Overview

Contractors must review instructions prior to completing the Continued Funding Application (CFA) for Fiscal Year (FY) 2020–21.

1. Download the CFA, including the required attachments from [http://www.cde.ca.gov/sp/cd/ci/cfaforms2021.asp](http://www.cde.ca.gov/sp/cd/ci/cfaforms2021.asp) and save your own personal copy.

2. Complete, print (single-sided only), and sign your saved application, including the required attachments.

3. The CFA signature pages (5 signatures in total, if applicable) must be signed in blue ink, by the contractor’s authorized representative. If blue ink is not used, the application will be returned for proper signature. Generally, the executive director, owner, president, or superintendent are authorized signers. Applicants should review the organization’s governing documents (such as bylaws) to identify authorized signers. The following pages must be included in the packet with a separate signature on each page:
   
   a. Section VI: Personnel Certification for Center-Based Programs and Family Child Care Home Education Networks (page 6).
   
   b. Section VII: Subcontract Certification (page 7).
   
   c. Section VIII: Contractor Certification (page 8).
   
   d. Section IX B: Certification of Contractor Information in the Child Development Management Information System (CDMIS) Database (refer to CFA main page for link).
   
   e. Section IX C: Payee Data Record (STD. 204), (refer to CFA main page for link).

4. Remember to keep a copy of the signed CFA for your records. The Early Learning and Care Division (ELCD) will not accept electronic versions, files on computer discs, or facsimile CFA submissions.
Applicants must mail or personally deliver the original, signed CFA and two (2) copies. The CFA must be received at the following address on or before 5 p.m., November 5, 2019:

Continued Funding Application FY 2020–21
Early Learning and Care Division
California Department of Education
1430 N Street, Suite 3410
Sacramento, CA 95814-5901

The regulations provide that “Failure to respond within the timelines specified in the continued funding application request shall constitute notification to the Child Development Division of the contractor’s intent to discontinue services at the end of the current contract period.”(See section 18010(e) of 5 CCR). Failure to comply with these instructions may result in discontinued funding. If there are any questions regarding the application process, contact the CFA Team by email at CFA@cde.ca.gov. Include your name and phone number on all inquiries.

Section I – Contractor Information

To auto-populate the header on all pages of the application, simply input Legal Name of Contractor, Headquartered County, and Vendor Number, in Section I as instructed below.

Legal Name of Contractor:

Insert the Agency contractor’s legal name, as stated in your contract and filed with the California Secretary of State (if applicable).

Contractor “Doing Business As” (DBA):

Insert the DBA name, if applicable. Do not use DBA where contractor’s legal name is requested.

Headquartered County:

Select the county in which contractor’s Headquarters (HQ) are located from the drop-down menu. The HQ County is the county where: (1) Contractors have provided child care services in the service delivery area, as defined in the California Code of Regulation (5 CCR), Section 18000(f), for at least three years or (2) where contractors have their primary administrative office. The primary administrative office is that office which houses the executive officer(s), fiscal functions, and other centralized support services.
**Vendor Number:**

Insert the California Department of Education (CDE) assigned four-digit vendor number for the contractor. The vendor number is located on the face sheet of the ELCD contract following the words “vendor number”.

**Tip:** The executive director information and the legal business address must match the information in the Child Development Management Information System (CDMIS). To update the information in CDMIS, refer to the instructions for Section IX B of the CFA.

**Executive Director Name:**

Insert the name of the contractor’s head executive, i.e., executive director, superintendent, chancellor, or president, as may be applicable for the organization.

**Executive Director Telephone Number:**

Insert the telephone number for the executive director.

**Executive Director Fax Number:**

Insert the fax number for the executive director.

**Executive Director Email address:**

Insert the email address for the executive director.

**Legal Business Address:**

Insert the legal business address.

**City:**

Insert the city of contractor’s legal business address.

**Zip Code:**

Insert the zip code of contractor’s legal business address.

**Mailing Address (if different from above):**

Insert the contractor’s mailing address if different from the legal business address.

**City:**

Insert the contractor’s city if different from the legal business address.
Zip Code:

Insert the zip code if different from the legal business address.

Name of Contact Person Completing Application:

Insert the name of contact person completing the application.

Title of Contact Person Completing Application:

Insert the title of contact person completing the application.

Contact Person Phone Number:

Insert the phone number of the contact person completing the application.

Contact Person Email Address:

Insert the email address for the contact person completing the application.

