

STATE OF FLORIDA
VOLUNTARY PREKINDERGARTEN EDUCATION PROGRAM
PROVIDER AGREEMENT ATTACHMENT 1 - NOTIFICATION REQUIREMENTS

The PROVIDER agrees to follow the requirements adopted by the COALITION for notification of changes to the AWI-VPK -10 and AWI-VPK-11A and B applications. It is requested that you use the appropriate attached cover sheets for changes to the AWI-VPK-10 and 11A and B. Specific forms are provided for your use as cover sheets for each application. All notification of changes to the AWI-VPK 10 and 11A and B applications must be submitted in writing within 14 days of the change or before the change is implemented as the provider may be out of compliance with the requirements of the VPK program if the changes are implemented before Family Central approves the changes. In addition, forms are provided to be used as cover sheets for Dismissal of a Child from a VPK Program, Class Transfer of Child At the Same Location, and Temporary Closure of a VPK Program and Permanent Closure of a VPK program. Notification of the timeframe to submit the cover sheet and documentation for these changes is specified on the cover sheet for each of these items. The COALITION may require the PROVIDER to submit corrective action plans for noncompliance under this Agreement. The PROVIDER's noncompliance with any term in this Agreement may result in the COALITION withholding funds.

SECTION VII. NOTIFICATION

- 29a. The PROVIDER agrees that it shall follow the notification requirements adopted by the COALITION for completing the class transfer of a child at the same provider location. (See Attachment 29a - Class Transfer of a Child at Same Location).
- 29b1. The PROVIDER agrees that it shall follow the notification requirements adopted by the COALITION for notifying the COALITION of all changes to information provided on Form *AWI-VPK-10*. (See Attachment 29b1 - Changes to AWI-VPK-10 Statewide Provider Registration Application).
- 29b2. The PROVIDER agrees that it shall follow the notification requirements adopted by the COALITION for notifying the COALITION of all changes to information provided on Form *AWI-VPK-11A*. (See Attachment 29b2 - Changes in to Class Registration Application – Instructors (AWI-VPK-11A) Lead, Assistant, and Substitute Instructors).
- 29c. The PROVIDER agrees that it shall follow the notification requirements adopted by the COALITION for notifying the COALITION of all changes to information provided on Form *AWI-VPK-11B*. (See Attachment 29c - Changes to Class Registration Application – Calendars (AWI-VPK-11B) Calendar/Deletions).
- 29d. The PROVIDER agrees that it shall follow the notification requirements adopted by the COALITION for submitting initial notification to Family Central before close of business on the first day of closure followed by notification of schedule modification no later than 2 business days following resumption of VPK instruction. (See Attachment 29d – Temporary Closure and Subsequent Reopening of the Provider's Site Which Is Beyond the Provider's Control).
- 29e. The PROVIDER certifies that, if it chooses to remove a student admitted to PROVIDER'S VPK class(es), PROVIDER will submit to COALITION documentation specifying reasons for removing the student in accordance with COALITION'S notification procedures. (See Attachment 29e – Dismissal of Child from the VPK Program).
- 29f. The PROVIDER agrees that it shall follow the notification requirements adopted by the COALITION for submitting written documentation demonstrating the permanent closure of the PROVIDER'S VPK site **prior** to the closure of the business. Prior to the permanent closure of the PROVIDER, it shall transfer all VPK records required to be maintained under paragraph 32 to the COALITION in a manner and form to be determined by the COALITION no later than the close of business on the day the PROVIDER ceases to offer the VPK program. (See Attachment 29f – Permanent Closure of the Provider's VPK Site).
- 30. PROVIDER understands that failure to follow the COALITION's notification requirements is noncompliance with this Agreement and may result in corrective action under Paragraph 41.

I agree to comply with the requirements stated above and comply with the use of the forms and their submission as listed in Attachment 1 and as directed on each form that is a part of the State of Florida Voluntary Prekindergarten Education Program Provider Agreement. I understand that if I fail to comply with the notification requirements that payment to my school may be impacted.

Provider Name: _____

Date _____

 Director/Owner Printed Name

 Director/Owner Signature