

Call for proposals dedicated to First Nations and Inuit

FOR THE APPLICANT

- Read the information in the *Guide for Applicants for Subsidized Educational Childcare Spaces* before completing the form.
- In section 1, please make sure to check off the method of filing your application: Regular application or Notice of interest.
- For notices of interest, please provide all the information requested, based on the information available to you.
- Complete the form online and register it.
- Do not write in the spaces reserved for the Ministère de la Famille.

Reserved for the ministère de la Famille

Section 1 – Information on the applicant (mandatory section)

CPE spaces  Subsidized day care spaces  Regular application  Notice of interest

1.1 Name and contact information of the business making the application, hereafter the “applicant” (legal person or natural person)

Name of the business (legal person or natural person registered in the Québec Enterprise Register or band council):

Québec Enterprise Register (NEQ) number:

Address (number, street):

City or town:	Province:	Postal code:
Phone:	Fax:	
Email:		

1.2 Name and contact information of the person to contact concerning the application

<input type="checkbox"/> Ms. <input type="checkbox"/> M.	Last name:	First name:
Tel.:	Ext.:	2nd phone: Ext.:
Email:		

1.3 Summary of applications sent to the Ministère

Specify the number of applications for subsidized spaces you are submitting with regard to this call for proposals:

One application  More than one application

Municipality or community	Municipality or community

1.4 Other permits

Are you or is a shareholder or a director of your business the holder of a permit issued under the Educational Childcare Act ?

Yes  No

If so, please indicate below the division and facility number(s) of these childcare centres:

Division no.:	Division no.:	Division no.:	Division no.:
Facility no.:	Facility no.:	Facility no.:	Facility no.:

1.5 Portrait of the directors and shareholders (legal person only)

DIRECTORS AND SHAREHOLDERS (legal person)

Name the business’s natural person directors and shareholders (\*with or without voting right)

<input type="checkbox"/> Ms. <input type="checkbox"/> M.	Last name:	First name:
Address (number, street):		
City or town:	Province:	Postal code:
Phone:	Email:	
Role: <input type="checkbox"/> Dir. <input type="checkbox"/> SH	Date of start of term (if director)	% of shares with voting right (as applicable)
<input type="checkbox"/> Ms. <input type="checkbox"/> M.	Last name:	First name:
Address (number, street):		

**1.5 Portrait of the directors and shareholders (legal person only) (continued)**

**DIRECTORS AND SHAREHOLDERS (legal person only) (continued)**

City or town:	Province :	Postal code:
Phone:	Email:	
Role : <input type="checkbox"/> Dir. <input type="checkbox"/> SH	Date of start of term (if director)	% of shares with voting right (as applicable)

Name the business's natural person directors and shareholders (\*with or without voting right)

<input type="checkbox"/> Ms. <input type="checkbox"/> M.	Last name:	First name:
Address (number, street):		
City or town:	Province :	Postal code:
Phone:	Email:	
Role : <input type="checkbox"/> Dir. <input type="checkbox"/> SH	Date of start of term (if director)	% of shares with voting right (as applicable)

<input type="checkbox"/> Ms. <input type="checkbox"/> M.	Last name:	First name:
Address (number, street):		
City or town:	Province :	Postal code:
Phone:	Email:	
Role : <input type="checkbox"/> Dir. <input type="checkbox"/> SH	Date of start of term (if director)	% of shares with voting right (as applicable)

Name each of the business's legal persons and trust shareholders

**IMPORTANT** – For each legal person registered, complete **section 1.6**

Last name:	First name:	Type :
Address (number, street):		
City or town:	Province :	Postal code: % of shares with voting right

Last name:	First name:	Type :
Address (number, street):		
City or town:	Province :	Postal code: % of shares with voting right

Last name:	First name:	Type :
Address (number, street):		
City or town:	Province :	Postal code: % of shares with voting right

**1.6 Portrait of the business's legal person shareholder who is making the application, as applicable:**

If you have registered a legal person, name each of this legal person's directors and shareholders.

