Sheet

Site

Site and Office Information

Adelanto Head Start
11497 Bartlett Road
Adelanto, CA 92301-

Keosha Smith, Site Supervisor
(760)246-5073

License Type	License #	Hours of Operation	Capacity
Day Care Center	364812586	7:00 am - 5:00 pm	86

Apple Valley Head Start
13589 Navajo Road #106/107
Apple Valley, CA 92308-

~~Dolores Edwards~~, Site Supervisor
Linda Walker
(760)247-6955

License Type	License #	Hours of Operation	Capacity
Day Care Center	360910831	7:00 am - 5:00 pm	117

Baker Learning Center
2818 Macy Street
Muscoy, CA 92407

Cynthia Olivas-Fletcher, Site Supervisor
(909)887-8780

License Type	License #	Hours of Operation	Capacity
Day Care Center	364842353	7:00 am - 5:00 pm	32

Barstow Head Start
1121 West Main Street
Barstow, CA 92311-2547

Pamela McQuain, Site Supervisor
(760)255-5761

License Type	License #	Hours of Operation	Capacity
Day Care Center	367750009	7:00 am - 5:00 pm	66

Eucalyptus Head Start
485 Eucalyptus Avenue
Rialto, CA 92376-

Luz Gonzalez, Site Supervisor
(909)421-7180

License Type	License #	Hours of Operation	Capacity
Day Care Center	364813098	7:00 am - 5:00 pm	120

EESD Contractor Data Sheet

Site

Fontana Citrus
 9315 Citrus Ave
 Fontana, CA 92335

Malika Binns, Site Supervisor
 (909)428-8493 8496

License Type	License #	Hours of Operation	Capacity
Day Care Center	364818441	7:00 am - 5:00 pm	140

Hesperia Head Start
 9352 East E Street
 Hesperia, CA 92345-

Faryn Silcott, Site Supervisor
 Paulette Hall
 (760)948-4411

License Type	License #	Hours of Operation	Capacity
Day Care Center	360911538	7:00 am - 5:00 pm	105

Mill Child Development Center
 503 E Central Avenue
 San Bernardino, CA 92408-

Cheryl Soares, Site Supervisor
 (909)885-0789

License Type	License #	Hours of Operation	Capacity
Day Care Center	360900663	7:00 am - 5:00 pm	236

Needles Head Start
 1900 Erin D
 Needles, CA 92363-

Regina Fields, Site Supervisor
 (760)326-5221

License Type	License #	Hours of Operation	Capacity
Day Care Center	364840514	7:30 am - 4:00 pm	50

Northgate
 17251Dante St.
 Victorville, CA 92394

Stephanie Hernandez, Site Supervisor
 (760)951-1425

License Type	License #	Hours of Operation	Capacity
Day Care Center	364840739	7:00 am - 5:00 pm	31

EESD Contractor Data Sheet

Site

Ontario Maple Head Start
 555 W Maple
 Ontario, CA 91762-

Cherie Hudson, Site Supervisor
 (909)984-4117

License Type	License #	Hours of Operation	Capacity
Day Care Center	364801214	7:00 am - 5:00 pm	208

Redlands Valencia Grove
 125 Horizon Avenue
 Redlands, CA 92374

Veronica Pazzetty, Site Supervisor
 (909)423-4567 307-0037

License Type	License #	Hours of Operation	Capacity
Day Care Center	364845157	7:00 am - 5:00 pm	16

Rialto Willow
 1432 West Willow
 Rialto, CA 92376

Norma Cardenas, Site Supervisor
 (909)421-7042

License Type	License #	Hours of Operation	Capacity
Day Care Center	364830575	7:00 am - 5:00 pm	32

TwentyninePalms Head Start/St
 71409 29 Palms Highway
 Twentynine Palms, CA 92277

Deborah Wilson, Site Supervisor
 (760)367-5150

License Type	License #	Hours of Operation	Capacity
Day Care Center	360911568	7:00 am - 5:00 pm	45

Victorville Head Start
 14029 Amargosa Road, Ste C
 Victorville, CA 92392-

Kelli Burkins, Site Supervisor
 (760)245-9147

License Type	License #	Hours of Operation	Capacity
Day Care Center	360911142	7:00 am - 5:00 pm	95

EESD Contractor Data Sheet

Site

Yucca Valley Head Start
56389 Pime Trail
Yucca Valley, CA 92284

Lugene Springfield, Site Supervisor
(760)369-7424

License Type	License #	Hours of Operation	Capacity
Day Care Center	364814430	7:00 am - 5:00 pm	48

EESD Contractor Data Sheet

Number of Children Served in Sites, Offices, or Licensed Family Child Care Homes

The number of children served displayed in the various sections below is based on information that is updated annual by contractor staff as part of the Continued Funding Application process. The numbers represent enrollment on a specific date that was identified in the Continued Funding Application. The numbers do not represent actual services throughout the year.

