

**Bright from the Start:  
Georgia Department of Early Care and Learning  
GEORGIA'S PRE-K PROGRAM  
Pre-K Program Change Request Addendum**

Site Name: \_\_\_\_\_

Site Address: \_\_\_\_\_ City: \_\_\_\_\_ Zip code: \_\_\_\_\_

Pre-K Project Director (if different from contact person): \_\_\_\_\_

E-mail Address: \_\_\_\_\_

Phone Number: \_\_\_\_\_



**Grant Agreement Signatory:**

Name and Title of person authorized to sign grant agreement/application \_\_\_\_\_

Mailing address of grant agreement signatory: \_\_\_\_\_

City: \_\_\_\_\_ State: \_\_\_\_\_ Zip Code: \_\_\_\_\_

Phone Number \_\_\_\_\_ E-mail Address \_\_\_\_\_

**THIS ENTIRE APPLICATION MUST BE COMPLETE. PLEASE PROVIDE ANY MISSING OR INCORRECT INFORMATION. FAILURE TO PROVIDE ALL REQUESTED INFORMATION WILL RESULT IN PROCESSING DELAYS AND MAY JEOPARDIZE FUNDING.**

As specified in O.C.G.A. . 50-20, Relations with Nonprofit Contractors, Bright from the Start: Georgia Department of Early Care and Education (DECAL) requires, before entering into a contract with a nonprofit contractor, that the contractor:

- Ⓡ Furnish DECAL with certified financial statements showing the nonprofit contractor's financial condition at the end of the previous fiscal year and revenues and expenditures for the previous fiscal year. Where the nonprofit contractor has been in existence for less than a full year, the financial statements shall cover the operations to date for the current year. The financial statements shall include an individual listing of each employee and his salary and reimbursable expenses, a listing by category of the sources of income of the nonprofit contractor, and listing of the source or sources of all public funds received by the nonprofit contractor and the program for which the funds were received.

**Curriculum (Check One)**

- |  |   |   |
|--|---|---|
| <input type="checkbox"/> AlphaSkills                       | <input type="checkbox"/> Blueprint for Early Literacy             | <input type="checkbox"/> Breakthrough to Literacy |
| <input type="checkbox"/> Core Knowledge Preschool Sequence | <input type="checkbox"/> Creative Curriculum                      | <input type="checkbox"/> Curiosity Corner         |
| <input type="checkbox"/> Doors Discovery                   | <input type="checkbox"/> Exceed Preschool Curriculum              | <input type="checkbox"/> HighScope Curriculum     |
| <input type="checkbox"/> Imagine It!                       | <input type="checkbox"/> Let's Begin with the Letter People       | <input type="checkbox"/> Links to Literacy        |
| <input type="checkbox"/> Opening the World of Learning     | <input type="checkbox"/> Passports: Experiences for Pre-K Success |   |
| <input type="checkbox"/> Pinnacle Curriculum               | <input type="checkbox"/> Scholastic Early Childhood Program       |   |
| <input type="checkbox"/> The DLM Early Childhoods Express  | <input type="checkbox"/> The InvestiGator Club                    |   |

**Identify**

**Indicate Numbers Where Appropriate**

\_\_\_\_\_ # of Classes **NEW/EXPANSION**      \_\_\_\_\_ # of Classes **CONTINUED**      \_\_\_\_\_ Total # of Students

**Teachers** (In **NEW/EXPANSION** Classes)      (In **CONTINUATION** Classes)

_____ # of Certified	_____ # of Certified
_____ # of Bachelor of Science/Arts	_____ # of Bachelor of Science/Arts
_____ # of Associate of Science/Arts or Technical Degree/Diploma or Montessori Diploma	_____ # of Associate of Science/Arts or Technical Degree/Diploma or Montessori Diploma



## GEORGIA'S PRE-K PROGRAM ASSURANCES

### I AGREE THAT:

- I have existing space and appropriate licenses.
- I have read and agree to comply with the Pre-K Program Guidelines and any addenda.
- All information contained within this application, as well as documentation required as a Pre-K fiscal agent, is considered public information and will be included in the program's permanent file and is subject to Open Records request(s).
- I will be paid for *only* the number of children that I serve
- I will conduct my business with financial integrity and fiscal responsibility including, but not limited to, rules and regulations of the Secretary of State's office, the State Department of Audits, and other state agencies as applicable, and appropriate settlement of employee and other financial obligations.
- I will provide appropriate instruction to Pre-K children.
- I will provide salary, subsistence, and mileage for my teachers to attend state approved teacher training.
- I will submit all rosters by reporting dates.
- I will not discriminate in my enrollment/registration process.
- I will refer children with suspected special needs to the appropriate school system.
- Pre-K Funds may be used to pay for Pre-K staff salaries, materials, supplies, and equipment (playground equipment by special permission), field trips, food, transportation, administration (no more than 6%), computers (requires prior DECAL approval), and any other items which benefit or enhance Pre-K children and program.
- No religious activities will be included in my program; "a moment of silence" may be observed at meal times.
- All extended day (before and after school care) services for Category One children will be processed through the Division of Family and Children Services (DFCS).
- I will provide the BFTS upon request with a list of all children on my waiting list. This information will include the child's name, parent's name, address, and telephone number.
- My staff and I will attend all required DECAL training.
- 1.5 hours per day will be spent on teacher planning, parent conferences, etc.
- If my application, building or licensure process is incomplete, the application will not be considered until totally complete.
- I acknowledge that all information provided in this application is true and accurate. I understand that falsifying information reported will result in automatic termination of the grant agreement.
- I acknowledge that I have read and will operate my Pre-K program as I have assured above.

