

COVID-19 Early Childhood Losses and Extraordinary Expenses Grant 2020-Relaunch

Wyoming Kids First

Program Demographics

Project Name*

Your project name will be:
COVID L&EE 2020 + program name

Example:
COVID L&EE 2020-The Children's Courtyard

Character Limit: 100

Program Description*

Choices

Family Child Care Home
Family Child Care Center
Child Care Center
Exempt

Licensed Capacity*

What is the licensed capacity of your program?

Character Limit: 3

County*

Choices

1. Albany
2. Big Horn
3. Campbell
4. Carbon
5. Converse
6. Crook
7. Fremont
8. Goshen
9. Hot Springs
10. Johnson
11. Laramie
12. Lincoln
13. Natrona
14. Niobrara
15. Park

16. Platte
17. Sheridan
18. Sublette
19. Sweetwater
20. Teton
21. Uinta
22. Washakie
23. Weston
24. Wind River Reservation
25. Multi-County
26. Statewide
27. Other

Did you received a Losses and Extraordinary Expenses Grant in 2020*

Choices

YES

NO

I DON'T KNOW

Evidence of Need

Please read these directions carefully before working on your https://netorgft8058895-my.sharepoint.com/:w:/g/personal/stephanie_wyokidsfirst_org/ET8PgrpOBo1Hhbhn0mrVtwA/B3a8V2egzFiyOEcGhk2jEvA?e=oNmtn7orksheet and narrative. Applicants that do not follow directions and/or who submit incomplete information that requires follow-up will be put on hold and may lose their opportunity for funding if others have submitted complete and thorough applications.

WORKSHEET/NARRATIVE DIRECTIONS

Budget Worksheet*

Download the BUDGET WORKSHEET here.

After you have completed the budget worksheet you whttps://netorgft8058895-my.sharepoint.com/:x:/g/personal/stephanie_wyokidsfirst_org/ESBrpyQ6W55GntpXzeMDbXAB4kThC-gczoWkrAWyscLxnA?e=oeugt upload the document here. The budget worksheet BUDGET WORKSHEET

File Size Limit: 10 MB

Grant Narrative*

Please provide a statement describing your losses and extraordinary expenses. Your statement should included an explanation for your losses and each category of extraordinary expense that you listed on your budget worksheet.

Character Limit: 4000

Character Limit: 250

Grant Request

Total Request*

This value is from line 30 of the grant worksheet.

Character Limit: 20

Alternate Grant Amount

If you would like to request a lesser amount than what you qualify for, please enter that alternate value here.

Character Limit: 20