Ready for VPK 23-24!
Agenda

• VPK Assessment
• Completing the VPK Contract
• Completing the VPK App
• Questions
VPK Contract
After the coalition has initiated a VPK contract, the user will navigate to **Contracts > Manage Contracts** from the Provider Dashboard.

The manage contract page displays. Click the **Edit** button for the initiated OEL-VPK 20.
VII COMPENSATION AND FUNDING

School Year Program

Select

Select

PROVIDER elects to receive monthly advance payments for the school year program.
PROVIDER elects not to receive monthly advance payments for the school year program.
PROVIDER does not intend to offer the school year program.

Summer Program

Select

Select

PROVIDER elects to receive monthly advance payments for the summer program.
PROVIDER elects not to receive monthly advance payments for the summer program.
PROVIDER does not intend to offer the summer program.
Exhibit 1: Provider Location List Attachment

After clicking the Next Step button, the following displays. Select the School Year and/or Summer checkbox if the session is offered. Click Next Step to continue.
Contract Execution
To electronically sign the contract, click the **By Electronic Signature** checkbox.

**NOTE FOR PUBLIC SCHOOLS:** If a school board or school district needs to manually sign a contract, it can be downloaded as a .pdf and printed.
After clicking the **Yes** button, the electronic signature of the signatory, printed name, title, and the date/time will populate, highlighted in yellow. Click **Next Step** to continue.

**NOTE:** The electronic signature and printed name of the user is based on the user who is logged on to the portal. Please ensure that the proper user is logged on to electronically sign the contract. If the incorrect name is used for the electronic signature, the checkbox can be un-checked.
STATE OF FLORIDA
STATEWIDE VOLUNTARY PREKINDERGARTEN PROVIDER CONTRACT
FORM C6L VPK 20

I.

XV. EXECUTION OF CONTRACT

<table>
<thead>
<tr>
<th>Signature of President/President/Secretary/Principal/Other Authorized Representative</th>
<th>Print Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>By Electronic Signature</td>
<td></td>
</tr>
</tbody>
</table>

Title

Provider's Additional Signature (if required by the Provider)

<table>
<thead>
<tr>
<th>Print Name</th>
</tr>
</thead>
</table>

Title

Provider's Additional Signature (if required by the Provider)

<table>
<thead>
<tr>
<th>Print Name</th>
</tr>
</thead>
</table>

Title

COALITION has caused this Contract to be executed as of the date set forth in Paragraph 1.

<table>
<thead>
<tr>
<th>Signature of Authorized Coalition Representative</th>
<th>Print Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>By Electronic Signature</td>
<td></td>
</tr>
</tbody>
</table>

Title

Date
Contract Certification

After clicking the **Next Step** button, the following will display. Enter the full name of the user who is logged on, title, and click the **Certified by electronic signature** checkbox. Click **Submit**.
After clicking the **Submit** button, the following message will display and an email will be sent by **DONOTREPLY@OEL.myflorida.com**.

<table>
<thead>
<tr>
<th>© You Have Successfully Completed, Signed, Certified and Submitted your Statewide VPK Provider Contract!</th>
</tr>
</thead>
<tbody>
<tr>
<td>Your early learning coalition will review and process your contract.</td>
</tr>
<tr>
<td>You may not offer VPK services until you have received notification that your contract has been approved and fully executed by your coalition.</td>
</tr>
<tr>
<td>Please check your email for important information regarding your contract.</td>
</tr>
</tbody>
</table>

You can click on the button below to return to your home page.

[Go to home page](#)
Questions?
VPK-APP
The VPK-APP replaces forms OEL-VPK 10 (Provider Application), OEL-VPK 11A (Class Registration – Instructors), and OEL-VPK 11B (Class Registration – Calendars). The tabs must be done in order of appearance (Attendance Policy, then VPK Director, etc.); the answers in one tab populate information in the next tab.

After the coalition has initiated the provider application, the Provider Portal user will click Manage Contracts from the Provider Dashboard.
The following will display. Click the **Edit** button to review the contract.

<table>
<thead>
<tr>
<th>Action</th>
<th>View Contract</th>
<th>Start Date</th>
<th>End Date</th>
<th>Termination Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>Edit</td>
<td></td>
<td>7/1/2017</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Manage contracts for Jimini & the Monitor**  
**1 total records**

**Children's Services**
Step 1 – Attendance Policy

The Attendance Policy tab allows the Provider Portal user to upload the provider Attendance Policy. The document that is to be distributed to parents must be uploaded by clicking the Browse button, finding the document in the electronic files and clicking the Upload button.
Step 2 – VPK Director

The VPK Director tab allows the Provider Portal user to add information and upload documents for the primary VPK Director that will be listed on the OEL-VPK 10. Click the **Add New Director** button to begin.

