All applications for scholarships must be completed on the official application form and must be mailed, faxed or hand-delivered to:

Department of Workforce Services  
Attn: WY Quality Counts! Program  
614 South Greeley Hwy.  
Cheyenne, WY 82002  
1-866-373-6061 (Fax)

Applications will only be accepted if postmarked, faxed or hand delivered no less than forty-five (45) days before the scheduled training.

Assistance is also available by contacting the DWS Administrative Office in Cheyenne at (307) 777-2439 or E-mail to: wyqcc@state.wy.us

Please view our website at www.wyqualitycounts.org for WY Quality Counts! Educational Development Program rules, as well as detailed information and application procedures for WY Quality Counts! Scholarships.

Part I: Application Information

Section 1 – Program Summary

1. Project Title — The name of the CDA training program.
2. Total Cost of Project — If approved, this will be the Scholarship Award.
3. Type of Certificate — Indicate whether Participants will be working the initial, second setting or renewal certificate.
4. CDA Coursework Type — Indicate whether the CDA program is community-based, community college or independent.
5. Dates of Training — The date actual training/coursework begins, through the last day of training/coursework.
6. Cost per Participant – This should be the total Cost of Project divided by the number of participants in the program.
7. Number of Participants — The number of individuals who will be participating under this application to obtain their CDA’s.
8. Indicate whether you plan to receive funds from any other source(s) to facilitate this training.
9. If you answered "yes" to question 8, list who you will be receiving fund from, or plan to receive funds from, the amount of the funds, and why you are receiving these funds.
Section 2 – CDA Contractor

10. Contractor Name — The full, legal name of the individual who is authorized to sign the Contract, and who is accepting legal and fiscal responsibility for the scholarship on behalf of the Contractor. The person named in this block must personally sign the contract documents.

11. Job Title — The title of the Contractor.

12. Street Address — Physical residence of the individual applying to be a Contractor.

13. Mailing Address — If different from the street address.

14. City — City in which the Contractor lives.

15. State — State in which the Contractor lives.


17. Telephone — Primary daytime phone number in which the Contractor can be reached.

18. E-mail Address — E-mail address which correspondence for the Contractor will be directed to.

19. Social Security Number /FEIN — Social Security Number or FEIN of the Contractor.

Section 3 – Budget Worksheet(s)

Fill out one individual budget worksheet for each type of CDA you will serve. Each type you serve needs its own separate budget submitted. There are three budget pages in the application that are labeled at the top for each type of CDA that may be served. I.E. if you will only be applying to serve community college-based CDA programs, only submit the applicable (labeled) budget page, disregarding the others. If you wish to apply to serve all three types, submit all three budget pages.

Lines 20-26 place applicable fees in block “A” for “Direct Costs” and place fees in block “B” that are “Contractor Fees”.

20. Instructor Fee or Tuition — List the amount of the instructor fee OR the tuition for this training.

21. Advisor Fee — If applicable, list the total amount for the Advisor Fee.

22. Books — The total amount of books for the Participants.

23. List any required fees.

24. The total for the CDA Packets for the Participants.

25. The total for the CDA Assessment Fees.

26. Administration — List any administrative costs associated with this application. Administrative costs may not exceed 5% of the direct training costs for the program. This amount is ONLY applicable to the "Contractor Fees" line item.

Part 2: Application Narrative

Write and attach, to the application, a complete narrative, not more than ten (10) pages in length, containing all the requested information in Part 2 of the application. The narrative should be typed, or clearly handwritten. Narratives that are not legible will not be accepted.

To qualify as a CDA Contractor through the WY Quality Counts! Program, all CDA Contractor applicants must also write a Program Summary briefly summarizing the program(s). The summary should provide our evaluators with an overview of the program, including the goals of the proposed program, the planned activities, outcomes and the proposed impact of the program. The Program Summary may not exceed one page in length and the Program Summary does count in the ten page narrative limit.
Contractor candidates shall fill out an application narrative that will:

Explain how the program will:

Meet the standards of the Council for Professional Recognition;

Provide trainees, upon completion, with:

- The initial CDA Certificate;
- Renewal of the CDA Certificate; and/or
- Second Setting CDA Certificate, if required by the child care facility.

Instructor (if applicable)

Provide information about the proposed instructor.

- Who is the instructor?
- What are their qualifications, including education and experience?
- Other supporting information.
- What is the instructor-to-student ratio for the program?
- What is the instructor’s specialization?

Advisor (if applicable)

Provide information about the proposed advisor.

- Who is the advisor?
- What are their additional qualifications, including education and experience?
- What is the advisor’s specialization?
- Which type(s) of CDA are you qualified to advise?
  i.e. a independent CDA programs, community college-based CDA programs, or community-based CDA programs.
- Other supporting information

Curriculum

Provide curriculum if not provided by a Wyoming Community College or other training entity, please provide information about the proposed curriculum.

