

progress of the grantee, and a determination that continued funding would be in the best interest of the government.

E. Funding Levels and Maximum Federal Share

The Child Care Bureau intends to commit a maximum of \$1.5 million and the Office of the Assistant Secretary of Planning and Evaluation intends to commit a maximum of \$400,000 for a total of \$1.9 million for the first year and each subsequent year of the award, for a maximum total of \$7.6 million. The maximum Federal share is 90 percent of total project costs.

F. Matching Requirements

Non-Federal matching funds of at least 10 percent of total project costs will be required. The total approved project cost is the sum of the Federal share and the non-Federal share. Therefore, a project requesting \$1,900,000 in Federal funds must include a match of at least \$211,111 for a total project cost of \$2,111,111. (To compute the non-Federal share divide the Federal share by .90 and subtract the Federal share from that amount.) Applicants are strongly encouraged to contribute additional cash or in-kind resources.

Applicants are encouraged to offer funding partnerships that significantly extend the scope and reach of the project. For example, the applicant might include a partnership with an organization that has funding to provide child care provider training. Applicants should provide letters of commitment from organizations or agencies verifying the actual amount of non-Federal support to the project.

Grantees will be held accountable for commitments of non-Federal resources even if these exceed the amount of the required match. Failure to provide the amount will result in disallowance of Federal match.

G. Federal Role

A cooperative agreement is Federal assistance in which substantial Federal involvement in project activities is anticipated. Responsibilities of Federal staff and the successful applicant are negotiated prior to award. The Bureau and the grantee funded under this priority area will work collaboratively to facilitate accomplishment of project goals, including development of the final technical approach and study design, selection of core measures, and the establishment of the Steering Committee and Technical Work Group. The Bureau will also facilitate

collaboration with other research grantees and contractors.

H. Project Description

The cooperative agreement under this priority area will support a multi-year research initiative to design, implement, manage, and coordinate the evaluation of a child care provider training model under varying conditions. A "promising model" is defined as one with at least preliminary evidence of effectiveness in small-scale interventions or for which there is potential for generating data that will be useful for making decisions about taking the intervention to scale and generalizing the results to diverse populations and settings. Provider populations of interest include family home providers, informal care providers (such as family, friends and neighbors), and center staff who are entry-level or have minimal qualifications.

The training model should include one or more focal areas such as supporting children's development in specific domains, promoting positive outcomes in linguistically or culturally diverse populations, or managing children's behavior. A promising model might be tested in different geographic locations; among providers of differing social, economic, educational, or cultural characteristics; or with providers who serve children and families with special characteristics and needs. Where a single training model would be used, variations in the delivery of training might be included in the evaluation.

The Child Care Bureau is especially interested in training models that promote excellence among providers who serve children and families with special needs and challenges. Examples include (1) infants and toddlers; (2) families eligible for assistance through the Child Care and Development Fund and related State and Federal funding sources; (3) ethnic and language minority groups; (4) children with disabilities; and (5) other groups that may present special challenges or needs.

The cooperative agreement will be awarded to an organization acting as evaluation coordinator (grantee), which will select three-to-four study sites according to the project design. Site selection will be finalized with input from the Child Care Bureau. The evaluation coordinator will provide project direction, support, and coordination across sites. This structure is intended to facilitate the sharing of ideas, measures, data, and other specialized resources as well as collection of core data elements across study sites.

The evaluation coordinator will detail the specific roles of the evaluation coordinator in carrying out the proposed design, in managing the project, and in coordinating with the Child Care Bureau and other partners in the project. At least one study site will utilize a randomized controlled design in order to explore cause and effect relationships between the training model and child outcomes. Applicants should propose a preliminary list of study sites and describe the training intervention. The application should include letters of commitment from individuals representing the various study sites.

Funds will be provided under this cooperative agreement for research design, implementation fidelity, data collection, and analysis. Funding and delivery of the training intervention must be accomplished through a partnership with a State or local service partner. The intervention may be funded with CCDF quality funds, Early Learning Opportunity Act discretionary grants, or other funds as appropriate.

The evaluation coordinator will establish an advisory committee or technical work group with input from the Child Care Bureau. In consultation with this group, the evaluation coordinator will provide guidance and direction on decisions regarding the training intervention; design and methodology of the coordinated research study; selection of core measures and instruments; collection and analysis of core data; and preparation and reporting of findings from the integrated research study. The evaluation coordinator will provide technical support to the individual study sites on the training intervention; provide logistical support for meetings; and make materials available for the collection of core data across projects.

Each of the individual study sites will be responsible for the development, implementation and maintenance of the intervention. However, the evaluation coordinator will provide pre- and post-intervention direction related to data collection, the analysis of a core set of common cross-site baseline measures, and collection of family and child outcome data. The grantee will be responsible for ensuring implementation fidelity and data quality. Timely cross-site data will be returned to individual project researchers to serve as a basis for local analyses. Additional collection of data on specific measures used in the local sites may be carried out by the individual projects using project funds.

Each individual study site will ensure that training is delivered to the target population as proposed, and that core