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Login
Login

Go to https://eeclead.force.com/EEC_Login
1. Enter your LEAD username and password
2. Click Login

Key Points
- If you have forgotten your password, you can click Forgot Password? and follow the steps to reset your password
- If you have forgotten your username, or if you are having a problem logging into your account, click Support Ticket
1. Once logged in, you will land on the homepage.
2. Scroll down to find Grants Management Card.

Clicking on the View Grants button will open the Grants Management system and dashboard.
Click the View Grants button in the Grants Management card.

Clicking on the View Grants button will open the Grants Management system and dashboard.
Welcome Josh Rosenburgh
Please select the program you would like to log into from the options below.

**Search Provider**

- **Bright Future Child Care**
  121, street apt., Boston, NV 02203
  TYPE: Large Group

- **Rosenburgh, Josh**
  test, Abington, MA 12121
  TYPE: Family Child Care

- **Test Kritika GSA**
  22, 2, dd, Boston, MA 20222
  TYPE: Large Group

**Instructions**

Click on the **Log in** button of the desired Program, and you will be redirected to its **EEC ARPA Grants** page.

**Key Points**

If you are registered with many programs, you can search for the Provider using the Search bar.
Dashboard – Available Language

The EEC ARPA Grant Application is available in English, Spanish, Portuguese and Mandarin. Click the drop-down box in the upper right-hand corner to select your preferred language.

Key Points

This message is also displayed in multiple languages to help applicants know they can switch the language if they need to. From the drop-down list, you can select English, Spanish, Portuguese, and Mandarin languages.
Dashboard

Welcome to the Massachusetts ARPA Child Care Stabilization Grant application. All child care programs licensed as of March 11, 2021, and open at the time of application are eligible, including programs that do not accept state child care subsidies. Funded programs may also be eligible if run by a private school. Eligible programs can apply here for up to six months of monthly payments. If you would like to see this application in a different language, please use the crop-down box in the upper right-hand corner to select your preferred language.

Si desea ver esta aplicación en un idioma diferente, utilice el cuadro desplegable en la esquina superior derecha para seleccionar su idioma preferido.

Se desear ver este aplicativo em um idioma diferente, use a caixa suspensa no canto superior direito para selecionar seu idioma preferido.

如果您想以其他语言查看此应用程序，请使用右上角的下拉框选择您的首选语言。

On the Dashboard, you’ll find:
- Applications In Progress - applications that have been started and saved, but not submitted
- Applications Submitted - applications that have been submitted
- Applications Under Review - applications that have been submitted and are currently under review

The Grants Dashboard will indicate the number of grant applications in progress, submitted, or under review.
Application Submission
(Center Grants)
Available Grants

Click **Apply Today** from the **Available Grants** section

Please note that once you have started an application, this “apply today” button will be disabled, but if you scroll down to the bottom of the screen you will be able to see any applications you have in progress and will be able to return to them by clicking continue.
Instructions

1. After clicking **Apply Today**, you will be redirected to the **Instructions** page.
2. Read all the Instructions that will help in getting started with your Grant Application.

You can read the instructions to understand the basics of the grant program and what you will need to fill out your application.

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**Getting started with your grant application**

Each program site must complete an individual application to be considered for funding. Multi-site agencies are able to use their existing LEAD login to submit program applications, but an application must be completed for each individual program site.

Programs should complete the full application to request funds and then must confirm application information each month to continue receiving monthly payments for the duration of the grant period. Programs are able to update information on a monthly basis as needed and monthly funding may be adjusted based on new information provided.

If you have trouble completing the application, please contact support.

**Who is Eligible for the EEC ARPA Child Care Stabilization Grants?**

- All programs licensed by EEC as of March 11, 2021 and open to serve children at the time of the application are eligible for this funding. Programs will not be penalized for a temporary COVID-related emergency closure that occurs during the grant period. Programs that do not offer services for families over the summer will be eligible during the month they open for services.
- Funded programs approved by EEC by March 11, 2021 and run by private schools that otherwise meet the conditions above will also be eligible for this funding.

**Completing the application**

Prior to completing the full application we recommend you ensure you have the necessary information available. This includes:

- [Go to instructions website](#)
Instructions

1. Click **Next** to continue
   - or -
2. Click **Cancel** to cancel the application filing process

Getting started with your grant application

Each program site must complete an individual application to be considered for funding. Multi-site agencies are able to use their existing LEAD logins to submit program applications, but an application must be completed for each individual program site.

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- Funded programs approved by EEC by March 11, 2021 and run by private schools that otherwise meet the conditions above will also be eligible for this funding.

Completing the application

Prior to completing the full application we recommend you ensure you have the necessary information available. This includes:

- Your program ID
- Enrollment information as of the first of the current month
- Staffing information, including salary, benefits and additional stipends
- Scholarship information
- Monthly expenses (optional)
- Banking and tax information

Need Support?

Log a Ticket

PHONE
831-600-2074

EMAIL
eecgrantsupport@mitb2b.com
Program Information

Instructions

Fields that are read-only have been auto-populated based on information received from LEAD:

- Provider Details
- Licensed Capacity by Age group
- Provider Address

Key Points

- If your licensed capacity is incorrect, click on the underlined link (that says "here") above the 'Licensed Capacity' field to be redirected to the Appeals Form
- All the fields with * are mandatory

Program Information

* indicates required field

Provider Information

<table>
<thead>
<tr>
<th>PROVIDER DETAILS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Program Provider - Number</td>
</tr>
<tr>
<td>P-259907</td>
</tr>
</tbody>
</table>

Licensed Capacity (If your licensed capacity is incorrect, please complete a appeal form [here](#) to request a change).

