

California State Preschool Program Fiscal Year 2021–22 Request for Applications

Applicants must read the accompanying instructions when completing this Request for Applications (RFA). The California State Preschool Program (CSPP) FY 2021–22 RFA Overview and Instructions can be accessed on the RFA webpage at <https://www.cde.ca.gov/fg/fo/r2/cspp21rfa.asp>

Section I–Applicant Information

Required Applicant Information

Legal Name of Applicant:

Headquartered County:

Vendor Number (if applicable):

Executive Director Name:

Executive Director Prior Affiliations:

Executive Director Telephone Number:

Executive Director Fax Number:

Executive Director Email Address:

Program Director Name:

Program Director Prior Affiliations:

Program Director Telephone Number:

Program Director Email:

Agency’s Legal Business Address:

City:

Zip Code:

Legal Name of Applicant:

Name and Title of Contact Person
Completing the Application:

Contact Person Telephone Number:

Contact Person Email Address:

Section II—Legal Status of Applicant

Select the Applicant's legal Status.
Check one box below:

School District
County Office of Education
Community College District
Direct Funded Charter School

County School District Code

**Are you a current California State
Preschool Program (CSPP)
Contractor?**
Yes No

Section III—County or Counties of Service

Name of county or counties the
applicant will serve with this funding:

Section IV—Slots Requested

Number of children your agency will serve in
Full-Day/Full-Year CSPP with this funding:

Number of children your agency will serve in
Part-Day/Part-Year CSPP with this funding:

Section V—Intent to Subcontract Services *(if not subcontracting, skip this section)*

Check this box if your agency intends to establish a subcontract relationship with another entity to implement the CSPP services described in this application. Enter the subcontractor(s) information on Form EED 3704B.

All applicant agencies must follow the subcontract requirements detailed in the *California Code of Regulations*, Title 5 (5 CCR), the *California Education Code (EC)* and the *Contract Terms and Conditions (CT&Cs)* for subcontracting services.

Legal Name of Applicant:

Section VI–Intent to Operate a CSPP via a Family Childcare Home Education Network (FCCHEN) (*if not operating a FCCHEN, skip this section*)

Check this box if your agency intends to operate a FCCHEN to implement the CSPP services described in this application. Submit one form for each proposed family childcare home provider that will participate in the network. Use additional sheets as necessary.

Family Childcare Home Education Network (FCCHEN) Provider Information

Provider Legal Name:

Home Street Address:

City, Zip Code:

Contact Person Name:

Contact Person Telephone:

Contact Person Address:

Contact Person Fax Number:

CCLD License Number:

License Capacity:

Proposed Number of Children Served in this Home:

Legal Name of Applicant:

Section VII–Fiscal Worksheets

A. Full-day/Full-year CSPP

Full-Day/Full-Year applicants must complete, print, and submit the following forms. These forms can be accessed on the CSPP Expansion RFA webpage at <https://www.cde.ca.gov/fq/fo/r2/cspp21rfa.asp>

Worksheet	Title
A-1	Full-Day/Full-Year Certified Enrollment Information and Funds Requested
A-2	Full-Day/Full-Year Non-Certified Enrollment Information
A-3	Full-Day/Full-Year Site Summary Information
A-4/A-5	Full-Day/Full Year Projected Annual Program Budget

B. Part-Day/Part-Year CSPP

Part-Day/Part Year CSPP applicants must complete, print, and submit the following forms. These forms can be accessed on the CSPP Expansion RFA webpage at <https://www.cde.ca.gov/fq/fo/r2/cspp21rfa.asp>

Worksheet	Title
B-1	Part-Day/Part-Year Certified Enrollment Information and Funds Requested
B-2	Part-Day/Part-Year Non-Certified Enrollment Information
B-3	Part-Day/Part-Year Site Summary Information
B-4/B-5	Part-Day/Part-Year Projected Annual Program Budget

Section VIII–Fiscal Attachments

Program Staffing Plan

All Applicants must complete and submit a program staffing plan. This attachment can be accessed on the RFA web page at <https://www.cde.ca.gov/fq/fo/r2/cspp21rfa.asp>

Legal Name of Applicant:

Section IX–Program Attachments

Program Calendar

All applicants must complete and submit a tentative program calendar for FY 2022–23. If proposing to offer less than full-year CSPP services (defined as 246 days annually), or part-year CSPP services (defined as 175 days annually) the applicant must also complete and submit the FY 2022–23 Justification for Operating Days.