Section II – Contract Types

Check all applicable boxes to indicate the programs the contractor will continue to administer for the FY 2020–21. In selecting the boxes, the contractor agrees to continue implementation of these programs with funds provided by the CDE.

The contract types are as follows: California State Preschool Program (CSPP), California Center-Based Child Care (CCTR), Program for Special Needs Children (CHAN), Migrant Center-Based (CMIG) and Migrant Special Services (CMSS), Alternative Payment Program (CAPP), CalWORKs Stage 2 (C2AP), CalWORKs Stage 3 (C3AP), Migrant Alternative Payment (CMAP), Resource and Referral Program (CRRP), and Family Child Care Home Education Network (CFCC).

Section III – Contractor’s Officers and Board of Directors

Does the Contractor have a Board of Directors?

Select “Yes” or “No” to respond to this question. If the contractor does not have a Board of Directors, provide an explanation in the space provided. Indicate the form of entity (i.e., sole proprietorship, partnership, JPA, etc.) and the governance structure (i.e., number of owners or partners etc.).

Complete contact information for each of the current year Contractor’s Officers and Board of Directors or governing individual, including name and title, telephone number, mailing address, and email address. Each individual must provide their own personal contact information that is not associated with the organization.
This information is only required for non-LEAs. Attach additional sheets if necessary.

Section IV – Allocation of Funds

**Tip:** Only contractors with the following contract types must complete this form: CCTR, CSPP, CMIG, CHAN, C2AP, C3AP, CAPP, and CFCC.

The purpose of the Allocation of Funds form is to track contract funds as budgeted by Service County for each of the contract types the contractor operate. Select the contract type from the drop-down menu. Next, insert the contract number for the contract type selected in the appropriate box.

**Contractor’s Fiscal Contact Name:**

Insert the name of the individual responsible for the contractor's fiscal business.

**Contractor’s Fiscal Contact Email Address:**

Insert the contact person’s email address.

**Telephone Number:**

Insert the telephone number for the fiscal contact.

**Date:**

Insert the date completed.

**Contract Type:**

Select the contract type from the dropdown box with the following options: CCTR, CSPP, CMIG, CHAN, CAPP, C2AP, C3AP and CFCC.

**Contract Number:**

Insert the contract number. This field is restricted to four characters. The contract number is located on the face sheet of the ELCD contract following the words “contract number”.

**If contractor provided services only in the Headquartered County:**

If the contractor provided services only in the Headquartered County in FY 2018–19, select from the drop-down menu the county name in space provided, and enter 100 percent in the “% of Total” column. The total row will auto-calculate.

**If contractor provided services in multiple counties:**

Select from the drop-down menu all counties in which children were served with funds
from the contract type selected. Show the percentage of funds spent in each service county for FY 2018-19. The percentages must sum to 100 percent.

The total row will auto-calculate.

**Section V – Program Narrative**

A. Indicate the following contract types that do not have programmatic or calendar changes:

   Check the box for each contract type the contractor operates that does not have programmatic or calendar changes.

**Tip:** The Program Calendar (ELCD-9730) form is required for all contract types. Both contractors with Minimum Days of Operation (MDO) changes and those without MDO changes are required to submit the Program Calendar in Section IX A.

B. Indicate following contract types that do have programmatic and/or calendar changes:

   Check the box for each contract type(s) the contractor operates that do have either a programmatic change and/or a calendar change. Changes to the MDO require program narrative changes.

Contractor must complete a form ELCD-3704A for each contract type selected in this section. This form is available on the CFA Web page at [http://www.cde.ca.gov/sp/cd/ci/cfaforms2021.asp](http://www.cde.ca.gov/sp/cd/ci/cfaforms2021.asp)

**Section VI – Personnel Certification**

**Tip:** Center-based programs and Family Child Care Home Education Networks must complete this section. This form is not required for agencies who only operate Alternative Payment (AP) and Resource & Referral (R&R) programs.

**Signature of Authorized Representative:**

This form must be completed and signed by the contractors authorized representative, and must contain an original signature in blue ink. If blue ink is not used, the contract will be returned for proper signature. The Authorized Representative is the person who has the authority to sign and engage in a contractual relationship with the CDE.

**Printed Name and Title of Authorized Representative:**

Print the name and title of the contractor’s authorized representative.
Date of Signature:
Insert the date of signature.