Name of the legal person this portrait pertains to:	Québec Enterprise Number (NEQ):
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Name the business's natural person directors and shareholders\* (\*with or without voting right)

<input type="checkbox"/> Ms. <input type="checkbox"/> M.	Last name:	First name:
Address (number, street):		
City or town:	Province :	Postal code:
Phone:	Email:	<input type="checkbox"/> Dir. <input type="checkbox"/> SH % of shares with voting right (as applicable)

<input type="checkbox"/> Ms. <input type="checkbox"/> M.	Last name:	First name:
Address (number, street):		
City or town:	Province :	Postal code:
Phone:	Email:	<input type="checkbox"/> Dir. <input type="checkbox"/> SH % of shares with voting right (as applicable)

<input type="checkbox"/> Ms. <input type="checkbox"/> M.	Last name:	First name:
Address (number, street):		
City or town:	Province :	Postal code:
Phone:	Email:	<input type="checkbox"/> Dir. <input type="checkbox"/> SH % of shares with voting right (as applicable)

<input type="checkbox"/> Ms. <input type="checkbox"/> M.	Last name:	First name:
Address (number, street):		
City or town:	Province :	Postal code:
Phone:	Email:	<input type="checkbox"/> Dir. <input type="checkbox"/> SH % of shares with voting right (as applicable)

**1.6 Portrait of the business's legal person shareholder who is making the application, as applicable (continued)**

Name each of the business's legal persons and trust shareholders

**IMPORTANT** – For each legal person registered, complete **section 1.6**

Last name:	First name:	Type :	
Address (number, street):			
City or town:	Province :	Postal code:	% of shares with voting right
Last name:	First name:	Type :	
Address (number, street):			
City or town:	Province :	Postal code:	% of shares with voting right
Last name:	First name:	Type :	
Address (number, street):			
City or town:	Province :	Postal code:	% of shares with voting right

As required, you will find other pages on the Ministère de la Famille website in order to complete the **portrait of the business's legal person shareholder who is making the application**.

**Section 2 – Information on the proposal (mandatory for Regular application and Notice of interest)**

Read section 4.2 Information on the project on page 14 of the *Guide for Applicants for Subsidized Educational Childcare Spaces*.

**2.1 Name and contact information of the facility where children will be accommodated**

Name of the facility:	
Municipality or community where the facility is located:	
Neighbourhood or area where the facility is located (as applicable):	
Address of the facility (number, street, apartment) if known:	
Division number (if known):	Facility number (if known):

**2.2 Number of spaces requested**

	For current permit holders only Number of existing spaces as indicated on your permit	Number of spaces requested
Children under 18 months of age (babies)		
Children 18 months of age or older		
<b>Total</b>		

**2.3 Description of the business proposal**

Describe your business proposal, including the educational program to be applied, the educational approach to be used and the childcare services you wish to implement.

On the Ministère's website, see the [reference sheet](#) with information on the desired components of an educational program:

## Section 2 – Information on the proposal (continued)

### 2.3 Description of the business proposal (continued)

Interaction between the educator staff and the children:

Structuring and layout of the premises:

Structuring and diversity of activities for the children:

Interaction between the educator staff and parents:

Please tick off the situation that best describes the outdoor play space of the facility for which the application is being made.

- The outdoor play space is adjacent to the facility.  
 The outdoor play space is in a public park less than 500 m from the facility (please give the park's name): \_\_\_\_\_

Describe the characteristics of the facility's environment, indicating how it is conducive to operating a childcare service for the children and parents of the territory. Specify the constraints or advantages it offers. If there are negative factors, describes the measures planned to mitigate the negative effects.

Has your proposal received the support of one or more partners for accommodating children, their parents and the community?

- Yes. If so, attach to your application the partnership intention letter describing the scope and nature of this partnership.  
 No.

## Section 2 – Information on the proposal (continued)

### 2.3 Description of the business proposal (continued)

Specify what type(s) of support (administrative, financial, technical, recreational activities or maintenance) you will receive from your partner(s).

Do you plan to meet one or more specific childcare needs?

Yes. Specify the need(s) by ticking off the applicable box(es) and answer the questions below:

Childcare for children from disadvantaged environments

Childcare for handicapped children

Childcare for First Nations and Inuit children off the reserve

Childcare in workplace environments. Specify: \_\_\_\_\_

Childcare for atypical schedules (evening, overnight, weekend)

Other educational childcare needs. Specify: \_\_\_\_\_

No.

