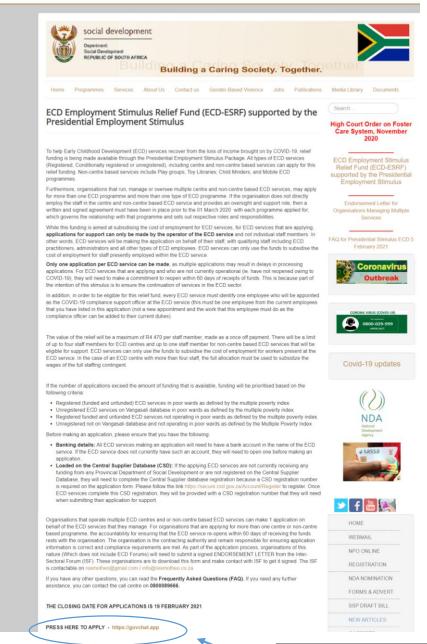


https://www.dsd.gov.za/index.php/latest-news/21-latest-news/328-presidential-employment-stimulus-for-early-childhood-development-ecd-services

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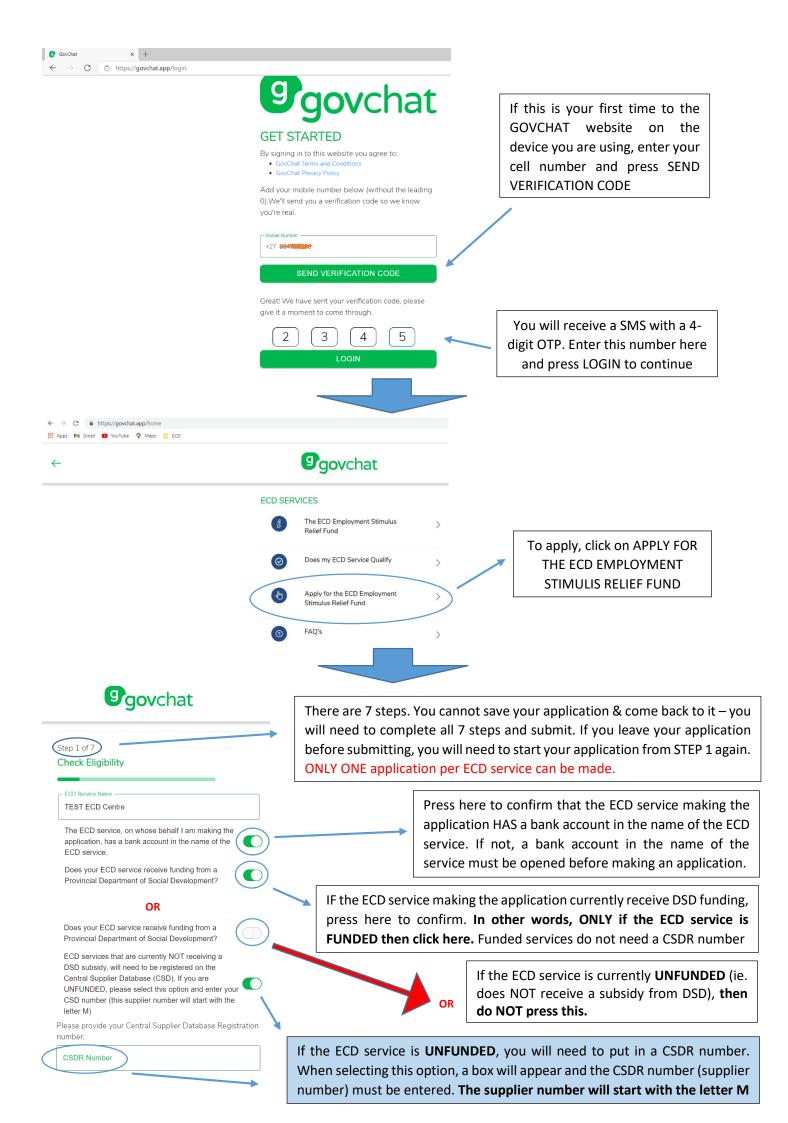


Here you can read more about ECD-ESRF and how to apply.