Authorized Representative Phone Number:
Insert the direct phone number of the contractor’s authorized representative.

Authorized Representative Email Address:
Insert the email address of the contractor’s authorized representative.

Section VII – Subcontract Certification

Tip: AP only and R&R programs are exempt from completing the Subcontract Certification, Personnel Certification, and form ELCD 3704B.

A. The following contract types do not have subcontractors (check all that apply):

Check the box for each contract type (if any) the contractor operates without the use of a subcontractor.

B. The following contract types do have subcontractors (check all that apply):

Check the box for each contract type (if any) the contractor operates with the use of a subcontractor. For each contract type identified in this section, submit a separate form ELCD-3704B. This form is available on the CFA Web page at http://www.cde.ca.gov/sp/cd/ci/cfaforms2021.asp.

Signature of Authorized Representative:
This form must be completed and signed by the contractor’s authorized representative, and must contain an original signature in blue ink. If blue ink is not used, the contract will be returned for proper signature.

Print Name and Title of Authorized Representative:
Print the name and title of the contractor’s authorized representative.

Date of Signature:
Insert the date of signature.

Authorized Representative Phone Number:
Insert the direct phone number of the contractor’s authorized representative.
Authorized Representative Email Address:
Insert the email address of the contractor’s authorized representative.

Section VIII: Contractor Certification

Authorized Representative certifies they are, authorized to execute the CFA, and has supervisory authority over the Child Development program and has actual knowledge of the information in the application and that it is true and correct.

Signature of Authorized Representative:
This form must be completed and signed by the contractor’s authorized representative, and must contain an original signature in blue ink. If blue ink is not used, the contract will be returned for proper signature.

Printed Name and Title of Authorized Representative:
Print the name and title of the contractor’s authorized representative.

Date of Signature:
Insert the date of signature.

Authorized Representative Phone Number:
Insert the direct phone number of the contractor’s authorized representative.

Authorized Representative Email Address:
Insert the email address of the contractor’s authorized representative.

Section IX: Required Attachments

All attachments must be completed and attached to the application. These attachments are located on the Continued Funding Application Web page at http://www.cde.ca.gov/sp/cd/ci/cfaforms2021.asp

A. Fiscal Year 2020–21 Program Calendar (ELCD-9730)
The Program Calendar (ELCD-9730) form is required for all contract types and completed separately for each contract. The ELCD-9730 form will automatically add the MDO when the dates are marked with an “X”. The instructions are as follows:

2. On the top of the form, insert the name of the contractor and vendor number. Click on the County box, select the county from the drop-down list. Click on the Contract Type box, select the contract type from the drop-down list.

3. Click on the date for the days of operation; enter an “X” for all days the program will serve subsidized children during the FY 2020–21 contract period (Center-Based programs and Family Child Care Home Education Networks). AP and R&R programs should mark the days the program office is open for business.

4. The total number of days marked with an “X” for each contract will constitute each contract’s MDO.

5. Print the completed ELCD-9730 form.

Complete and submit a Program Narrative Change form (ELCD 3704A) to justify changes to the previously approved MDO.

When MDO changes occur during the fiscal year, the contractor is to justify the revision by submitting revised ELCD-9730 and ELCD-3704A forms to the assigned ELCD Field Services Consultant to obtain the necessary approval. The revised forms must be received electronically by the ELCD Field Services Consultant by June 30, 2020. Link to the form located on the Child Care Services Forms Web page at http://www.cde.ca.gov/sp/cd/ci/cddforms.asp.

B. Child Development Management Information System (CDMIS)

Update and Certification of Contractor Information in the Child Development Management Information System (CDMIS) Database. Contractors are required to update all information in CDMIS and certify under penalty of perjury that information in CDMIS is complete and accurate.

All contractors must thoroughly review the information contained in CDMIS and update any outdated information. This update includes the name and contact information for the executive director and program directors, location of offices (for C2AP, C3AP, CAPP, CFCC, and CMAP programs), location and licensed capacity of sites (for CCTR, CHAN, CMIG, and CSPP programs), license numbers, and the numbers of children enrolled.

The information in CDMIS becomes part of the agency’s contract. Complete and accurate information is critical to the function of the child development program and the maintenance of your agency's contract. Incomplete or inaccurate information in CDMIS can result in an audit finding at the state level and a finding of noncompliance for your agency. Maintenance of complete and accurate information in CDMIS is your responsibility. To perform the review and update, follow the directions below.

