

ATTACHMENT 1 **Voluntary Pre-Kindergarten Notification Requirements**

Early Learning Coalition of Seminole
239 Rinehart Road
Lake Mary, Florida 32746
Phone: 407-871-1101
Fax: 407-871-1100
donna@seminoleearlylearning.org

Seminole VPK Coordinator
3500 W. Colonial Drive
Orlando, Florida 32808
Phone: 407-532-4332
Fax: 407-522-2179
ediaz@4cflorida.org

Enrollment Specialist
307 W. First Street
Sanford, Florida 32771
Phone: 321-832-6407
Fax: 321-832-6431
mcampbel@4cflorida.org

VPK Parent/Guardian FEES AND OR CHARGES

The PROVIDER understands that, in accordance with section 1002.71(8)(a), Florida Statutes, the PROVIDER may not require payment of a fee or charge for services provided for a child in the VPK program during instructional hours reported for funding. The PROVIDER further understands that the PROVIDER may not require payment of fees or charge for services for a child who attends the VPK program outside the instructional hours unless that fee or charge is through an agreement for supplemental services (e.g., "extended-day," "extended-year," "wrap-around," or "full-day" services). The PROVIDER may not require a fee or payment as a condition of enrollment in the VPK program.

The PROVIDER understands that, in accordance with section 1002.71(8)(b), Florida Statutes, the PROVIDER may not require a child to enroll for, or require the payment of any fee or charge for, supplemental services (e.g., "extended-day," "extended-year," "wrap-around," or "full-day" services) as a condition of admitting the child in the VPK program.

Submission of Monthly Attendance / Reconciling Reimbursement Payments

Providers will receive monthly attendance forms for children whose Certificate of Eligibility (COE) have been received and entered in the EFS system before the 1st of month to enroll children in the VPK program. Attendance forms must be completed and sent by 12:30 PM on the third (3rd) of each month. Late submissions of COE or attendance forms may result in delay of payment. Providers are to maintain attendance verification for each child enrolled in the VPK program and keep on file for a minimum of 3 years.

The PROVIDER agrees to review the reimbursement summary provided by the Coalition or its contractor each month with the reimbursement check. Providers on prepayment must review and reconcile your actual payment to the prepayment report. PROVIDER agrees to report any discrepancy or underpayment within 30 days from the date the reimbursement was deposited or mailed.

Child Transfers (Item 40 VPK-20)

Transferring a child from one classroom to another

Transferring a child from one classroom to another requires the completion of the Informed Parental Consent for Provider Transfers and Class Transfers form. This must be submitted to the VPK Coordinator at the time of the transfer for accurate payment and submitted to the Enrollment Specialist **before** the 1st of the month.

Changes in Class Schedule (Item 42 VPK-20)

Once a Provider’s VPK class calendar is submitted and accepted by the VPK Coordinator, providers **are required** to notify the VPK Coordinator in writing with an explanation. The explanation must be accompanied by a new VPK–11 application of any changes in class schedule to be approved. The request must be sent within three (3) days of the occurrence.

Providers may offer more instructional hours than required; however, the Coalition will only accept calendars that contain exactly 540 hours for school-year and 300 hours for summer VPK Programs. Hours for each day of the program must divide evenly for the total number of days in the 540-hour school-year program or in the 300-hour summer program. Any calendar not reflecting full days will be returned to the provider for revisions. (Examples of UNACCEPTABLE calendar days are 133.66 days or days and ACCEPTABLE days are 135 days or 154 days).

Permanent Closure

At least thirty days before a provider permanently closes its VPK program, it must send a letter of intent to close to the Coalition or the Coalition’s designee. A letter of intent to close shall contain, at a minimum, a description of:

- The procedure the Provider intends to follow in notifying the parents of all affected children of the closure of the program and of its intent to ensure as little interference with the administration of the VPK program to the affected children as possible;
- Any and all efforts the Provider intends to make in placing or relocating all affected children; and
- The Provider’s plan to ensure that each of its obligations to the state, Coalition, Parents, and children are satisfied.

Providers shall consult with the Coalition’s VPK coordinator in establishing the required plans and procedures.

If a Provider receives unearned funds as the result of a permanent closure, the Provider shall return unearned funds to the Coalition or the Coalition’s designee. If the Provider fails to return unearned funds, the Coalition shall implement its debt collection processes against the Provider.

Signed and agreed to this _____ day of _____, 2009

Provider Signature	Print Name
Business Name	DCF License/Registration Number
Address	City/Zip
Phone/Fax	E-mail
Coalition Executive Director, Signature	Date