If so, how have you assessed this need or these needs and how do you plan to reach the targeted clientele(s) and organize your childcare service to meet these childcare needs? What measures do you plan to implement to foster the accommodation and integration of these children? Are you experienced in accommodating this type of need?

## Section 3 – Documents required

If your application concerns a day care centre (any type of application), please provide with this form:

- A **Schedule 1, Portrait of the applicant, Declaration of the related persons**, for each natural person registered in points 1.5 and 1.6 and, as applicable, the relevant documents justifying the lack of participation (direct or indirect) in the operation or the management of the day care centre.

Attached

If your application concerns the implementation of a childcare centre (CPE) or day care centre, please provide with this form:

- A certified cheque, money order or bank draft for \$1777 payable to the **Ministre des Finances du Québec**.
- In the case of a legal person, a certified copy of the incorporation deed of the business that will be the permit holder;
- A copy of the declaration of registration or of the initial declaration listed in the **Enterprise Register**.

Attached

Attached

Attached

## Section 4 – Implementation plan

### 4.1 Nature of the work required (based on implementation or increase in capacity)

<input type="checkbox"/> Purchase of land and construction of a building	<input type="checkbox"/> No redevelopment (increased capacity only)	<input type="checkbox"/> Other (please specify briefly) : _____
<input type="checkbox"/> Purchase of a building	<input type="checkbox"/> Redevelopment (increased capacity only)	
<input type="checkbox"/> Leasing of a building or premises	<input type="checkbox"/> Expansion (increased capacity only)	

### 4.2 Description of the work required

Please describe the work to be carried out:

### 4.3 Work schedule

Using the table below, please indicate the projected work schedule, specifying the different planned work phases and the time needed to complete each phase (time needed refers to the maximum length of the phase):

Phase (after obtaining the authorization of the Ministère)	Length of the phase (taking into account all the steps to be carried out to complete the phase)	Start date (taking into account the prior steps to be carried out)
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
11.		
12.		
13.		
14.		
15.		
16.		
17.		
18.		
	<b>Total length:</b>	

4.4 Implementation budget		
Professional fees		Cost including taxes
Architect		\$
Engineer		\$
Surveyor		\$
Landscape architect		\$
Accountant		\$
Notary, lawyer		\$
Other (specify):		\$
<b>Sub-total – Professional fees</b>		<b>\$</b>
Project lead		\$
<b>Total – Professional fees</b>		<b>\$</b>
Purchase, construction, redevelopment, expansion or leasing		Cost including taxes
Purchase or construction	Leasing	
Purchase, construction, redevelopment or expansion cost, as applicable	Cost of the lease	\$
Cost of acquiring land (as applicable)	Leasing improvement	\$
Additional cost for child up to 17 months of age, as applicable		\$
Multi-purpose room, as applicable		\$
Insurance required for the work		\$
Permit		\$
Other (specify):	Other (specify):	\$
<b>Total – Achat, construction, réaménagement, agrandissement ou location</b>		<b>\$</b>
Furnishings and equipment		Cost including taxes
Furnishings		\$
Kitchen or laundry room equipment		\$
Office materials and furniture		\$
Computer materials		\$
Educational materials		\$
Play area toys		\$
Other (specify):		\$
<b>Total – Furnishings and equipment</b>		<b>\$</b>
Outdoor play equipment		Cost including taxes
Outdoor play equipment (if adjacent play area)		\$
Other (specify):		\$
<b>Total – Outdoor play equipment</b>		<b>\$</b>
Outdoor layout		Cost including taxes
Parking		\$
Landscaping		\$
Grass		\$
Fence		\$
Other (specify):		\$
<b>Total – Outdoor layout</b>		<b>\$</b>
<b>Overall total</b>		<b>\$</b>

4.5 Sources of financing	
Investment by the company making the application	\$
Loan from a financial institution (specify which one):	\$
Investment by a third party	\$
Other sources of financing (e.g., infrastructure financing program of the Ministère de la Famille, as applicable). Specify:	\$
<b>Overall total financing available</b>	<b>\$</b>

Comments (as required):

#### 4.6 Projections for the first two years

Please itemize your financial projections for your childcare service's first two years of operation.

