



STEP 3: CHILD COUNT INFORMATION

1 Program Capacity

The first question is pre-filled and cannot be changed. *What is the licensed /registered/ permitted capacity of your program as noted on your license /registration/ permit?* If any of this information is not correct, please contact your licensor.

STEPS

- Instructions
- 1: General Applicant Information
- 2: Operational Status
- 3: Child Count Information**
- 4: Options for Use of Funds
- 5: Estimated Grant Award Amount
- 6: Payment Information
- 7: Review Application
- 8: Provider Attestations

3: CHILD COUNT INFORMATION

If any of this information is not correct, please contact your licensor. You will need to wait for the information to be updated before completing the application.

What is the licensed/registered/permitted capacity of your program as noted on your license/registration/permit? For legally-exempt group programs, this is the number of children who are enrolled who receive subsidy.

102

* Provider Statement: My estimated current monthly expenses are

If you need assistance in calculating your current monthly expenses, please reach out to your local CCR&R.

Child Care Resource Network
1000 Hertel Avenue Buffalo, 14216
erie-stabilization-grant@wnychildren.org
(716) 877-6666

2 Provider Statement

1. **Click on** and **enter the dollar amount** for: *My estimated current monthly expenses are.*

* Provider Statement: My estimated current monthly expenses are

Required

2. **Click on the Next** button to continue.

3 Monthly Expenses Cost Calculator

The following Budget Worksheet can be used to help calculate your monthly expenses.

RENT, MORTGAGE, UTILITIES

PAYROLL, BENEFITS

GOODS TO CONTINUE CHILD CARE

HEALTH & SAFETY TRAINING

PPE, CLEANING & SANITIZING SUPPLIES

EQUIPMENT RELATED TO COVID-19

FACILITY MAINTENANCE OF IMPROVEMENTS

MENTAL HEALTH SUPPORT FOR STAFF & CHILDREN

TOTAL ESTIMATED MONTHLY EXPENSES