<table>
<thead>
<tr>
<th>PROVIDER ADDRESS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Street Address</td>
</tr>
<tr>
<td>new at 2</td>
</tr>
</tbody>
</table>

State | ZIP Code
MA | 21212

* Monthly funding amounts will be calculated based on the information submitted in your application. You will have an opportunity to confirm or update your application information for each of the following months. Please indicate the month that you are applying to start your monthly grant. Please note that your site must be open to serve children during the month for which you are applying to start your monthly grant and all information provided in your application must be correct for that month. Once you have submitted the application for your first month, you will be asked to recertify the information for each following month. Monthly funding amounts will be recalculated if any updates are made in future months.
Program Information

Please note that throughout the application there are blue icons with the letter "i". If you hover over these icons, you can see additional information about how to fill out that specific application question.

The Program Provider Number is a unique identifier. Click the following link to find your Program Provider Number:
https://eeclead.force.com/EEC_ChildCareSearch
The first field you need to select is the month for which you are applying. Indicate the month for which you are filling out your initial grant application. Each month after the initial application will require you to recertify or update the information you submitted in the first month’s grant application.

Your program must be open to serve children in the month for which you are submitting your initial grant application to apply for grant funding and all information provided must be correct for the month you are applying. Providers who are open and otherwise meet eligibility criteria are able to apply for grant funding starting in July.
1. Click on the drop-down and select the first month of funding for which you are applying in your initial grant application.

2. Programs should apply for this grant for the first month in the grant period (July 2021) they are open and serving families. For example, programs that are not open in the summer should submit their application to start in September.

Eligible applicants can apply for up to six months of funding beginning in July.

Applicants eligible for funding starting in July should choose July as the first month for their grant application.
1. Choose your preferred language
2. Enter the primary contact details
3. Enter all required information
4. Click **Save and Next** to continue

To go back to the previous page, click **Previous** (this is applicable throughout the application). Navigate throughout sections of the application by clicking on the step number in the top-left of the screen, “Previous” or “Save and Next” at the bottom of the screen. Clicking the “back” button on your web browser, may impact your ability to save changes.
Operation Hours

1. Review the **Fee Schedule and Days and Hours of Operations** in the Provider Information section.

2. If this information is incorrect or incomplete, click on the link to navigate to your EEC LEAD Consumer Web Page to make edits.

When you click the link, a new web browser tab opens, complete your updates and close the window to return to the application; any changes you make here will reflect on your site’s consumer web page.
Once you have clicked on the link from the Provider Information section, you will be landing on the EEC LEAD Consumer Web Page.

1. Click the 'Edit icon' to edit or create your program's Schedules and Fees.
Once you have clicked on the ‘edit icon’ from the EEC LEAD Consumer Web Page, ‘Schedule and Fees’ pop-up window will open:

1. Click the ‘plus icon’
2. Click Save to open the pop-up application window

Due to some providers offering multiple schedule options (i.e., “full-time”, “summer only” etc.) more than one "Schedule Shift" may be displayed (along with the associated "Hours of Operation" and "Fees" pertaining to each shift offered.)
Child Care Edit

Instructions

1. Enter the required details
2. Click on Save; the application will be saved and you will be redirected to ‘Child Care Page’
3. Click Go Back to come back to the ‘Child Care Page’ without saving the information
4. Click on Add Day and/or Add Fee to include more details

Key Points

Enter the Fee Amount in only a numeric form
Click the ‘plus icon’ to add Schedule and Fees
1. Enter the required details
2. Click on **Save**; the application will be saved and you will be redirected to ‘Child Care Page’
3. Click **Go Back** to come back to the ‘Child Care Page’ without saving the information
4. Click on **Add Day** and/or **Add Fee** to include more details

You cannot have the same Schedule Type twice
Instructions

1. Click Save; a pop-up window will appear to confirm saving the application. Click Save; the application will be saved
2. Click Exit; a pop-up window will display to confirm exiting from the application. Click Exit return to the ‘Operation Hours’ page

Key Points

No key points
1. Review ‘DAYS AND HOURS OF OPERATION’ information. (These details are retrieved from your site’s consumer web page)
2. Check the acknowledgement box
3. Click Save and Next

If you updated the ‘Days and Hours Of Operation’ information on your site’s consumer web page, you will need to refresh this screen to see the changes take place on this screen.
Capacity Information

The following information will not affect your grant award. Information on enrollment will help EEC report on family access trends over the six month grant period.

How many children were enrolled in your program on the first of the month by age? 📝

Note: This information will not impact your funding calculation.

<table>
<thead>
<tr>
<th>Age Range</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-12 months</td>
<td>0</td>
</tr>
<tr>
<td>13-24 months</td>
<td>0</td>
</tr>
<tr>
<td>25-36 months</td>
<td>0</td>
</tr>
<tr>
<td>3-4 years</td>
<td>0</td>
</tr>
<tr>
<td>4-5 years</td>
<td>0</td>
</tr>
<tr>
<td>5-6 years</td>
<td>0</td>
</tr>
<tr>
<td>6-10 years</td>
<td>0</td>
</tr>
<tr>
<td>Older than 10 years</td>
<td>0</td>
</tr>
<tr>
<td>Total number of children enrolled on the first of the month</td>
<td>0</td>
</tr>
</tbody>
</table>

Enter the number of children enrolled in your program on the first of the month by each age group listed. For example, if this program is applying for July funding and has 10 infants under 12 months enrolled on July first, then the number 10 should be entered next to 0-12 months.