To access this information, the person logging on to CDMIS must be a “super user.”
Only super users can access the Update Agency Information function within CDMIS. To review the information and submit changes, log on to CDMIS at https://www4.cde.ca.gov/cdmis/default.aspx. From the Main Menu, select the function, "Update Agency Information" and click the "Submit" button. Review all of the information in the sections below, making changes as necessary. Detailed instructions for updating this information can be found within CDMIS. A check list has been provided below for your review.

- Add/Edit Executive Director Information: Update Executive Director’s name, phone number, fax number, and email address.
- Add/Edit Program Director Information: Update existing Program Director information, add new Program Directors, assign them to the contracts they are responsible for, change Program Director contract assignments, and delete Program Directors who are no longer assigned to a contract or no longer with the agency.
- Add/Edit Family Child Care Home (FCCH) Information: This section only applies to contractors that use family child care homes to serve subsidized children. Update information related to services provided in family child care homes through the contractor’s CDE contracts to reflect services as of September 5, 2019.
- Add/Edit Sites/Offices: Update, add, or delete sites/offices with the physical address of the site/office. Do not use post office boxes or mailing addresses. Update the Site Supervisor’s first and last name.
- Update the site license information. For licensed facilities, the site name and physical address should match the name and address on the license issued by the California Department of Social Services, Community Childcare Licensing Division.
- Update number of children served by contracts at sites/offices to reflect services as of September 5, 2019.
- Generate/Print Agency Information Certification Form: Once all the information has been reviewed and all changes have been submitted, regardless of whether the changes have been approved by the assigned ELCD Field Services Consultant or are still pending approval, generate and print the “Agency Information Certification form.” Do not generate the Agency Information Certification form until all the information above has been reviewed and any changes needed have been submitted.
- To generate this form, scroll to the bottom of the “Update Agency Information” Web page and click the "Generate Certification form" button. When the form is generated, print it using the browser's print function. The contractor’s representative must sign the form. The signed form must be returned with the
CFA. Applications **will be considered incomplete** without the “Agency Information Certification form” attached.

- All changes submitted (adds, updates, or deletes) will remain pending until the contractor’s assigned ELCD Field Services Consultant reviews and approves or denies the changes.

- **Ongoing Updates:** In addition to this annual review of information as part of the CFA process, contractors are required to submit changes to Executive Director Information, Program Director Information, and Site/Office information (site name, physical address, and license information only) as changes occur. The number of children served by contract and age group at each site/office only needs to be updated once a year during the CFA process.

- **Note:** The contractor's legal name and mailing address cannot be changed through this process. For information on how to change your contractor’s legal name or headquarters mailing address, contact your assigned ELCD Field Services Consultant at 916-322-6233.

- Any other questions about how to submit changes within the “Update Agency Information” section of the CDMIS Web site, please contact CDMIS staff at 916-445-1907.

**C. Payee Data Record (STD. 204) (Non-public Agencies Only)**

**Tip:** The State Administrative Manual defines a **public agency** as any state agency, city, county, special district, school district, community college district, county superintendent of schools, or federal agency. Any agency who does not meet this criteria is considered a **“non-public agency.”**

**Non-public agencies** must download and complete the State of California Payee Data Record (STD. 204) form on the CFA Web page at [https://www.documents.dgs.ca.gov/dgs/fmc/pdf/std204.pdf](https://www.documents.dgs.ca.gov/dgs/fmc/pdf/std204.pdf)

1. **Section 1** – Read the instructions and complete sections 2 through 5.

2. **Section 2** – Enter the payee’s legal business name. **Please match the Legal Name of Contractor you entered in Section I of this application.** Sole proprietorships must also include the owner’s full name. An individual must list his/her full name. **The mailing address and business address should match the information submitted in Section I of this application.**

3. **Section 3** – Check the box that corresponds to the payee business type. **Check only one box.** Corporations must check the box that identifies the type of corporation. The State of California requires that all parties entering into business transactions that may lead to payment(s) from the State provide their Taxpayer Identification Number (TIN). The TIN for individuals and sole
proprietorships is the Social Security Number. **Only partnerships, estates, trusts, and corporations will enter their Federal Employer Identification Number (FEIN).**

4. **Section 4 – Are you a California resident or nonresident?** A corporation will be defined as a "resident" if it has a permanent place of business in California or is qualified through the Secretary of State to do business in California. A partnership is considered a resident partnership if it has a permanent place of business in California. For individuals and sole proprietors, the term "resident" includes every individual who is in California for other than a temporary or transitory purpose and any individual domiciled in California who is absent for a temporary or transitory purpose.