Click the **Save** button after all information is entered for the director.
NOTE: The Credential Type, Credential Certificate Number, Credential Issue Date, and Credential Expiration Date will not appear for public schools.
Requirements for VPK Directors

• ALL VPK Directors must take the required classes to achieve an endorsement before App will be certified
• Implementing the Florida Standards in Preschool Classrooms: 3 Years old to Kindergarten
• Emergent Literacy for VPK Instructors
• Mathematical Thinking for Early Learners
• Language and Vocabulary in the VPK Classroom
• VPK Director Credential Course
Once the VPK Director is added, the supporting documents may be added by clicking Edit.
The Provider Portal user will select the document type, browse to select a file, enter the document issue or expiration date (if applicable), and click **Upload**. Then, click **Save**. At least one document should be uploaded.
Step 3 – VPK Instructors

The VPK Instructors tab allows the Provider Portal user to add information and upload documents for each instructor. Click the **Add New Instructor** button to begin.
Click the **Save** button after all information is entered for each instructor.
Requirements for Lead VPK Teachers

• 15 hours of emergent literacy training - Transcript must say YES

<table>
<thead>
<tr>
<th>EMERGENT LITERACY REQUIREMENT</th>
<th>Effective Date</th>
<th>Expiration Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>VPK Instructor Emergent Literacy Course Requirement has been completed, Yes</td>
<td>04/13/2022</td>
<td>04/13/2027</td>
</tr>
</tbody>
</table>

• Implementing the Florida Standards in Preschool Classrooms; 3 Years Old to Kindergarten

• Must be uploaded to the VPK Instructors tab before app will be certified

• If lead does not have the emergent literacy requirements completed, cannot be assigned to a VPK classroom as a lead
Background Screening- All Staff

• Expires every 5 years
• Must have teacher's legal name
  • If name differs on other documents proof of name change must be uploaded
• Items below must be marked Eligible
  • DCF General
  • DCF Child Care
  • DCF Substance Abuse

Retained Prints Expiration Date: 11/21/2023
Clearinghouse Screening Available?: Yes

Department of Children and Families Eligibility

The Department has reviewed child welfare records for the State of Florida. This search was conducted in Florida’s Automated Child Welfare Information System (SACWIS).

✓ There is no record of the applicant being listed as the caregiver responsible for a verified finding of abuse, abandonment or neglect of a child.
The individual may request additional information pursuant to s.39.202, Florida Statutes.

<table>
<thead>
<tr>
<th>Item</th>
<th>Status</th>
<th>Eligibility Determination Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>DCF General</td>
<td>Eligible</td>
<td>10/25/2019</td>
</tr>
<tr>
<td>DCF Child Care</td>
<td>Eligible</td>
<td>10/25/2019</td>
</tr>
<tr>
<td>DCF Substance Abuse - Adult Only</td>
<td>Eligible</td>
<td>10/25/2019</td>
</tr>
</tbody>
</table>
Good Moral Character- All Staff

CHILD CARE
ATTESTATION OF GOOD MORAL CHARACTER

State of Florida

Teacher Name: 
Center DBA: 

County of: 

I, , as an applicant for employment with an employer, an employee of, or a volunteer for, or an applicant to

assist with child care, do solemnly and truly affirm and declare under penalty of perjury that I meet the moral character requirements for employment, as required by Chapter 415 Florida Statutes, in that

I have not had a final dispositional finding of guilt, regardless of adjudication, or as a result of adjudicatory proceedings, or as a result of a plea of nolo contendere or guilty, or as a result of a adjudicatory finding of delinquency, and the record has not been sealed or expunged, for any offense prohibited under any of the following provisions of the Florida Statutes or under any similar statute of another jurisdiction;

RELATING TO:

sexual misconduct with certain developmentally disabled clients and reporting of such sexual misconduct
sexual misconduct with certain mentally ill patients and reporting of such sexual misconduct
adult abuse, neglect, or exploitation of adults persons or disabled adults or failure to report such abuse

I have not been convicted of, or given a deferred prosecution, or given a suspended sentence, or given a withhold of sentence, or given probation, for any of the offenses listed below:

RELATING TO:

sexual misconduct in juvenile justice programs
contribution introduced into detention facilities

I understand that I must acknowledge the existence of any applicable criminal record relating to the above listed offenses including those under any similar statute of another jurisdiction, regardless of whether or not the records have been sealed or expunged. Further, I understand that, while employed or volunteering in any position that requires background screening as a condition of employment, I must immediately notify my supervisor/employer of any arrest and any changes in my criminal record involving any of the above listed offenses or similar crimes in another jurisdiction whether a misdemeanor or felony. This notice must be made within a business day of such arrest or charge. Failure to do so could be grounds for termination.

I attest that I have read the above carefully and state that my attestation here is true and correct that my record does not contain any of the above listed offenses. I understand, under penalty of perjury, all employees in such positions of trust or responsibility shall attest to meeting the requirements for fulfilling for employment and agreeing to inform the employer immediately if arrested for any of the disqualifying offenses. I also understand that it is my responsibility to obtain clarification on anything contained in this affidavit which I do not understand prior to signing. I am aware that any misrepresentations or misrepresentations or misrepresentations may disqualify me from employment consideration and, if I am hired, may be grounds for termination of my employment at a later date.