Once you have completed all the different age ranges, the system will automatically add the enrollment numbers from each age category to report on the total of your current enrollment. If the total is incorrect, please review your count by age group.
## Capacity Information

**Instructions**

If your program helps families to pay for care, answer 'Yes' to be prompted for more information.

**Key Points**

If your program offers additional support outside of subsidies to families, answer those additional questions. This could include sibling or staff discounts, scholarships, sliding scale tuition or other types of reduced tuition.

### Data Entry Form

<table>
<thead>
<tr>
<th>Field Description</th>
<th>Input</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total number of children enrolled on the first of the month</td>
<td>0</td>
</tr>
<tr>
<td>Does your program help families to pay for care (other than accepting child care subsidies from the state)?</td>
<td>Yes/No</td>
</tr>
<tr>
<td>How many currently enrolled children receive help paying for your program (not including those that receive child care subsidies from the state)?</td>
<td>0</td>
</tr>
<tr>
<td>What is the total amount of tuition support provided by your program or other sources (not including child care subsidy funds received from the state)?</td>
<td>$0.00</td>
</tr>
<tr>
<td>How many classrooms do you have open right now by age?</td>
<td></td>
</tr>
<tr>
<td>Note: Mixed-age classrooms should be counted by the youngest age group served. For example, an infant/toddler classroom would be included in the count of classrooms serving infants, not toddlers.</td>
<td></td>
</tr>
<tr>
<td>Infants</td>
<td>0</td>
</tr>
<tr>
<td>Toddlers</td>
<td>0</td>
</tr>
<tr>
<td>Preschoolers</td>
<td>0</td>
</tr>
<tr>
<td>School Age Children</td>
<td>0</td>
</tr>
<tr>
<td>Total Classrooms</td>
<td>0</td>
</tr>
</tbody>
</table>
Capacity Information

For center-based providers - enter the number of classrooms currently open in your program by age group. If a classroom serves children in two age groups, count it in the youngest applicable group.

For example, if you have a classroom that serves infants and toddlers together, count the classroom in the infant category and NOT the toddler category. You will see the total number of classrooms summarized at the bottom of the screen.
## Capacity Information

### Instructions

1. You may provide additional information about your monthly program expenses.
2. Click **Save and Next**

### Key Points

A report on the amount you spent last month on program expenses will be used to inform EEC federal reporting and future grant opportunities.

---

### Capacity Information

**Capacity Information**: This section allows you to input various classroom-related data, including the number of classrooms open right now by age group, and whether you are willing to provide additional information about your monthly expenses.

<table>
<thead>
<tr>
<th>Category</th>
<th>Details</th>
</tr>
</thead>
<tbody>
<tr>
<td>Number of Classrooms Open</td>
<td>0</td>
</tr>
<tr>
<td>Infants</td>
<td>0</td>
</tr>
<tr>
<td>Toddlers</td>
<td>0</td>
</tr>
<tr>
<td>Preschoolers</td>
<td>0</td>
</tr>
<tr>
<td>School Age Children</td>
<td>0</td>
</tr>
<tr>
<td>Total Classrooms</td>
<td>0</td>
</tr>
</tbody>
</table>

**Would you be willing to give us additional information about your monthly expenses?**

If so, report here how much money you spent last month on program expenses. This information will be used to inform EEC federal reporting and future grant opportunities.

- $0.00

---

### Additional Information

- You can access support by logging a ticket or calling the phone number provided.

---

### Notes

- Mixed-age classrooms should be counted by the youngest age group served. For example, an infant/toddler classroom would be included in the count of classrooms serving infants, not toddlers.
If the **Total number of children enrolled on the first of the month** field is 0, a confirmation window will appear after clicking **Save and Next**

1. Click **Yes** to proceed with the application
Staff Information – Children Enrolled

Instructions

This page will appear if you have enrolled children for the first month

1. Provide a report on the total number of Full-time Equivalent staff (FTEs) currently working in each role and the salary ranges by role

Key Points

Center-based providers will be asked to provide a count of the number of full time equivalents or FTEs in different roles. A FTE is a calculation of the percentage of full time coverage your staff provides. Read the instructions about how to count full-time staff and how to provide wage information.
### Staff Information – Children Enrolled

**Instructions**

1. Populate staffing information
2. Mark ‘Yes’ or ‘No’, to federal/state funding question
3. Mark all the benefits your organization offers to educators
4. Mark ‘Yes’, if you have provided additional stipends or bonuses in FY21

**Key Points**

For more information about how to fill out these fields, hover over the help "I" icons

---

#### Role and Wage Information

<table>
<thead>
<tr>
<th>Role</th>
<th>FTE</th>
<th>Lowest Hourly Wage</th>
<th>Highest Hourly Wage</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assistant Group Leader</td>
<td>0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Group Leader</td>
<td>0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Site Coordinator</td>
<td>0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
<tr>
<td>Program Administrator</td>
<td>0.00</td>
<td>$0.00</td>
<td>$0.00</td>
</tr>
</tbody>
</table>

**Do you have any other staff working directly with children and families you would like us to know about?**

If so, please describe here.