Site

Number of children served by age group

Adelanto Head Start

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	9 17	24 30	0

Number of children served by age group

Apple Valley Head Start

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	5 22	11 40	0

Number of children served by age group

Baker Learning Center

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	11	21	0

Number of children served by age group

Barstow Head Start

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	6 8	18 22	0

Number of children served by age group

Eucalyptus Head Start

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	16 36	50 82	0

Number of children served by age group

Fontana Citrus

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	25 13	55 35	0

Number of children served by age group

Hesperia Head Start

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	8	22	0

EESD Contractor Data Sheet

Site

Number of children served by age group

Mill Child Development Center

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	20 32	60	0

Number of children served by age group

Needles Head Start

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	0	9	0

Number of children served by age group

Northgate

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	5	11	0

Number of children served by age group

Ontario Maple Head Start

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	34 60	110 130	0

Number of children served by age group

Redlands Valencia Grove

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	4	12 10	0

Number of children served by age group

Rialto Willow

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	8	16	0

Number of children served by age group

TwentyninePalms Head Start/St

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	7	23	0

Number of children served by age group

Victorville Head Start

Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	7	23	0

EESD Contractor Data Sheet

Site

Yucca Valley Head Start

Number of children served by age group



Contract	Infants	Toddlers	Pre School	School Age	CSPP		
					3 yrs	4 yrs	Other
CSPP0437	0	0	0	0	4	12	0

EESD Contractor Data Sheet

Total Children Served by Contract

Contract	Infants	Toddlers	Pre School	School Age	CSPP only		
					3 yrs	4yrs	Other
CSPP0437	0	0	0	0	169 242	477 546	0

Needles Unified

County	San Bernardino
District	Needles Unified List of active district's schools
CDS Code	36 67801 0000000
District Address	1900 Erin Dr. Needles, CA 92363-2623 Google Map  Link opens new browser tab
Mailing Address	1900 Erin Dr. Needles, CA 92363-2623
Phone Number	(760) 326-3891
Fax Number	(760) 326-4935
Email	Information Not Available
Web Address	http://www.needlesusd.org/  Link opens new browser tab
Superintendent	Dr. Mary McNeil Superintendent (760) 326-3142 mary_mcneil@needlesusd.org
Chief Business Official	Mary McNeil Superintendent, Interim CBO (760) 326-3142 mary_mcneil@needlesusd.org
Status	Active
District Type	Unified School District
Low Grade	K
High Grade	12
NCES/Federal District ID	0626760
Statistical Info	Link to District Profile
CDS Coordinator (Contact for Data Updates)	Jim Rolls (760) 326-3891 Request Data Update(s)
Last Updated	August 19, 2019

Contractor Name

Vendor #

County

Form ELCD 3704A: Program Narrative Change

Contract Type:

Calendar (MDO) Change

Programmatic Change

Identify the program component for which you are requesting a change.

Describe how the program currently provides services to children and families in relation to the above-identified program component.

Describe the proposed change, and how services will be improved if the change is implemented.

Contractor Name

Vendor # County

Form ELCD 3704B: Subcontract Certification

Contract Type:

Contract MRA:

Total Percentage of MRA Subcontracted:

Subcontractor #1

Subcontractor Legal Name:

Does this subcontractor also contract with ELCD?

Yes

No

Site No.

Site Name

Site Address

Service
County

Percentage of
MRA
Subcontracted

1.
2.
3.
4.

Subcontractor #2

Subcontractor Legal Name:

Does this subcontractor also contract with ELCD?

Yes

No

Site No.

Site Name

Site Address

Service
County

Percentage of
MRA
Subcontracted

1.
2.
3.
4.