<u>Do not forget</u> that before applying, you need to make sure you have the following:

- A bank account in the name of the ECD service (you will not be able to use your personal bank account)
- 2. If your ECD service is unfunded (ie. does NOT receive a subsidy from DSD), you need to register your ECD service on the Central Supplier Database (CSD). You can do this by going to https://secure.csd.gov.za/Ac count/Register . Once you register an account, you will need to login on the CSD website & add your ECD service in the SUPPLIER DETAILS tab. Once you complete the required tabs, you will get a Supplier number that will start with the letter **M** (you need this supplier number for your **ECD-ESRF** application)

Once you are ready to make an application, CLICK on this link OR visit <u>https://govchat.app</u> to apply.



SUMMARY

- **FUNDED:** If the ECD service is currently receiving a subsidy from DSD, you will NOT need a CSD number as you are already loaded onto DSD's payment system
- **<u>UNFUNDED</u>**: If the ECD service is NOT currently receiving a DSD subsidy, you WILL need a CSD number.



This is to confirm that you are the correct person completing the application on behalf of the ECD service. In other words, make sure the Principal/Owner/Management is aware the application is being made as **only one application** can be submitted. **REMEMBER** the ECD service is making an application on behalf of the ECD staff employed at the ECD service. Individual staff members employed at an ECD service must **NOT** make the application for themselves.

Select your position in the ECD service – Scroll to the right to see the different options. The options are: Principal/Manager; Owner; Organisation applying on behalf of ECD services; Management committee member; Founder; Administrator or other member of staff. Select the most appropriate option and press NEXT and move on to the next step





Step 2 of 7

ECD Operator/Member of organisation applying on behalf of ECD services

Please complete all fields below as per ID Document:
Sumaya
_ Initials
S
Surname
Hendricks
Type of Identification:
ID NUMBER REFERENCE NUMBER PERMIT NUM
ID Number
Use logged in cellphone number?
NEXT

Complete the details of the ECD operator or the person from the organisation applying on behalf of the ECD services. This is the person who the Application Office will also be in touch with about this application.

ENSURE that the name & surname entered matches the ID number. In other words, make sure that the name and surname entered is what appears in the ID document associated with this ID number (or reference or permit number)

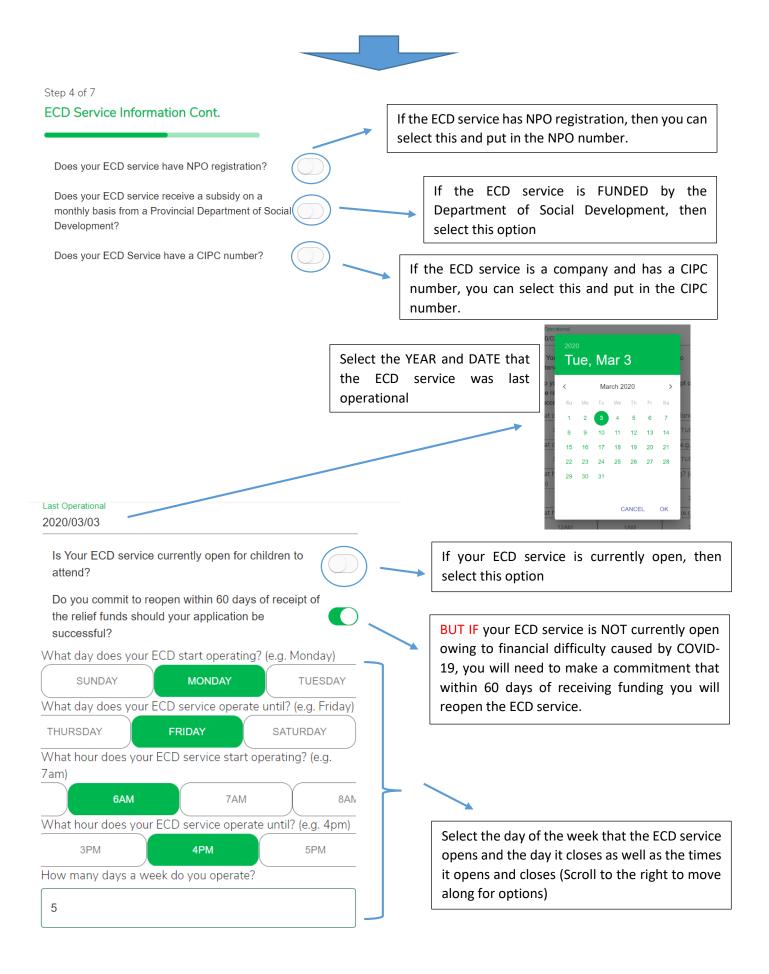
IF the cell number that you entered on the GET STARTED page of Govchat (ie. the cell number the OTP was sent to) is the same number you want to be contacted on, then you can keep this selected