---

**Do you use any federal or state funding to support the cost of these additional staff working with children and families?**

- [ ] Yes
- [ ] No

---

**Which benefits does your organization offer to educators?**

- [ ] Paid Time off
- [ ] Health insurance
- [ ] Paid sick leave
- [ ] Dental insurance
- [ ] Disability
- [ ] Retirement (401k/403b)
- [ ] Paid parental leave
- [ ] Vision insurance
- [ ] Life insurance
- [ ] Flexible Spending Account (FSA)
- [ ] Tuition assistance
- [ ] Reduced cost child care
- [ ] Other
- [ ] None

---

**In FY21, did you provide any additional stipends or bonuses beyond hourly wages?**

- [ ] Yes
- [ ] No

---

* Please report the total compensation of your organization’s highest paid employee from the most recent fiscal year, if you are a site that is managed by or has a financial relationship with an umbrella orga-
1. Select the compensation range of your organization's highest paid employee
2. If you have selected $750K+, a dependency field will appear; specify the compensation amount
3. Click on Save and Next

The compensation ratio is automatically populated based on the information you provide about salaries. If you feel the compensation ratio is not accurate as per your program, click the link to raise an appeal.
1. The Equity Adjustment displays the information used to determine your award total.
2. Click **Save and Next**

**A message will be displayed on the screen based on formula calculations on the previous page. This is read only.**
Attestation

1. Mark all the categories that you support with the funding received from the grant.
2. Check the box for the attestation statement.

Key Points

- By checking Attestation boxes, you are attesting that this language is true.
- By checking the second box, you are agreeing that you will use these funds only for the categories and purposes you have indicated on this application.
Attestation

Instructions

1. Provide the Legal Name (either legal name of the program or the legal name of the person filling out the application)

2. Click Save and Next

Key Points

By signing this application, you are certifying that you will meet requirements throughout the period of the grant.
Banking Information

1. Select the Payment type (EFT or check by mail)
2. Select the type of Legal Name and Address you want to use
3. Read the Account Holder Information. To raise an appeal, click the underlined link

Key Points:
- Your legal name and address information will be pre-populated from your LEAD licensing records
- Please be advised that choosing to receive paper checks instead of electronic fund payments may delay payments due to processing and mailing
1. Enter the applicable Tax Identification Number
2. Enter correct banking information
3. Click **Save and Next**
4. Hover over the "i" Help Text icon for more information (applicable throughout the portal)

- Once the bank information is entered and you click **Save and Next**, the system will validate that the bank account with the given legal name is valid and active
- Make sure to enter your correct bank routing and account number information to ensure timely and accurate payments!
W9 Details

Instructions

1. Select the appropriate federal tax classification on this W9 Screen
2. Hover over ‘Help icon’ for more information (applicable throughout the portal)

Key Points

Select the appropriate federal tax classification that applies to your program.
1. Provide Email Address and Phone Number
2. Hover over Help icon from “which type of identification number you are holding” for instruction about what needs to be done if you have an ITIN

Taxpayer Address will be auto-populated
W9 Details

1. Select the type of Taxpayer Identification Number you are holding and provide that number
2. Read and check each box that applies for the validation criteria
3. Enter the Legal Name

Fill out the fields on this screen the way you would fill out your IRS W9 form. For more information, please click here.
Instructions

1. Check the box if the legal name and address on your W9 is different from that on your bank account.
2. Once the box is checked, an error message appears notifying that you will not be able to proceed further. Click the here link and complete the Appeal form.
3. Click on Save and Next.

Key Points

In order to administer funding under this grant application, EEC requires that your legal name and address on the W9 is the same as the information on your bank account.

If these documents do not match and the legal names and addresses differ, you will need to check the box and complete an Appeal Form.
Review and Summary

Review all details

To revise any information, you can go back to any of your completed steps by clicking the name of the step in the sidebar.
Review and Summary

**Instructions**

1. Check the box stating you have read all details and accept the Terms and Conditions of the service.
2. Provide Legal Name.
3. Click on **Submit** to submit the application for EEC review.

**Key Points**

No key points.

---

**Social Security Number**

526-35-4570

**Under penalties of perjury, I certify that:**

- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me).
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I no longer subject to backup withholding.
- I am a U.S. citizen or other U.S. person.
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct.

**Signature of U.S. Person**

Preethi Large Group

- I have reviewed all the information entered into this application and confirm that it is complete and accurate to the best of my knowledge, and that my program meets eligibility criteria specified by EEC in the application instructions.

**Legal Name**

CRAZY JIM'S PIZZA
Monthly Award Projection

Instructions

Once the application is submitted, a "Monthly Award Projection" window will pop-up
1. Click the link if you wish to raise an appeal
2. Review the information and Close

Key Points

- You will see a success message on the screen confirming that the application is submitted successfully
- The monthly award projection will show you a chart of your projected monthly award amount
- Please note this amount is only a projection and may change based on information you provide when you recertify your application
Dashboard

Welcome to the Massachusetts ARPA Child Care Stabilization Grant application. All child care programs licensed as of March 11, 2021, and open at the time of application are eligible, including programs that do not accept state child care subsidies. Funded programs may also be eligible if run by a private school. Eligible programs can apply here for up to six months of monthly payments. If you would like to see this application in a different language, please use the drop-down box in the upper right-hand corner to select your preferred language.

Available Grants

- You will be notified via email when your grant application is approved
- You will also notice the status of your grant application update on this dashboard once the status is approved
Application Submission
(FCC - Family Child Care Grants)
Providers

Welcome Prateek Joshi
Please select the program you would like to log into from the options below.

Search Provider
Search...

Joshi, Prateek
new st, Boston Road, MA 11111
TYPE: Family Child Care

PROVIDER STATUS
☑️ Current

Log in

Instructions
Click on the Log in button of the FCC Program, and you will be redirected to its EEC ARPA Grants page

Key Points
Your program needs to be in a licensed status for you to be able to apply for ARPA grant funding
Click **Apply Today** from the **Available Grants** section

Please note, that once you have started an application, this “apply today” button will be disabled, but if you scroll down to the bottom of the screen you will be able to see any applications you have in progress and will be able to return to them by clicking continue.
After clicking **Apply Today**, you will be redirected to the **Instructions** page.

