



Application Childcare Funding 2025/2026

Name: _____

Legal Business Name: _____ EIN/Tax#: _____

Address: _____

Address of Childcare location (if not above):

Phone Number: _____

Email: _____

Vermillion Childcare Start-up Fund request

This program supports the establishment of new childcare facilities (including in-home childcare providers) by offering a forgivable loan of up to \$10,000.

Please provide a detailed quote or estimate for start-up funds and how the funding will assist with the total cost if items that are to be purchased or project planned

\$ _____ Dollar amount requested

a. Forgivable Loan Terms:

1. The loan provided under this program is forgivable, meaning it does not need to be repaid if certain conditions are met.
2. The loan will be forgiven in full if the grant recipient successfully operates the childcare facility for a minimum period of 2 years.
3. Should the grant recipient cease operations or fail to meet the established criteria, a portion or the full amount of the loan may become repayable, subject to evaluation.

b. Eligibility Criteria / Competitive Process and Review:

1. The grant is open to individuals, organizations, or partnerships to establish new childcare facilities or expand existing operations in Vermillion, SD.
2. Applicants must provide a comprehensive proposal outlining their plans, including a budget, timeline, operational details, and the number of children the operation will support.
3. Applicants must operate at half capacity, which translates to six children unrelated to the provider, given that the capacity for a single in-home provider is twelve children.
4. Applicants must have a sales tax license and must operate for a minimum of two years.
5. In-home providers must register with the city.
6. We expect to have more than three applicants for the \$10,000 grant, so the process will be competitive. Applications will be evaluated based on the number of children they will provide care for, and projects that demonstrate a commitment to expanding capacity for childcare services, accessibility, and community impact will receive priority.
7. Vermillion Area Chamber & Development Board (VCDC) will review applications.

c. Reporting and Monitoring:

1. Grant recipients will be required to provide periodic progress reports to VCDC, outlining the utilization of funds and the status of the project or expansion.
2. VCDC may conduct site visits or request additional information to ensure compliance with the grant terms.

Explanation: Please describe how this assistance will help your business:

(please feel free to continue additional pages)

Disclaimer:

This institution, the Vermillion Area Chamber & Development Company, upholds and practices equal opportunity principles in all aspects. It does not and shall not discriminate based on race, color, religion (creed), gender, gender expression, age, national origin (ancestry), disability, marital status, sexual orientation, or military status in any of its activities or operations. This funding was provided as a gift from the Beyond Idea Grant Program of the South Dakota Community Foundation to the Mitchell Area Development Corporation.

By signing below, you acknowledge and agree to the following terms and conditions:

- 1. Consent for Use of Organization's Name and Photos: Vermillion Area Chamber & Development Company (VCDC) has the right to use your organization's name and associated photos in promotional material, including but not limited to print materials, online platforms, social media, and advertisements.**
- 2. Authorized Use of Promotional Material: You understand and acknowledge that the promotional material featuring your organization may be used for marketing, public relations, or other related purposes as deemed appropriate by VCDC.**
- 3. Grant of Rights: You grant VCDC the right to reproduce, distribute, display, and modify the promotional material without any compensation or further consent required.**
- 4. Receipts for Verification: As part of your agreement with VCDC, you agree to provide receipts as proof of purchase for any transactions or purchases related to the agreed-upon activities or initiatives. These receipts may be requested by VCDC for auditing, reporting, or verification purposes.**
- 5. Accuracy of Information: You acknowledge that any information shared or provided to VCDC in relation to this agreement is accurate and truthful to the best of your knowledge.**
- 6. Binding Agreement: You understand that this agreement is binding and will remain in effect unless terminated by VCDC in writing.**

By signing below, you indicate that you have read, understood, and agree to comply fully with the terms and conditions stated above.

Signature:_____

Date:_____