If the cell number is **NOT** the same & you want the Application Office to have a different number associated with this application <u>THEN DESELECT</u> this option & enter the cell number

Use logged in cellphone number	r –
- Cellphone Number	
0004722250	

NEXT

-	Step 3 of 7		
	ECD Service Information		
Search for the			
location of your	Please indicate the address that your ECD service most frequently uses. If multiple, select one:		
ECD service	6 test 6 tester Road Vierlanden, Cape Town, South Affrica		
_			
	Once you put in the location (make sure to put the street number) of the ECD service, complete the rest of the details		
number) of the			
Make sure to	put a landmark close to you like a police		
station or school			
refers to p registration)	ED or CONDITIONALLY registered (this programme registration or partial care), select this option. You will need to picture or PDF of your registration		
certificate.			
	[]		
	If UNREGISTERED (ie. do not have programme registration or partial care registration), select this and move on with your application. You will not need to upload anything.		
	of ECD service which best describes you are making an application for		
	location of your ECD service		



Does your organisation run, manage or supervise multiple ECD services/programmes? (i.e. multiple ECD centres, sites or multiple non centre based programmes including play groups, toy libraries and mobile ECDs)



Was your ECD service assisted to make this application by an NPO?

NEXT

If you were assisted in your application by a NPO partner, please put in their verification code. If not, do not select this and move on with your application Only select this option if you are an organisation that is making an application for the **multiple** ECD services that you operate*. Example: If you run 10 ECD services under the name of your organisation, you can select this. By selecting this option, you will need to do the following:

- Answer the Question: How many ECD services/programmes does your organisation run, manage or supervise?
- Please attach/take a photo of your ISF Endorsement (can be downloaded from <u>https://www.dsd.gov.za/index.php/late</u> <u>st-news/21-latest-news/328-</u> <u>presidential-employment-stimulus-for-</u> <u>early-childhood-development-ecd-</u> <u>services</u>)
- Please attach/take a photo of your NPO registration certificate

*IF YOU are not making this kind of application, do not select this option and move on with your application.

Step 5 of 7 Children Who Benefit

Number of children who will benefit from your programme/s?

20

Number of children aged 1 month to 18 months?

Number of children aged 18 months to 3 years?

Number of children aged 3 years to 4 years?

5

Number of children aged 5 years to 6 years?

15

Number of children from the above with disabilities?

2

What is the capacity of your ECD service (How many children can you accommodate or cater for?)

20

IEXT

\$

Complete this section by putting in the details of the number of children who attend the ECD service and their breakdown by age

Step 6 of 7			
ECD Service Staff Informatio	n		
Which of these best describes you a organisation run, manage or superv services/programmes please only in directly work in these programmes.) What is the total number of workers (including yourself)?	ise, multiple ECD clude all staff who :	Put the number of perservice making the appropriate appropriate approach are 4 people employed making this application	olication. EXAMPLE: If t ed (INCLUDING the pe
Total employees			
Employee 1 Details	>		
Employee 2 Details	>	You will need to	put in the details of a
Employee 3 Details	>	staff members	
Employee 4 Details	>		
EXAMPLE	Employee 1 Details First Name Sumaya Initials S Last Name Hendricks Type of Identification: ID NUMBER REFERENCE N ID NUMBER REFERENCE N MALE FEMALE Race: BLACK		Make sure that their name and surname is written according to their ID document
	Disability? Highest Level of Qualification	CD	
	Cellphone Number		
	Job in ECD		Remember that person in the ECD so
	When did this person begin working _{Start Date} 2016/02/10	at your ECD Service:	must play the role of COVID Comp
	Is this employee the COVID Compli	ance Officer?	Officer (which complement existing role). If th only 1 person emp
			in the ECD service will have to be Compliance Officer