Category	Results projection	
	1st year of operation	2nd year of operation
<b>REVENUE</b>		
Childcare revenue	\$	\$
- Babies (number of children x number of days of care x parent's basic contribution and Ministère de la Famille subsidy)	\$	\$
- 18 months or older (number of children x number of days of care x parent's basic contribution and Ministère de la Famille subsidy)	\$	\$
Other childcare-related revenue. Specify:	\$	\$
Proceeds from other sources. Specify:	\$	\$
<b>Total revenue</b>	<b>\$</b>	<b>\$</b>
<b>COSTS</b>		
Direct costs		
- Payroll : educators and educator assistants	\$	\$
- Educational outings	\$	\$
- Educational and recreational materials	\$	\$
- Training and upgrading	\$	\$
- Professional fees	\$	\$
- Other direct costs	\$	\$
Ancillary costs		
- Payroll: food and maintenance staff	\$	\$
- Food costs	\$	\$
- Maintenance costs	\$	\$
- Other costs	\$	\$
Costs related to the premises		
- Rent	\$	\$
- Energy consumption costs	\$	\$
- Costs of fire and theft insurance and hook-up to an alarm centre	\$	\$
- Maintenance and repair costs	\$	\$
- Property taxes	\$	\$
- Financing costs	\$	\$
- Amortization costs	\$	\$
- Other costs related to the premises	\$	\$
Administrative costs		
- Expenses related to remuneration of management, administrative and other staff	\$	\$
- Other administrative costs	\$	\$
<b>Total costs</b>	<b>\$</b>	<b>\$</b>
<b>Surplus (shortfall) of proceeds in relation to costs</b>	<b>\$</b>	<b>\$</b>

Comments (as required):



## Section 5 – Governance and management of resources

### 5.1 Human resources

Demonstrate how your academic background, your training or your work experience is relevant to your application and describe how it will serve you in administering your childcare service and help you ensure educational quality.

Describe the human resources management that would be implemented, including the positions that would be filled and those to be filled in your childcare facility, as well as your strategy for recruiting and retaining staff to meet the requirements of the Educational Childcare Regulation concerning qualified educator staff members. Describe the profile of the persons you are considering hiring as educator staff.

For information purposes, see the page on [Classification and remuneration](#) in childcare and day care centres on the Ministère's website.

In the following table, enter the current and projected composition of the groups of children and the current and projected number of educator staff members, taking into account the spaces requested and the ratios defined by the Educational Childcare Regulation.

Current and projected composition of the facility's groups of children and current and projected number of educator staff members					
Identification of groups	Age of children in group	Number of children		Number of educator staff members	
		Current (as applicable)	Projected	Current (as applicable)	Projected
Group 1					
Group 2					
Group 3					
Group 4					
Group 5					
Group 6					
Group 7					
Group 8					
Group 9					
Group 10					
Group 11					
Group 12					
<b>Totals</b>					

### 5.1 Human resources (continued)

Describe parents' participation at your childcare facility:

### 5.2 Material resources

Describe the material resources management that would be implemented. For example, provide information on your suppliers and how you would track inventory:

### 5.3 Financial resources

Describe the financial resources management that would be implemented. Indicate, for example, how you plan to control your financial activities, terms of payment for parents, etc.

### 5.4 Information resources

Describe the information resources that would be implemented, in particular , the rules for organizing the delivery of services.  
On the Ministère's website, see the [reference sheet](#) with information on the rules for organizing the delivery of childcare services.

## Section 6 – Other information

Please provide here any other information you deem useful for the study of your application:

## Section 7a – Resolution of the promoter (band council or of the board of directors of the legal person) authorizing the application (Mandatory section for a Regular application and a Notice of interest).

Resolution number: \_\_\_\_\_

Excerpt of the minutes of the meeting of the band council or of the body responsible for childcare services in the community named \_\_\_\_\_ [exact name of the business making the application] held on, \_\_\_\_\_ [date on which the resolution was adopted] and for which there was a quorum.

It is proposed, seconded and resolved that an application for \_\_\_\_\_ [number] subsidized educational childcare spaces to meet the needs of the community be made to the Ministère de la Famille so that it is submitted for analysis and that

\_\_\_\_\_ [full name of the person authorized by the board of directors or the band council to sign the permit application] be authorized to sign this application for subsidized spaces and to provide all the documents and information required by the Ministère de la Famille and ensure follow-up thereof with the Ministère.

It is proposed, seconded and resolved that it be attested that the board of directors of the applicant, as applicable, is composed as described in **section 1.5** of this form.