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Authorized Signature

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Date

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Position

**Bright from the Start:  
Georgia Department of Early Care and Learning  
Georgia's Pre-K Program  
Pre-K Program Change Request Addendum  
Vendor TIN Verification**

Pursuant to Internal Revenue Service Regulations, vendors must furnish their Taxpayer Identification Number (TIN) to the state. If this number is not provided, you may be subject to a 31% withholding on each payment. To avoid this 31% withholding and to ensure that accurate tax information is reported to the Internal Revenue Service and to the state, please use this form to provide the requested information.

Legal Name \_\_\_\_\_  
 Doing Business As (DBA) \_\_\_\_\_  
 Address \_\_\_\_\_  
 Telephone # \_\_\_\_\_ FAX # \_\_\_\_\_  
 # of years in Business \_\_\_\_\_

**Nine Digit Taxpayer Number**

Social Security Number \_\_\_\_\_  
**OR**  
 Federal Employer Identification Number \_\_\_\_\_

Business Designation (Check One)		Business Type (Check One) <sup>1</sup>	
		Demographic Designation (Check One)	
		applies to the <u>ownership</u> of the sole proprietorship, partnership, or majority stockholders of the corporation	
<input type="checkbox"/> Governmental	<input type="checkbox"/> Minority Company	<input type="checkbox"/> Asian or Pacific Islander	
<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Small Company	<input type="checkbox"/> Black or African American	
<input type="checkbox"/> Partnership	<input type="checkbox"/> Minority & Small Company	<input type="checkbox"/> Hispanic	
<input type="checkbox"/> Corporation	<input type="checkbox"/> Other Company	<input type="checkbox"/> Native American or Alaskan native	
		<input type="checkbox"/> White	
		<input type="checkbox"/> Multi-racial (please specify below)	

<sup>1</sup> **Minority Company** A minority race is defined as an individual who is a member of a race, which composes less than 50 percent of the total population of the state of Georgia. This business must be: (a) owned by a member of a minority race or (b) a partnership of which one or more members is of a minority race or (c) a public corporation of which a majority of the common stock is owned by one or more members of a minority race.

**Small Company** Business has less than 100 employees or less than \$1,000,000.00 in gross receipts per annum.

**Minority & Small Company** Business falls into both categories.

**Other Company** Vendor is neither a small nor a minority owned business.

Funding decisions made by the Bright from the Start: Georgia Department of Early Care and Learning are not based on business designation, business type, or demographic designation. This information is requested from all vendors applying with the state of Georgia.

<b>BUSINESS STATUS (CHECK ONE)</b>	
<input type="checkbox"/> Profit	
<input type="checkbox"/> Nonprofit	
<input type="checkbox"/> Tax Exempt**	
<b>IF TAX EXEMPT (CHECK ONE) **</b>	
<input type="checkbox"/> This organization was approved by IRS for tax-exempt status on _____	**As specified in O.C.G.A. § 50-20, Relations with Nonprofit Contractors, DECAL requires the contractor to: Furnish the state agency with certified financial statements showing the nonprofit contractor's financial condition at the end of the previous fiscal year and revenue and expenditures for the previous fiscal year.
<input type="checkbox"/> This organization submitted an application to IRS for tax-exempt status on _____	
<input type="checkbox"/> This organization is not tax-exempt.	
What is the operating fiscal year of this organization? _____ to _____	

Under penalties of perjury, I declare that I have examined this request and to the best of my knowledge and belief, it is true, correct, and complete.

_____	_____	_____
Authorized Signature	Official Title	Date
_____	_____	_____
Typed or Printed Name	Principal Official listed with Secretary of State's office in the Articles of Incorporation	

*NOTE: For facilities with Georgia's Pre-K Program*

Please be sure to also submit the following documents:

- Vendor Management Bank Account Form (include a pre-printed voided check)
- Request for Taxpayer Identification Number and Certification (W-9)

These forms can be located at:

<http://www.decal.ga.gov/ChildCareServices/ChangeofOwnership.aspx>