DATE: 

SIGN ABOVE OR BELOW, DO NOT SIGN BOTH LINES

the best of my knowledge and belief, my record contains one or more of the applicable disqualifying acts or offenses listed above. I have placed check mark by the offense(s) contained in my record. (If you have previously been granted an exemption for this disqualifying offense, please attach a copy of the letter granting such exemption.) (Please circle the number which corresponds to the offense(s) contained in your record.)

DATE: 
Once the VPK Instructor is added, the supporting documents may be added by clicking **Edit**.

The Provider Portal user will select the document type, browse to select a file, enter the document issue or expiration date (if applicable), and click **Upload**. Then, click **Save**. At least one document should be uploaded.

**NOTE:** If a VPK Instructor achieves new certifications and moves from a sub to an aide, create a new record for that Instructor. If the Instructor Type is only changed from sub to aide, the maximum class size will not increase to 20 in a class that already has a Lead Instructor.
Step 4 – VPK Calendars

The VPK Calendars tab allows the Provider Portal user to provide information regarding each unique class calendar which will be offered at the VPK site. If classes are offered at identical times on identical dates, they utilize the same class calendar (e.g., all classes are scheduled from 8:00am to 11:00am, Monday through Friday, starting on January 11). If classes are not offered at identical times on identical dates, they utilize unique class calendars which must be created separately. Click the Add New Calendar button to begin.
The Calendar ID will automatically populate with a letter beginning with A. Each additional calendar will receive a sequential Calendar ID.

The Calendar Name is an optional field. It may be used for a short nickname such as “Fall AM.”

The program type selection of School-Year (540 hours) or Summer (300 hours) is required. The program selected will determine the valid calendar date range. The Calendar Start Date and Calendar End Date must be within the valid calendar date range. The Calendar Start Date and Calendar End Dates should reflect the first day VPK instruction will be delivered and the final day VPK instruction will be delivered.

Next, the instructional days, start time and end time must be added by checking the box by the days of the week that VPK instruction will be delivered and entering the times of VPK instruction for the days of the week that VPK instruction will be delivered.
After the instructional days, start time and end time are added, the Total Calculated Hours and Total VPK Instructional Days sections will populate.

Providers are to use the calendar to note any non-instructional days on which VPK instruction will not be delivered (such as vacations or holidays) and exceptions to normal instructional days that occur during the defined calendar start and end date. Entering Non-Instructional Days and Instructional Day Exceptions can increase or decrease the Total Calculated Hours.
For example, if the Total Calculated Hours exceed 300 hours for the summer program type or 540 hours for the school-year program type (as shown in the example above), the user may remove a day (or more) by labeling it a Non-Instructional Day. Each Non-Instructional Day entered will deduct the hours assigned to that day, thereby decreasing the Total Calculated Hours. Instructional Day Exceptions can be used to change the hours assigned to that day (to increase or decrease the hours). For example, if the calendar is a few hours short, an instructional day’s hours may be extended to increase the Total Calculated Hours. To add a Non-Instructional Day or an Instructional Day Exception to the calendar, click on that date on the calendar. Multiple days can be selected by clicking and dragging across multiple days on the calendar.
After clicking on a date, a pop-up message will appear. The Provider Portal user must select the Event Type and enter a short description. When an Instructional Day Exception is selected, the user must also enter the time range for the day.

Click the **Update** button to save changes. Click the **Remove** button to remove an existing Non-Instructional Day or Instructional Day Exception created on the calendar.
When the Total Calculated Hours match the hours for the VPK program type, the user will click the **Save** button.
Step 5 – VPK Class(es)

The VPK Class(es) tab allows the Provider Portal user to build VPK classes and assign instructor(s) to them. Click the Add New Class button to begin.
The Class ID will automatically populate after the Class Calendar is selected. The Class ID is created using a sequential letter beginning with A. In the second space, either an “F” for school-year (fall) or “S” for summer will appear. The F and S is derived from the calendar’s program type. The last two digits represent the last two numbers of the program year. Each additional class will receive a sequential Class ID.

The Class Name is an optional field. It may be used for a short nickname such as “Blue Room.”

The Main Curriculum drop down is populated with selections made from the provider’s profile.

The Class Start Date and Class End Date are populated with the Calendar Start Date and End Date.

The Instructors are populated with individuals from the VPK Instructors tab. Check the checkbox in front of the instructor to add them to the class, then enter the Instruction Start Date. If the class has not started, the Instruction Start Date defaults to the Class Start Date. For each class, one Lead Instructor must be selected. Click the Save button after all information is entered for each class.
Step 6 – Review

During the review process, the Provider Portal user can click the Edit button to make any changes to a section. After reviewing the information for each section, the user must click the Certify and Submit tab button to continue.
Step 7 – Certify and Submit

To submit the VPK-APP, the Signer’s Name must exactly match the name entered in the Provider Profile, the Provider Portal user must fill in the phone number, check the “Check box to certify by electronic signature” check box and click the Submit VPK Provider Application button.
You Have Successfully Completed and Submitted your VPK Provider Application!

Congratulations, you have successfully submitted your VPK Provider application.
Your early learning coalition will process your application.
Please check your email for important information about your application.

From here you can:

- Return to dashboard
- Log off
Questions?

Brenda.Griffin@elcofswfl.org
Grant.Thompson@elcofswfl.org