



FOR YOUTH DEVELOPMENT  
FOR HEALTHY LIVING  
FOR SOCIAL RESPONSIBILITY

## YMCA CHILDCARE RESOURCE SERVICE

### ***2023-2024 Health & Safety Training Grant***

## **APPLICATION GUIDELINES**

YMCA Childcare Resource Service (CRS) has received funds to support childcare providers with the cost of the Health and Safety training courses as outlined in AB243. Eligible participants will receive Training Access Codes via email that will partially cover the cost of CPR, First Aid and Preventive Health Practices courses when presented to an approved trainer. Grant money is limited. Therefore, training Access Codes will be awarded to qualified participants, as funding allows.

#### **Health & Safety Training Grant Eligibility Is Open To:**

- Licensed and potential family childcare providers: Currently licensed or in the process of obtaining the license to provide care in provider's own home.
- Licensed or license-exempt center-based staff: Working at a childcare center that is either licensed or legally license-exempt.
- License-exempt childcare providers (Trustline): Caring for children of one family on a childcare subsidy program.
- In-home childcare providers (Trustline): Caring for a child at the child's home and provider has been fingerprinted through Trustline.

#### **To Receive Training Access Codes, Follow Three Steps:**

##### **1. Read the Guidelines page and thoroughly complete the application**

- Read the *Application Guidelines* thoroughly.
- Do not print and hand write the application. Instead, complete the form electronically and send it via email to [Health-SafetyGrant@ymcasd.org](mailto:Health-SafetyGrant@ymcasd.org)
- **The YMCA must receive the completed Application by June 3, 2024.**

##### **2. Enroll In Class**

- Contact the Emergency Medical Systems, (EMSA) training class instructor prior to the training date. Be sure to let the trainer know you need training classes for childcare providers. Class must be taught by an EMSA approved training agency.

**Note:** Providers must take the health & Safety training classes from an EMSA approved training agency/trainer contracted with CRS. A list of approved trainers will be provided to qualified applicants.

##### **3. Attend the Class**

- Present your trainer with the Training Access Code assigned to you, on the day of class.



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**Note:** Trainer may require full or partial payment upfront to hold a spot in the class. If participant paid for the class in advance, the trainer will reimburse the difference after submitting the Training Access Code.

- CRS cannot mediate payment disputes between trainer and participant.
- Participant must attend the entire training hours for each class:
  - CPR: 4 hours
  - First Aid: 4 hours
  - Preventative Health Practices: 8 hours
- Course completion cards will be issued at the end of class or will be mailed to participants by the trainer, not CRS.
- CRS does not recommend or regulate training agencies as trainers are not employees of CRS.
- Course content approval and guidelines are the sole responsibility of the Emergency Medical Services Authority (EMSA).

#### **The Training Access Codes:**

- Will be sent via email from [Health-SafetyGrant@ymcasd.org](mailto:Health-SafetyGrant@ymcasd.org)
- Must be used within 60 days of the issued date.
- Are not transferable for any reason.
- Not used by the expiration date, are void.

Correctly completed applications will be processed within two weeks from date of receipt and/or once the funds are available to YMCA CRS. **Training Access Codes are issued on a first come, first served basis, as funding allows.**

For questions, contact Sandra at [health-safetygrant@ymcasd.org](mailto:health-safetygrant@ymcasd.org) or 619-837-8120.



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## YMCA CHILDCARE RESOURCE SERVICE

### 2023-2024 Health & Safety Training Grant APPLICATION

Before completing this application, read page 1, the *Application Guidelines*. Submit one application per applicant.  
**The YMCA must receive the completed application by 6/3/2024.**

**This form must be completed electronically (not handwritten).**

**Incomplete and/or not legible applications will not be processed and will be returned to the applicant.**

**Applicant's Contact Information** (Must reside in San Diego County)

First & Last Name:	Telephone:
Home Address: <small>Include Apt/Unit #, City &amp; Zip Code</small>	Email: Work Email:

**Complete ONLY ONE of the three sections below; the one that applies to the applicant.**

**1 Family Child Care:**  License Pending; in the process of obtaining license and attended the Licensing Orientation

If already licensed, the license capacity is for a:  Small License (6-8 children)  Large License (12-14 children)

My position at the Family Child Care:  Licensee  Co-licensee  Assistant

Licensee Name:	Licensee Telephone:
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**2 Child Care Center:**  Licensed Center  License Exempt Center

My Title at the School/Center:  Director  Assistant Director  School Site Supervisor  Teacher  
Before/After School Program Only

Employer: School/Center Name:	Telephone:
School/Center Address: <small>Include Suite #, City &amp; Zip Code</small>	
Director's Name:	Director's Email:
No. of classrooms currently in use:	No. of staff at the school/center:

**3 Trustline Provider:**  In-home Provider  License-exempt Provider

Employer Name:	Telephone:
Address:	

**Training Access Codes needed for the following courses (check all that apply):**

**Note:** Training Access Codes are only valid for in-person training.

- CPR  First Aid  Preventive Health Practices

*I have read and understand the Health & Safety Training Grant Application Guidelines.*

Applicant Signature:	Date:
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