I certify that this resolution is in accordance with the decision made at said meeting of the board of directors or of the band council.

\_\_\_\_\_  
Signature of the person designated by the board of directors or the band council.

\_\_\_\_\_  
Date (year-month-day)

## Section 7b – Resolution of the band council (if it is not the applicant) or of the body responsible for childcare services supporting the application

Resolution number: \_\_\_\_\_

Excerpt of the minutes of the meeting of the band council or of the body responsible for childcare services in the community named \_\_\_\_\_ [exact name of the business making the application] held on \_\_\_\_\_ [date on which the resolution was adopted] and for which there was a quorum.

It is proposed, seconded and resolved that an application for \_\_\_\_\_ [number] subsidized educational childcare spaces to meet the needs of the community be made to the Ministère de la Famille so that it is submitted for analysis and that

\_\_\_\_\_ [full name of the person authorized by the board of directors or the band council to sign the permit application] be authorized to sign this application for subsidized spaces and to provide all the documents and information required by the Ministère de la Famille and ensure follow-up thereof with the Ministère.

It is proposed, seconded and resolved that it be attested that the board of directors of the applicant, as applicable, is composed as described in **section 1.5** of this form.

I certify that this resolution is in accordance with the decision made at said meeting of the board of directors or of the band council.

\_\_\_\_\_  
Signature of the person designated by the board of directors or the band council.

\_\_\_\_\_  
Date (year-month-day)

## Section 8 – Signature of applicant (authorized person)

If the applicant is a band council or a legal person, it is the person authorized in the above resolution who must sign. If the applicant is a natural person, it is this person who must sign.

As the authorized person, I declare that the information provided in this form and the documents attached, as applicable, is true, complete and accurate and describes the actual situation. Any false declaration shall automatically lead to rejection of the application.

Last name, first name:

Position:

X

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date (year-month-day)

**IMPORTANT** – Please ensure that your application is complete by using the submission checklist attached to the preparation guide. This will simplify handling of your application and support its eligibility and analysis. Your application is to be emailed to the Direction régionale des services à la clientèle (customer services regional branch) of the region where the childcare facility will be established **by 11:59 p.m. on October 13, 2023**. For payments by registered mail, the postmark will attest to the date of sending of the payment. Please note that there is no point in providing documents other than those specified in the guide because they will be removed from the file and not analyzed.

## Instructions for submitting your application

Your application is to be emailed to the Direction régionale des services à la clientèle of the region where the childcare facility will be established **by 11:59 p.m. on October 13 2023**. For payments by registered mail, the postmark will attest to the date of sending of the payment. No application will be accepted after that date.

Please note that no application can be made in person or by fax.

Ministère de la Famille 750, boul. Charest Est Bureau 510 Québec (Québec) G1K 3J7  <a href="mailto:dscanne@mfa.gouv.qc.ca">dscanne@mfa.gouv.qc.ca</a>	Ministère de la Famille 600, rue Fullum, 6 <sup>e</sup> étage Montréal (Québec) H2K 4S7  <a href="mailto:dscim@mfa.gouv.qc.ca">dscim@mfa.gouv.qc.ca</a>	Ministère de la Famille 201, place Charles-Le Moyne Bureau 6.02 Longueuil (Québec) J4K 2T5  <a href="mailto:dt.sud@mfa.gouv.qc.ca">dt.sud@mfa.gouv.qc.ca</a>	Ministère de la Famille 1760A, boul. Le Corbusier Laval (Québec) H7S 2K1  <a href="mailto:drong@mfa.gouv.qc.ca">drong@mfa.gouv.qc.ca</a>
<b>Regions</b>	<b>Region</b>	<b>Regions</b>	<b>Regions</b>
Bas-Saint-Laurent	Montréal	Mauricie	Outaouais
Saguenay–Lac-Saint-Jean		Estrie	Abitibi-Témiscamingue
Capitale-Nationale		Montréal	Laval
Côte-Nord		Centre-du-Québec	Lanaudière
Gaspésie–Îles-de-la-Madeleine			Laurentides
Chaudière-Appalaches			
Nord du Québec			

## Reserved for the ministère de la Famille

	Date received (year-month-day)	Initials	Date entered (year-month-day)	Initials