2. Read all the Instructions that will help in getting started with your Grant Application.

You can read the instructions to understand the basics of the grant program and what you will need to fill out your application.
Instructions

Getting started with your grant application
Each program site must complete an individual application to be considered for funding. Multi-site agencies are able to use their existing LEAD logins to submit program applications, but an application must be completed for each individual program site.

Programs should complete the full application to request funds and then must confirm application information each month to continue receiving monthly payments for the duration of the grant period. Programs are able to update information on a monthly basis as needed and monthly funding may be adjusted based on new information provided.

If you have trouble completing the application, please contact support.

Who is Eligible for the EEC ARPA Child Care Stabilization Grants?
- All programs licensed by EEC as of March 11, 2021 and open to serve children at the time of the application are eligible for this funding. Programs will not be penalized for a temporary COVID-related emergency closure that occurs during the grant period. Programs that do not offer services for families over the summer will be eligible during the month they open for services.
- Funded programs approved by EEC by March 11, 2021 and run by private schools that otherwise meet the conditions above will also be eligible for this funding.

Completing the application
Prior to completing the full application we recommend you ensure you have the necessary information available. This includes:
- Your program ID
- Enrollment information as of the first of the current month
- Staffing information, including salary, benefits and additional stipends
- Scholarship information
- Monthly expenses (optional)
- Banking and tax information

Read the eligibility criteria for ARPA funds
1. **Click Next**
2. **Click Cancel** to cancel the application filing process

No key points
Program Information

1. Fields that are in read-only have been auto-populated based on information received in Provider Details.
2. Click on the drop-down and select the first month of funding for which you are applying in your initial grant application.

Instructions

Key Points

- The Program Provider Number is a unique identifier. Click the following link to find your Program Provider Number: https://eeclead.force.com/EED_ChildCareSearch
- If your licensed capacity is incorrect, click on the underlined link to raise an Appeal.
Select the month for which you are applying. Indicate the month for which you are filling out your initial grant application. Each month after the initial application will require you to recertify or update the information you submitted in the first month’s grant application.

Your program must be open to serve children in the month for which you are submitting your initial grant application to apply for grant funding and all information provided must be correct for the month you are applying. Providers who are open and otherwise meet eligibility criteria are able to apply for grant funding starting in July.
Program Information

1. Populate all required information
2. Click Save and Next to continue

To go back to the previous page, click Previous (this is applicable throughout the application)
Operation Hours

1. Review the Fee Schedule and Days and Hours of Operations under Provider Information
2. Check the acknowledgement box
3. If this information is incorrect/incomplete, click on the link to navigate to “Consumer Web Page” to make required edits
4. Click Save and Next

Key Points
Any changes you make here will reflect on your site’s consumer web page
Capacity Information

The following information will not affect your grant award. Information on enrollment will help EEC report on family access trends over the six month grant period.

How many children were enrolled in your program on the first of the month by age? 

<table>
<thead>
<tr>
<th>Age Group</th>
<th>Enrollment</th>
</tr>
</thead>
<tbody>
<tr>
<td>0-12 months</td>
<td>0</td>
</tr>
<tr>
<td>13-24 months</td>
<td>0</td>
</tr>
<tr>
<td>25-36 months</td>
<td>0</td>
</tr>
<tr>
<td>3 year old</td>
<td>0</td>
</tr>
<tr>
<td>4 year old</td>
<td>0</td>
</tr>
<tr>
<td>5 year old</td>
<td>0</td>
</tr>
<tr>
<td>6-10 years</td>
<td>0</td>
</tr>
<tr>
<td>Older than 10 years</td>
<td>0</td>
</tr>
</tbody>
</table>

Total number of children enrolled on the first of the month: 0

Instructions

Enter the number of children enrolled in your program on the first of the month by age.

Key Points

Please report on the number of children enrolled on the first of the month for which you are applying for funds. For example, if you are applying for August, please report enrolment as of August 1st.
Capacity Information

1. If your program helps families to pay for care, answer ‘Yes’ to be prompted for more information.
2. You may provide additional information about your program’s monthly expenses.
3. Click Save and Next.

Key Points

A report on the amount you spent last month on program expenses will be used to inform EEC federal reporting and future grant opportunities.
Staff Information

Instructions

If your program has assistants that work with you, answer Yes to be prompted for more information.

Key Points

No key points
Staff Information

Instructions

1. If you have any other staff working directly with children and families, provide the details in the description field
2. Click **Save and Next**

Key Points

In the field 'Please list the P-numbers of all FCC Assistants being employed by your program', the correct format is P-123455
Equity Adjustment

Instructions

1. The Equity Information displays the information used to determine your award total
2. Click Save and Next

Key Points

No key points
Attestation

**Instructions**

1. Mark all the categories that you support with the funding received from the grant.
2. Check the box for the attestation statement.

**Key Points**

- By checking Attestation boxes, you are attesting that this language is true.
- By checking the second box, you are agreeing that you will use these funds only for the categories and purposes you have indicated on this application.