Step 7 of 7 Declarations

Please read and accept EVERY declaration be I declare that my ECD service/s will re-open within 60 days of receipt of the funds (if the ECD service is still closed) I agree that my organisation will take responsibility to ensure that all services that have been applied will reopen their service if closed within 60 days of receipt of the funds. I certify that all information is accurately entered to the best of my knowledge and I acknowledge that any falsified information will be considered fraudulent. I understand that a false statement is a criminal offence and will disqualify me from any further consideration from the ECD Employment Stimulus Relief Fund , without prejudice to any other rights, or remedies available to the ECD Employment Stimulus Relief Grant Presidential ECD Employment Stimulus. The organisation is the contracting authority and remain responsible for ensuring application information is correct and compliance requirements are met The National and Provincial Department of Social Development (NDSD) collects, uses, processes (which shall include collecting, collating, storing and disclosing and retaining) and shares the provided information (with specific reference to personal information), to which I consent, for the purpose of the following: a. Assessing and processing the application b Confirming and verifying an individual's identity c. Monitoring the outcome of the The ECD Employment Stimulus Relief Fund d. For audit and record keeping purposes e. This includes collecting and sharing the Client's personal information with third party service providers who are essential to the credibility and affordability processes specifically or generally accepted as related to a); b); c); d) and/or e) above I acknowledge that my personal information may be stored in a secure web-based facility, on behalf of the NDSD to ensure that my personal information is kept confidential at all times I hereby expressly agree that it is my own responsibility to ensure that I have read and understood these terms and conditions I do not have any conflict of interest that would make me ineligible for The ECD Employment Stimulus Relief Fund. I am not employed by any organ of state as defined in section 239 of the Constitution. I understand and agree that upon Central Applications Office notifying the applicant of acceptance of the application via SMS, this application shall be deemed to constitute a binding agreement between myself and the relevant Provincial Department of Social Development on the terms and conditions contained herein. The provincial department concerned is not required to sign the application and the notice via SMS will serve as acceptance of the application as a binding agreement between the parties By clicking agree, you agree to these Terms and Conditions. If you are awarded funds, you agree that they will be spent to support the employment of the people indicated and on nothing else. This money is distributed to the ECD operator on behalf of the employees. Note, this does not mean that you will receive funding. Funding will be awarded based on eligibility, assessment of your application and availability of funds. If demand exceeds available resources based on the number of applications received, a prioritisation process will be followed to ensure ECD services that are registered or who applied as part of the Vangasali process, and those operating in the officer and those operating in poor wards as determined by the STATSA multiple poverty index (2011) will be prioritised. If your application has been approved or declined, you will be notified by the Central Applications Office. You will be required to keep the following information to provide proof that you spent the money for the purpose allocated to Provincial Departments of Social Development: -Signed proof from all the employees cited in this application confirming that they received the support applied for in their names confirming value and date of payment. - Income and expenditure statement/report reflecting your expenditure include the payment to employees. - Attendance registers reflecting child attendance - Employment contracts for all staff - Signed letter of appointment of the compliance

MAKE sure to read all of these terms and conditions.

ONLY select them if you AGREE to them as this will be a binding agreement. After accepting, press NEXT

If you do not agree with any of these terms and conditions, do not select it and end your application

I have read and agree to the additional Terms and Conditions found below In terms of Section 38 (1) (J) of the Public Finance Management

Primary Terms and Conditions

OR

I have read and agree to these additional Terms and Conditions found below

Secondary Terms and Conditions

Amended form 16 forms part of the information completed in this application, and by completing this application I acknowledge that I have initiated the registration process for my ECD service (if not already registered) and will take further steps towards registration





Thank you for submitting!

Your application has been successfully submitted! Your reference number i XAFST9 If you have any enquiries, please call the contact centre: 0800089666 MAKE sure to keep this reference number. You can use it to follow up on your application

HOME