5. **Section 5 – Print the Payee Data Record, original signature in blue ink, and date.** If blue ink is not used, the contract will be returned for proper signature.

**D. Secretary of State (Non-Public Agencies Only)**

Entities that are required to register with the Secretary of State, must have **"active" status** and the entity name and address must **match** the STD. 204 and the information submitted in Section I of the application. If the agency status is **"inactive,"** contact your ELCD Consultant immediately. **Please provide a printed verification of your agency’s status.** To search, click on the Secretary of State Web page at [http://businesssearch.sos.ca.gov/](http://businesssearch.sos.ca.gov/)

1. Under Search Type, click on the circle next to Corporation Name, Limited Liability Company/Limited Partnership Name, or Entity Number.

2. Under Search Criteria, insert entity name or number; if entering number of corporation, the number must begin with the letter C.

3. Under Search Filter, using drop down menu select the search filter if searching for entity name.

4. Click on Search.

5. On the Business Search Results page screen, click on the entity name.

6. On the Business Search Entity Detail screen, verify the status as “active”.

7. Verify the entity name and address match Section I of the application and the STD. 204.

8. Right click your computer mouse, print the screen to include with the CFA.

**E. Verification of School District Name and Address**

Please provide printed verification of your district or county office legal name and address from one of the following Web sites.
This information must match the information submitted in the application. To search, click on the corresponding link below.

1. **California Community Colleges or Community College Districts** search the California Community College Chancellor's Web page at [http://californiacommunitycolleges.cccco.edu/districts.aspx](http://californiacommunitycolleges.cccco.edu/districts.aspx)
   a. Click on the letter that your college or district starts with
   b. Scroll to the college or district
   c. Press the "Print Screen" key on your keyboard. This will capture an image of your screen and copy it to the clipboard.
   d. Open a blank document in Microsoft Word and click paste to paste the image into the document.
   e. Print the Word document.

   a. Click on the Advanced Search button.
   b. Search Type-Click on the circle next to Districts and County Offices.
   c. County-scroll down and click on your county.
   d. District-scroll down and click on your District or County Office.
   e. Scroll down and click on the Search button.
   f. Right click your computer mouse, and print the current page only.

**F. Program Narrative Change (ELCD-3704A):**

**Tip:** Only contractors who have selected contract types in Section V-B must complete this form. A separate form must be completed for each contract type selected.

**Contract Type:**

Select the contract type from the drop-down menu.

**Change Type:**

Select “Calendar Change” for any changes in the contractor's MDO. Select “Programmatic Change” for other programmatic changes.
Questions 1, 2, and 3:

Complete questions 1, 2, and 3. Attach additional sheets as necessary.

Program Narrative Change (ELCD-3704A) form is available on the CFA web page at http://www.cde.ca.gov/sp/cd/ci/cfaforms2021.asp.

G. Subcontractor Certification Form ELCD-3704B:

Tip: Only agencies who have identified contract types in Section VII B must complete this form. A separate form must be completed for each contract type identified.

Contract Type:

Select the contract type from the drop-down menu.

Contract Maximum Reimbursement Amount (MRA):

Insert the dollar amount.

Total percentage of MRA subcontracted:

Insert the percentage.

Subcontractor Legal Name:

Insert the legal name of the contractor who you subcontracted with.

Does the subcontractor also contract with the ELCD?

Select “Yes” if the contractor to which you subcontract your services also has a current ELCD contract to provide state-subsidized child care and development services. Select “No” if your subcontractor does not have an ELCD contract.

Site Information and percentage of MRA Subcontracted:

Include information on Site Number, Site Name, Site Address, Service County, and Percentage of MRA Subcontracted:

Complete the form by inserting the child care and development service contract and subcontractor information next to the Site Number the Site Name, Site Address, Select the Service County from dropdown menu, and enter the Percentage of MRA Subcontracted. Subcontracts for child care and development services must be audited in accordance with CDE Audit Guidelines and reported with the contractor’s audit.

Section X: Continued Funding Application (ELCD-3704) Checklist

The Checklist must be submitted with the application package. The items in bold require a signature. Check all the boxes for documents submitted and assemble in page number order.

California Department of Education
September 2019