- What is the curriculum?
- Is this a new or already established curriculum?
- Why are you confident the curriculum will lead to success of the students?
- Other supporting information.

Participant Recruitment, Selection and Enrollment

If you plan to recruit,

- Explain how you plan to recruit eligible participants for this program.
- Explain how you will ensure the participants are indeed eligible.
- Explain how you will ensure each participant will complete the application process with DWS.
Participant Performance Monitoring

Define the following, and explain your plan to monitor participant performance for your program(s):

- Official Enrollment.
- Continuous Enrollment.
- Satisfactory Performance.
- Good Standing.

Payment Options
Indicate which entity(s) should receive the DWS payment if this application is approved. All entities must be registered with WOLFS, except for the Council for Professional Recognition. The CDA Packet and Assessment fees may be billed upon application, but must be invoiced to DWS individually for each participant. Explain exactly who is paying for each required item on behalf of the participant and who requires direct payment from DWS.

- Training Entity (College, other)
- Instructor
- Advisor
- Council for Professional Recognition
- Other (Please explain your proposed payment structure in detail).

Budget Narrative

Provide a comprehensive budget narrative that addresses all costs of the proposal. The budget narrative shall outline and define all costs chargeable to the program.

The following training expenses shall be allowed, if supported by the application and not covered by the trainee or another source. If the cost is covered by the trainee or another source, the amount and source of the funds must be clearly disclosed.

- Instructor Fee or Tuition
- Advisor Fee (if applicable)
- Books
- Required Fees
- CDA Packet
- CDA Assessment Fee
- Administration (If applicable, and does not exceed 5% of the direct training cost.)

Purchased, leased, or rented equipment shall not be an allowable expense. The applicant must provide computations for ALL costs.

Signatures

The application must be signed by the individual applying to the Department of Workforce Services, WY Quality Counts! program, to be a Contractor. (last page)

Failure to sign will result in rejection of the application.

The original, completed application, with any supporting documentation or letters, must be mailed, faxed or hand-delivered to the address on the instruction sheet (first page). E-mailed applications will not be accepted.
# Awareness & Training for Quality Child Care

## CDA Contractor Application

### Part 1 - Application Information

#### Section 1 – Program Summary

| Program Title: |  |
| Total Cost of Program: |  |
| Type of Certificate: | □ Initial □ Second Setting □ Renewal |
| CDA Coursework Type: | □ Community-Based □ Community College □ Independent |
| Dates of Training: |  |
| Cost per Participant: |  |
| Number of Participants: |  |
| Are you receiving, or will you receive funds from another source to facilitate this training? | □ Yes □ No |
| If “yes”, briefly explain. |  |

#### Section 2 – CDA Contractor Information

| Contractor Name: | Job Title: |
| Street Address: |  |
| Mailing Address: |  |
| City: | State: |
| Zip: |  |
| Telephone: | Email Address: |
| Social Security Number/FEIN: |  |
| Can you serve multiple CDA settings simultaneously? |  |

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**NOTE on STARS Credit:**
Please understand it is your responsibility to ensure that the planned coursework is eligible for STARS credit.

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**Office Use ONLY**

| Date Postmark: |
| Date Received: |
| Application/Contract No.: |
| Date Approved: |
Section 3 – Budget Worksheets

The following Budget Worksheet(s) must be completed and submitted with the application.

**Wyoming Department of Workforce Services**
**WY Quality Counts! Program**
**CDA Program Budget Worksheet**

<table>
<thead>
<tr>
<th>Community-Based CDA Your Planned Budget</th>
<th>“A” Direct Costs</th>
<th>“B” Contractor Fees</th>
</tr>
</thead>
<tbody>
<tr>
<td>20. Instructor Fee (if applicable) or Tuition (college)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>21. Advisor Fee (if applicable)</td>
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<td></td>
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<tr>
<td>22. Books</td>
<td></td>
<td></td>
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<tr>
<td>23. Required Fees</td>
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<td>24. CDA Packet</td>
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<td></td>
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<td></td>
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<td></td>
</tr>
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<td>“B” Contractor Fees</td>
</tr>
<tr>
<td>-----------------------------------------------</td>
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<td></td>
</tr>
<tr>
<td>Independent-Based CDA Your Planned Budget</td>
<td>“A” Direct Costs</td>
<td>“B” Contractor Fees</td>
</tr>
<tr>
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</tr>
</tbody>
</table>
Signatures

CDA Contractor. The person signing this application as the "CDA Contractor" certifies that he/she is authorized to represent the CDA training provider and is legally responsible for the decision as to the cost and supporting documentation provided as a result of this application. I also certify that I am 18 years of age or older.

_________________________________________  _________________________
CDA Contractor                                                      Date

Thank you for your application!