---

*Grant funds may only be used for one or more of the purposes below. Please mark which categories you will support with the funding received from the grant:

1. Personnel costs, benefits, premium pay, and recruitment and retention
2. Rent or mortgage payments, utilities, facilities maintenance and improvements, or insurance
3. Personal protective equipment, cleaning and sanitation supplies and services, or training and professional development related to health and safety practices
4. Purchases of or updates to equipment and supplies to respond to COVID-19
5. Goods and services necessary to maintain or resume child care services
6. Mental health supports for children and employees
7. Paying for past expenses incurred after January 31, 2020

To receive a stabilization grant, I agree to use these funds only for the categories and purposes indicated on this application and have marked above which categories I plan to fund. Note: You can move funds between categories without prior approval. I also understand that it is my responsibility to maintain records and other documentation to support the use of funds I receive as well as to document my compliance with the requirements described in A, B, and C.

By signing this application, I am certifying that I will meet requirements throughout the period of the grant, including the following:

A. When open and providing services, I will implement policies in line with guidance and orders from corresponding state, territorial, Tribal, and local authorities and, to the greatest extent possible, implement policies in line with guidance from the U.S. Centers for Disease Control and Prevention (CDC).

B. For each employee (including lead teachers, aides, and any other staff who are employed by the child care provider to work in transportation, food preparation, or other type of service), I must maintain pay levels and continue insurance and retirement for the duration of the grant. I understand that I may not involuntarily furlough employees from the date of application submission through the duration of the grant period.
Attestation

1. Provide the Legal Name of the Person
2. Click Save and Next

By signing this application, you are certifying that you will meet requirements throughout the period of the grant.

<table>
<thead>
<tr>
<th>Instructions</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1.</strong> Provide the Legal Name of the Person</td>
</tr>
<tr>
<td><strong>2.</strong> Click Save and Next</td>
</tr>
</tbody>
</table>

<table>
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<td>By signing this application, you are certifying that you will meet requirements throughout the period of the grant.</td>
</tr>
</tbody>
</table>

### Need Support?

- **Log a Ticket**
- **PHONE** 633-600-2074
- **EMAIL** eecgrantssupport@mtlab2b.com

<table>
<thead>
<tr>
<th>Need Support?</th>
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<tbody>
<tr>
<td><strong>Log a Ticket</strong></td>
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<tr>
<td><strong>PHONE</strong> 633-600-2074</td>
</tr>
<tr>
<td><strong>EMAIL</strong> <a href="mailto:eecgrantssupport@mtlab2b.com">eecgrantssupport@mtlab2b.com</a></td>
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</tr>
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</tr>
<tr>
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</tr>
<tr>
<td><strong>B.</strong> For each employee (including lead teachers, aides, and any other staff who are employed by the child care provider to work in transportation, food preparation, or other type of service), I must maintain pay levels and continue insurance and retirement for the duration of the grant. I understand that I may not involuntarily furlough employees from the date of application submission through the duration of the grant period.</td>
</tr>
<tr>
<td><strong>C.</strong> I will provide relief from copayments and tuition payments for the families enrolled in the child care program, to the extent possible, and prioritize such relief for families struggling to make either type of payment.</td>
</tr>
</tbody>
</table>
Banking Information

1. Select the Payment channel
2. Read the Account Holder Information. EEC requires your legal name and address on the W9 to be the same as the information on your bank account. If these documents do not match you will need to raise an appeal by clicking here
3. Select the Address type to which you want to receive the Payment

- Your legal name and address information will be pre-populated from your LEAD licensing records
- Choosing to receive paper checks instead of electronic fund payments may delay payments due to processing and mailing
Banking Information

Instructions

1. Enter the applicable Tax Identification Number
2. Enter correct banking information
3. Click Save and Next

Key Points

• Once the bank information is entered and you click Save and Next, the system will validate that the bank account with the given legal name is valid and active
• Make sure to enter your correct bank routing and account number information to ensure timely and accurate payments
W9 Details

Taxpayer Information

For security purposes, programs will need to fill out the following information in order to receive payment. The questions below are from the IRS W9 form. The IRS W9 form has directions for filling out specific questions beginning on page 2 of the form.

**IDENTIFICATION DETAILS**
Name (as shown on your income tax return)
Griffith, John

**TAXATION DETAILS**
* Check appropriate box for federal tax classification of the person whose name is entered above. Check only one of the following six boxes
- Individual/sole proprietor or single-member LLC
- C Corporation
- S Corporation
- Partnership
- Trust/estate
- Limited liability company

**EXEMPTIONS**
Codes apply only to certain entities, not individuals. Applies to accounts maintained outside the U.S.
Exempt payee code (if any)
Exemption from FATCA Report (if any)

**TAXPAYER ADDRESS**
Street Address
Apt/Suite
City

Instructions
Select the appropriate federal tax classification on this W9 Screen

Key Points
Hover over the blue icon for additional information
Instructions

1. Provide ‘Email Address’ and ‘Phone Number’
2. Hover over Help icon from "which type of identification number you are holding" for instruction about what needs to be done if you have an ITIN

Key Points

Taxpayer Address will be auto-populated
1. Select the type of Taxpayer Identification Number you are holding and provide that number.
2. Read and check each box that applies for the validation criteria.
3. Provide the Full Name as shown on the bank account unless otherwise noted.

Key Points:
- Fill out the fields on this screen the same way you would complete your IRS W9 form.
- Please make sure information is accurate.
1. Check the box if the legal name and address on your W9 is different from that on your bank account.

2. Once the box is checked, an error message appears notifying that you will not be able to proceed further; click the link and complete the Appeal form.

