

Child Care Assistance Program for Families and Providers

The Cares Act funds can be used to:

- provide continued payments and assistance to child care providers in the case of decreased enrollment or closures related to coronavirus, and to assure providers are able to remain open or reopen as appropriate;
- provide child care assistance, without regard to income, to health care sector employees, emergency responders, sanitation workers, and other workers deemed essential during the response to the coronavirus; and
- provide funding to child care providers who were not participating in subsidy prior to the public health emergency for the purposes of cleaning and sanitation and other activities necessary to maintain or resume the operation of programs.

We propose that the \$2 million available for Child Care Assistance be utilized to support and help stabilize Licensed Child Care providers and to provide support for families who are facing financial instability in Fort Bend County due to COVID-19.

Criteria and Eligibility:

Child Care Providers Must:

- Be a Licensed Child Care Center/Program or
- Licensed Child Care Home Provider
- Licensed facilities must be located in Fort Bend County
- Licensed Child Care Providers must agree to participate in the program and that funds will be used to assist families in need; thereby providing relief for provider
- Child Care Providers will have to demonstrate that their facility has been negatively impacted by COVID-19.
- Provider must agree that funds will be applied as scholarships to families who cannot afford child care or to those parents who are in the arrears with child care fees due to negative economic impact of COVID-19

Fort Bend County Commissioners Court has authorized \$2mil in Cares Act Funds to assist Child Care Providers operating in Fort Bend County. Your business may be eligible to receive up to \$ 8,000 to assist workforce families.

Eligibility Check List:

➔ Are you a state licensed child care facility operating in Fort Bend County?

Yes _____ No _____

➔ By participating in this program do you agree that the grant funds will be used to assist families in need of child care?

Yes _____ No _____

➔ What is the average number of children you provide services for?

Name of Business: _____

Address: _____

Phone: _____

Email address: _____

Signature of Authorized Agent: _____

Date: _____