

**Infant Toddler Contracted Slots**

**ELRC Collaboration Plan Sample**

<b>Assigned Infant Toddler Specialist:</b>
<b>Date of CCW Provider Agreement with the ELRC:</b>
<b>Main Point of Contact for ITCS Eligibility at the ELRC*:</b>  <b>Secondary Point of Contact for ITCS Eligibility at the ELRC:</b>  <b>Point of Contact for ITCS Fiscal Reporting at the ELRC:</b>  <b>Assigned STARS Quality Coach:</b>  Please include telephone numbers and email addresses. If you anticipate enrolling families with eligibility in more than one ELRC region, please include the contact information for all relevant ELRCs.
<b>Main Point of Contact for ITCS Eligibility at the Program*:</b>  <b>Secondary Point of Contact for ITCS Eligibility at the Program:</b>  <b>Point of Contact for Fiscal Reporting at the Program:</b>  Please include telephone numbers and email addresses.
<b>Describe the process for referring a family to the ELRC to determine eligibility for the program. Please include a reference to any specific forms or written communication.</b>
<b>Describe the process and timeline for informing the ELRC of ITCS transitions, vacancies or unenrollment in ITCS funding.</b>

**Describe how the program meets the requirement to fill vacancies within 20 program days. Include strategies for coordinating with the ELRC and Infant Toddler Specialist in the process.**

**Families meeting subsidy eligibility in another ELRC region but desiring childcare enrollment within an ELRC region providing ITCS programs, are eligible for funding. ELRC regions must collaborate when enrolling such families. Describe how the program might work with the relevant ELRCs in this circumstance.**

**Describe the process for meeting with families to complete the Pre-K Intent Form and sharing the Pre-K Intent Form with the relevant ELRC and Infant Toddler Specialist.**

**Additional Notes:**

**\*Contact Information must be updated and shared within 5 business days of a change.**