

VPK Provider Change Request Instructions

Step 1: Print the “VPK Provider Change Request Form”.

Step 2: Complete the sections as follows:

1. Please complete the entire top section, as this is required by state rule.

To: ELC Pinellas Fax: 548-1509	Provider Fax/E-mail: <u>Enter fax and email info</u>
Name of Facility: <u>ENTER YOUR SITE NAME</u>	EIN# <u>ENTER EIN #</u> EXT <u> </u>
Physical Address: <u>ENTIRE PHYSICAL ADDRESS (This is an AWI requirement)</u>	
<input type="checkbox"/> Lead Change <input type="checkbox"/> Aide Change <input type="checkbox"/> Substitute <input type="checkbox"/> Class Schedules <input type="checkbox"/> New Dir/Owner	
Check the appropriate box above to indicate the type of change(s) you are making	

2. For each classroom staff change, fill out a box as shown below:

Class ID <u>Enter Class ID A, B,... (from VPK11A)</u>
Name: <u>Staff Member's Name OR "Remove" if appropriate</u>
<input type="checkbox"/> Lead <input type="checkbox"/> Aide <input type="checkbox"/> Substitute
Check the box to indicate what position the change will effect.
Start Date: <u>Leave Blank</u> (unless date is more than 6 days in the future)
Replaces/Removes: <u>Name of person who is being replaced or removed</u>
End Date: <u>Leave Blank</u> (unless date is more than 6 days in the future)

- If you wish to remove a staff member, and not replace them, write REMOVE on the “Name” line. You will then list their name on the “Replaces/Removes” line.

- All Start and End Dates will ultimately be determined by the ELC based on date of approval. Please leave the dates BLANK, unless the desired start/end date is at least six days away.

- The approved start and end dates will be written on the Change Form when you receive your approval notification.

3. For any changes to hours/ calendar or to open/close a class, use the box below.

Class Schedules (Open New/ Close Class)
Requires new Calendar Calculator and VPK 11B to reflect:

<p>Class ID <u>Enter Class ID</u></p>	<p><input type="checkbox"/> Open New <input type="checkbox"/> Close</p> <p style="text-align: center; color: red; font-size: small;">Use if you are trying to open or close a class</p>
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Same Calendar as: _____

New Class Hours: New Start Time to New End Time

VPK school year schedules **must** equal 540 instructional hours and summer schedules 300 instructional hours.
Once a VPK program has begun, calendar changes will **only** be approved due to natural or building disasters.

Add the following VPK Instructional Dates:
Use for Calendar Change to indicate days you WILL offer VPK, that you previously were not.

Delete the following VPK Instructional Dates:
Use for Calendar Change to indicate days you WILL NOT offer VPK, that you previously were.

New Class Start Date: Enter Date New Class End Date: Enter Date

- Opening and Closing Classes. If opening a New Class, a Calendar Calculator showing 540

- Changing classroom hours of instruction (number of hours must remain the same)

- Changing Instructional vs. non-Instructional Days (after program has started, changes are not permitted except in special circumstances which must be approved by the coalition)

4. In cases of Director or Owner Changes, contact the Early Learning Coalition as soon as possible, as this may effect funding for School Readiness and VPK.

Director/Owner Changes
Requires new VPK 10 to reflect:

New Director: New Director's Name

Effective Date: Desired effective date Cert.#: Director Credential Certificate number

Issue Date: Credential Issue date Expiration Date: Credential Expiration date

New Owner: _____

Effective Date: _____

In the event of an ownership change, the Early Learning Coalition should be notified BEFORE it takes place. PLEASE CONTACT US ASAP for further instructions.

5. This section must be completed for all change requests as this is a state rule.

I have examined this application and, to the best of my knowledge and belief, the information provided is true and correct. If any of this information changes, I understand that the provider must submit updated information to the coalition, in writing, within 14 days of the change. I also understand that the provider is encouraged to submit updated information before a change is implemented as the provider may be out of compliance with the requirements of the VPK program if the changes are implemented before the coalition approves of the changes.

Please Note:

Locally, ELC Pinellas requires all changes to be approved prior to implementation in order to ensure reimbursement for VPK. Failure to do so will result in a loss of funding.

Reported By: _____ **Date:** Enter Date

Print Name: Print Your Name

Signature: Sign Your Name

This section must be completed on every change form, as this is a state VPK rule.

Step 3: Complete appropriate AWI-VPK Document

1. **VPK 10-** For changes in Director or Owner
2. **VPK 11A-** To change or add VPK Classroom staff (Lead, Aide, or Substitute)
 - a. You only need to list the information for staff being added to the VPK classrooms or who are taking on a new role.
3. **VPK 11B-** To change calendar or schedule

Step 4: Fax completed documents to your ELC-Provider Support Specialist @ 548-1509

- VPK Provider Change Request Form
- VPK documents (10,11A or 11B)
- Any applicable supporting documentation