Program Attachments	Links
FY 2022–23 Program Calendar	https://www.cde.ca.gov/sp/cd/ci/documents/eed9730progcal2223.pdf
FY 2022–23 Justification for Operating Days	https://www.cde.ca.gov/fg/fo/r2/documents/cspp21justifyopdays.pdf

Section X–Program Narrative

Written Program Narrative

Complete and submit a written program narrative. The written program narrative is the sole section of the RFA that is scored. The instructions for completing the written program narrative, including the scoring criteria that is aligned to the scoring rubric can be accessed on the FY 2021–22 CSPP RFA webpage at <https://www.cde.ca.gov/fg/fo/r2/cspp21rfa.asp>

Program Narrative Acknowledgement – Monitoring

Complete and submit the Program Narrative Acknowledgement – Monitoring. This form can be accessed on the FY 2021–22 CSPP RFA webpage at <https://www.cde.ca.gov/fg/fo/r2/cspp21rfa.asp>

Program Narrative Acknowledgement – Quality

Complete and submit the Program Narrative Acknowledgement – Quality. This form can be accessed on the FY 2021–22 CSPP RFA webpage at <https://www.cde.ca.gov/fg/fo/r2/cspp21rfa.asp>

Legal Name of Applicant:

Program Narrative Acknowledgement – Statutes and Regulations

Complete and submit the Program Narrative Acknowledgement – Statutes and Regulations. This form can be accessed on the FY 2021–22 CSPP RFA webpage at <https://www.cde.ca.gov/fg/fo/r2/cspp21rfa.asp>

Section XI–Applicant Certification

I, the authorized representative named below, certify under penalty of perjury that I have read the full contents of this application and that, to the best of my knowledge and belief, the information in this application, and any attachments hereto, are true and correct. I further certify that the applicant agency will, if approved for funding, comply with all requirements set forth in any subsequent contract for services, as well as comply with all applicable state and federal laws and regulations. I further declare:

- I have supervisory authority over the CSPP to be administered, have actual, personal knowledge of the information provided in this Application, and certify that it is true and correct to the best of my belief in all material respects.
- I will ensure that the agency, if funded, complies with all applicable statutes and regulations, including, but not limited to:
 - Subcontracting requirements, if applicable, including competitive bidding, CDE approval, and audit requirements in 5 CCR Section 18026, and any successor regulations;
 - Prohibitions on conflict of interest, including (i) the assurances required to establish the transactions with officers, directors, and any related party transactions are conducted at an arm’s length, and (ii) employment limitations stated in the *EC* Section 8316;
 - Cost reimbursement requirements, including reimbursable costs, documentation requirements, the provisions for determining the reimbursable amount and other provisions in 5 CCR Section 18033, and any successor regulations;
 - Accounting and reporting requirements; and
 - Operations and programmatic requirements

Legal Name of Applicant:

Section XI– Applicant Certification

**Printed Name of Applicant’s
Authorized Representative:**

**Title of Applicant’s Authorized
Representative:**

**Authorized Representative’s Phone
Number:**

**Authorized Representative’s Email
Address:**

**Signature of Applicant’s Authorized
Representative:**

Date of Signature:

Legal Name of Applicant:

Section XII–Requirements Checklist

Applications that do not meet the following criteria may be screened out. By initialing each section, you are certifying that your application meets each criterion specified.

Criteria	Applicant Initials	EED Use Only
I have completed and included Section I-XII, as applicable, in this application package.		
I have completed and included all Fiscal Worksheets from Section VII of this application package.		
I have completed and included the Fiscal Attachment, Program Staffing Plan from Section VIII of this application package.		
I have completed and included the FY 2021-22 and FY 2022-23 Program Calendars from Section IX of this application package.		
I have completed and included the Justification for Operating Days from Section IX of this application package. (If applicable)		
I have completed and included the Written Program Narrative, using the template provided, from Section IX of this application package and have adhered to all instructions for the Written Program Narrative.		
I have completed and included the Applicant Certification from Section X of this application package.		
This application package is complete and contains all required signatures, in compliance with the application instructions.		

Legal Name of Applicant:

Section XIII–Application Checklist

It is the sole discretion of the applicant to ensure that the application package is complete and received by the CDE on or before **5 p.m. on Thursday, April 21, 2022.**

Electronic Submissions must be sent to:

CSPPRFA@cde.ca.gov

Hard copies that are delivered in person or by mail must be addressed to:

California Department of Education
Early Education Division
Attention: Administration and Fiscal Services Unit
1430 N Street, Suite 3410
Sacramento, CA 95814-5901

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Legal Name of Applicant:

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