3. Click Save and Next.
Review and Summary

Instructions

Review all details

Key Points

To revise any information, you can go back to any of your completed steps by clicking the name of the step in the sidebar
Review all details
1. Check the box stating you have read all details and accept the Terms and Conditions of the service
2. Provide Legal Name
3. Click Submit to submit the application for EEC review
Monthly Award Projection

Once the application is submitted, a "Monthly Award Projection" window will pop-up
1. Click the link if you wish to raise an appeal
2. Review the information and click Close

Key Points
- You will see a success message on the screen confirming that the application is submitted successfully
- The monthly award projection will show you a chart of your projected monthly award amount
In Progress Applications
In Progress Applications

ARPA Child Care Stabilization Grant funds may be used for one or more of the purposes below:
- Personnel costs, benefits, premium pay, and recruitment and retention
- Rent or mortgage payments, utilities, facilities maintenance and improvements, or insurance
- Personal protective equipment, cleaning and sanitation supplies and services, or training and
- Professional development related to health and safety practices

Instructions

1. Find In Progress applications under My Applications on the homepage
2. Click on Continue

Key Points

- If you have already initiated a grant application but have not submitted it yet, you will be able to see that application in the “In Progress” tab
- You will not be able to initiate a new application by clicking on the “Apply Now” button if you already have an application in progress
## In Progress Applications

### EEC ARPA Grants
Massachusetts’ C3 Funding Grant Application Process

### Instructions

Continue with filing the Application

### Key Points

The Application is saved after every step, so you can continue later

### Banking Information

#### Account Details

- **How would you like to receive your payment?**
  - Check
  - ACH

You are strongly encouraged to select the ACH electronic payment transfer. ACH transfers are deposited faster to your account and easier to handle compared to the traditional method of paying by check. Unlike checks, ACH transfers are not held up by the time it takes for a check to be mailed, Cannot be lost and do not have to be manually entered.

- **Which legal name and address would you like to use?**
  - I would like to use my program’s legal name and address
  - I would like to use my umbrella’s legal name and address

#### ACCOUNT HOLDER INFORMATION

This information has been pulled from your licensing records in LEAD. This data if not accurate will impact your grant payment remittance.

- **Legal Name**: Bright Future Child Care
- **DBA Name**: Bright StarsUmbrella
Recertification
Recertification

1. Log in to the portal and navigate to EEC ARPA Grants homepage
2. Scroll down to find the ‘Recertification’ section

If you are associated with more than one program, you will have to log in to the program with which you would like to proceed.
Recertification

Recertifications

Congratulations! Your application information indicates that you are eligible for an award of $13000 for the month of June. Once you submit this recertification, the grants team will review your information and send you confirmation of your award. To complete the recertification, please click where it says “recertify” to confirm or update your information for that month.

<table>
<thead>
<tr>
<th>MONTH</th>
<th>ACTION</th>
<th>FUND DISTRIBUTION STATUS</th>
<th>AMOUNT</th>
<th>DATE</th>
</tr>
</thead>
<tbody>
<tr>
<td>July</td>
<td>Recertify</td>
<td>Pending Recertification</td>
<td>$13000</td>
<td></td>
</tr>
<tr>
<td>June</td>
<td>Recertified</td>
<td>Scheduled</td>
<td>$13000</td>
<td></td>
</tr>
</tbody>
</table>

Instructions

To recertify, click the **Recertify** link next to the month you are recertifying for.
If the recertify link is not active it means you have either already recertified or that month is not available for recertification yet.

Key Points

- Your monthly recertification window will open up at the beginning of every calendar month.
- You will need to recertify every calendar month before your monthly payment for that month is approved by EEC.
Recertification

1. Review all the data. The data will be the same as on the original application.
2. Scroll down towards the bottom of the page to recertify.

No key points
Recertification

Taxpayer Identification Number (TIN)
WHICH TYPE OF IDENTIFICATION NUMBER YOU ARE HOLDING
IF THE ACCOUNT IS IN MORE THAN ONE NAME, SEE THE INSTRUCTIONS FOR LINE 1. ALSO SEE WHAT NAME AND NUMBER TO GIVE THE REQUESTER FOR GUIDELINES ON WHOSE NUMBER TO ENTER.
SOCIAL SECURITY NUMBER
526-35-4570

Under penalties of perjury, I certify that:
- The number shown on this form is my correct taxpayer identification number (or I am waiting for a number to be issued to me)
- I am not subject to backup withholding because: (a) I am exempt from backup withholding, or (b) I have not been notified by the Internal Revenue Service (IRS) that I am subject to backup withholding as a result of a failure to report all interest or dividends, or (c) the IRS has notified me that I am no longer subject to backup withholding
- I am a U.S. citizen or other U.S. person (defined below)
- The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct

* I re-certify that all the above information is still accurate and nothing has changed over the past Month?

1. Yes, The information is accurate
2. No, my circumstances have changed and I need to edit the application

Recertify

Instructions
1. Select ‘Yes’ to certify the information is accurate and nothing has changed
2. The Recertify button will appear. Click on it and your application will be successfully submitted

Key Points
If the original information is accurate and nothing has changed, then clicking recertify will enable you to recertify for that month and complete the process
Recertification

Taxpayer Identification Number (TIN)
WHICH TYPE OF IDENTIFICATION NUMBER YOU ARE HOLDING
IF THE ACCOUNT IS IN MORE THAN ONE NAME, SEE THE INSTRUCTIONS FOR LINE 1. ALSO SEE WHAT NAME AND NUMBER TO GIVE THE REQUESTER FOR GUIDELINES ON WHOSE NUMBER TO ENTER.
SOCIAL SECURITY NUMBER
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Under penalties of perjury, I certify that:
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☑ I am a U.S. citizen or other U.S. person (defined below)
☑ The FATCA code(s) entered on this form (if any) indicating that I am exempt from FATCA reporting is correct

* I re-certify that all the above information is still accurate and nothing has changed over the past month?
☐ Yes, The information is accurate 1
☐ No, my circumstances have changed and I need to edit the application 2

Edit Application

Instructions

1. Select ‘No’ to make edits in the application if your circumstances have changed
2. The Edit Application button will appear. Click on the button and you will be redirected to the application page

Key Points

If your circumstances have changed or the application is not accurate, then this option will enable you to update your application for the Grants Review team to process your future payments
Recertification

If you selected the option to edit your application, go through each Application Step to review and update your information accordingly.

Information will be auto-populated from your original application, so only information to be updated will need to be entered.

---

### Instructions

If you selected the option to edit your application, go through each Application Step to review and update your information accordingly.

Information will be auto-populated from your original application, so only information to be updated will need to be entered.

---

### Key Points

Information will be auto-populated from your original application, so only information to be updated will need to be entered.

---

<table>
<thead>
<tr>
<th>Instructions</th>
<th>Program Information</th>
<th>Application Step</th>
<th>Capacity Information</th>
<th>Information will be auto-populated from your original application, so only information to be updated will need to be entered.</th>
<th>Equity Adjustment</th>
<th>Attestation</th>
<th>Documentation</th>
<th>Banking Information</th>
<th>W9 Details</th>
<th>Review and Summary</th>
</tr>
</thead>
</table>

### Getting started with your grant application

Each program must complete an individual application to be considered for funding. There is no “one-site” alternative for this grant program.

Programs should complete the full application to request funds and then confirm or update application information each month to continue receiving monthly payments for six month duration. A summary of application timelines and the review process can be found here.

If you have trouble completing the application, use the Support link on the header of each page to get help.

### Who is Eligible for ARPA funds?

- All programs licensed by EEC as of March 11, 2021 and open (or in a temporary COVID-related closure that began after July 15, 2021) at the time of the application are eligible for this funding.
- Funded programs approved by EEC by March 11, 2021 and run by private schools that otherwise meet the conditions above will also be eligible for this funding.

### Completing the application

Once you determine you are eligible to apply, please begin the application. Prior to completing, subgrant funds may only be used for one or more of the purposes below. Please mark which categories you will support with the funding received from the subgrant:

- Personnel costs, benefits, premium pay, and recruitment and retention
- Rent or mortgage payments, utilities, facilities maintenance and improvements, or insurance
- Personal protective equipment, cleaning and sanitation supplies and services, or training and
- Professional development related to health and safety practices
- Purchases of or updates to equipment and supplies to respond to COVID-19
- Goods and services necessary to maintain or resume child care services
- Mental health supports for children and employees

To receive a stabilization grant I agree to use these funds only for the categories and purposes indicated on this application and have marked above which categories I plan to fund. Note: You can move funds between categories without prior approval.

I also understand that it is my responsibility to maintain records and other documentation to

---

### Need Support?

**Log a Ticket**

PHONE

800 (123 456)

EMAIL
Need Support?
1. Click **Support**
2. Upon clicking **Support**, you will navigate to the **Create New Ticket** Page

This Support link will remain in place throughout the application process.
Support – Create New Ticket

Instructions
1. Enter the required information
2. Click Submit Ticket

Key Points
All fields marked with an * must be completed
1. On the left side of every EEC ARPA Grants page, you will find **Log a Ticket**. Click **Log a Ticket**, to be redirected to the **Create New Ticket** page.
Support – Create New Ticket

Instructions

1. Enter the required information
2. Click **Submit Ticket**

Key Points

All fields marked with an * must be completed
# Support – All Tickets

## Instructions

1. Click the **All Tickets** tab to find the list of submitted tickets.
2. Click a Ticket Number to view its details.

## Key Points

- **Open Cases** are cases being worked on by the Support Team.
- **Closed Cases** have been resolved by the Support Team.
Support – All Tickets

1. View the Ticket Details
2. Click Back to all tickets to go back to the previous page

No key points
Appeal Form
Click [here](#), to raise an appeal. (You can see this link in several places while completing the application and its functionality remains the same)

If the Apply Today button is grayed-out, you can not apply for another grant until the in-progress application is granted. You may raise an appeal to overcome this barrier.
Appeal Form

Please check off the information that is being contested. Please describe the accurate information in the relevant check box and attach any documentation. If you are asking for different information to be considered, please describe what you would like considered in the text field and attach relevant documentation.

Select the below information on which you would like to Appeal?

- Eligibility
- Licensed Capacity
- Staff Information
- Equity
- I am in middle of my address change
- Other

I would like to submit additional information on the families my program serves to justify an equity adjustment.

Instructions

Select the Appeal from the Appeal Information checklist

Key Points

No key points
Appeal Form

1. Enter details about the correct information or special consideration being requested
2. To submit additional information on the families that your program serves to justify an equity adjustment, check the box
3. Provide the correct information
4. Click **Save and Next**

No key points
Appeal Form

Instructions

1. Click Upload Files
2. Select supported files

Key Points

No key points
Appeal Form

Instructions

Click **Start Upload**

Key Points

No key points
Appeal Form

Instructions

Click **Done** once the file gets uploaded

Key Points

No key points
**Appeal Form**

**Instructions**

Click **View Transcripts** to view or delete uploaded files.

**Key Points**

No key points.
Appeal Form

Upload Attachments

Note: Supported format for file are - pdf, docx, jpg, jpeg

1. Click **Hide Transcript** to hide the uploads
2. Click **View** for a quick view of the upload
3. Click **Delete** to remove the upload
4. Click **Submit**
THANK YOU

This Concludes the MA EEC Provider User Guide