



Procedures and Guidelines for Supporting  
Local Interagency Coordinating Council  
Identified Goals, Activities, and  
Parent/Caregiver Participation

2025-2026

## Purpose of the grant

*Since its inception, parent/guardian participation has been central to Part C of the Individuals with Disabilities Education Act (IDEA). As a result, LICCs and partnering agencies and organizations, are expected to engage parents/guardians in their activities. To support family engagement in your LICC we encourage you to explore using this funding source to better engage with families.*

Reimbursement for increasing community awareness, child find activities, professional development or other identified LICC goals will also be accepted.

This is a subgrant of state funds for supporting the mission of the Kansas State Coordinating Council (SICC) and Local Interagency Coordinating Councils (LICCs). The SICC is sub granting the funds to the fiscal agent of the Infant Toddler program to support LICC efforts per contract KSD#652-22-2232. The Infant Toddler fiscal agent is responsible for ensuring that all funds are spent according to ensure proper fiscal policies are followed.

**Each LICC can receive up to \$3000.**

Questions about allowable expenses can be directed to the SICC staff person, Stacy Clarke, at [kansasicc@ksde.gov](mailto:kansasicc@ksde.gov) or call 785-296-3953.

***\*Funds cannot be used for food, beverages, or gift cards.***

## Applying

1. The LICC Chair or Coordinator should complete the Funding Request Form. The form needs to contain the fiscal agent's contact information and a W-9 from the fiscal agent if the fiscal agent has not previously received funds for an LICC grant.  
Send to [kansasicc@ksde.gov](mailto:kansasicc@ksde.gov)  
Or: Kansas State Department of Education  
Early Childhood Department - SICC  
900 SW Jackson Street  
Topeka, KS 66612-1212
2. Once grant funds are approved for your LICC, you'll receive an email notification.
3. After you have spent the funds on your approved expenses, submit an invoice to the SICC listing the expenses.
4. Request the total reimbursement all at once. Your fiscal agent may do this for you.
5. The last day to submit for reimbursement is June 30, 2026.

*The intent of these procedures and guidelines is to support the provision of financial support to parents/guardians participating in LICC and other LICC-related activities. This guidance was developed with the intention of maintaining user-friendly financial procedures and accountability, which results in documentation for evaluation of goals and activities identified by the LICC and for audit purposes. Documentation for expenses should follow accepted accounting principles and records should be maintained for a minimum of five years. Funds can also be used to increase community awareness of early childhood services, to increase the number of children being screened for developmental delays, and/or to provide training specific to an identified need in your area.*

### **Additional information for financial support for parents/guardians**

Financial support for parents/guardians is based on the following principles:

- Parents/Guardians are considered essential allies and partners in the identification, planning, and implementation of services.
- The experience and expertise parents bring are of great value. Therefore, parents/guardians will be compensated for their time and efforts.
- Family diversity is respected. Parents/Guardians with diverse perspectives and experiences should be welcome to share their ideas and input. When recruiting parents/guardians to participate, their diversity is honored and pursued. When compensating or reimbursing parents for their participation, diversity in needs should be recognized and responded to in an individualized and creative manner.

### **Caregiver Stipends / Reimbursement**

\*Payment reimbursement will be made to the Fiscal Agent identified by the LICC. Communicate with your fiscal agent to ensure proper fiscal policies are followed.

#### **Stipends:**

Caregiver stipends may be paid at a rate of \$20 an hour for a maximum of 3 hours per day for attending LICC meetings and family feedback events.

#### **Reimburse of caregiver expenses must comply with the following guidelines:**

##### **Child care expense**

Actual childcare expenses, up to a maximum of \$50/day, will be reimbursed to the Fiscal Agent identified by the LICC. If one family's childcare expenses will exceed the \$50/day limit, the LICC Chair/Coordinator should contact SICC Staff prior to submission of the funding request for approval of an exception.

## **Mileage**

Current state of Kansas rate for a private vehicle as of 3/10/2025, is \$0.70 per mile.

- Adjusted periodically
- Only available if the family member drives to the meeting (the driver and their passenger cannot both ask for mileage reimbursement)

## **Community Awareness**

This may include advertising, printing, posting, etc. Any communication your LICC uses to inform your community about services available to families with young children.

### **Events: Community Awareness, Family Feedback, Targeted Relationship Building and/or Developmental Screening**

Child Find is one of the goals of LICCs. Providing information to families and offering community screening events are ways to ensure you are identifying children and families that need support. Interacting with families and hearing about their needs can be achieved through conversations at events. These events can be focused specifically on families and caregivers, or they can be events for the entire family to enjoy.

Events can target specific community partners to strengthen relationships which lead to an increase in children being referred to services.

The focus of proposed events should be clearly stated. Explain the intended outcome of the event. Is it to promote community awareness, elicit caregiver feedback, increase the number of children referred for an evaluation, or a combination of these?

## **Professional Learning**

Submit how the proposed professional learning need was identified for your area, your target audience, and the anticipated positive outcome for children in your community. Including family members, childcare providers, community partners and other LICC partners should be considered.

## **General Information:**

- Funds must be spent prior to submitting for reimbursement. Reimbursement will be made to your fiscal agent.
- Events must take place on or prior to June 30, 2026.
- The last day to submit for reimbursement is June 30, 2026.



## State ICC Funding Request

To apply, complete the form below and email it to SICC staff at [kansasicc@ksde.gov](mailto:kansasicc@ksde.gov) at least 40 days prior to the start of your project.

Suggested deadline to submit application is February 1, 2026. Funds must be spent in between July 1, 2025 and June 30, 2026.

Requests cannot exceed \$3,000. If a higher amount is requested, please reach out to SICC staff at the email above.

<b>Council/Coalition Name:</b>		
<b>Event/Activity Date(s):</b>		
<b>Name of Person(s) Filling out Request:</b>		
<b>Infant Toddler Program Number, Name and Address:</b>		
<b>Telephone:</b>		
<b>Fiscal Agency Name and address:</b>		<b>Email:</b>
<b>Total Funds Requested:</b>		
<b>*Funding Purpose</b>		
<b>Impact Statement:</b> (350 words or less) Please provide a brief summary of: <ul style="list-style-type: none"> <li>• <i>Need(s) to be addressed</i></li> <li>• <i>How it will assist your local council or coalition</i></li> </ul>		
<b>Goals, Activities, and Target Audience:</b> <i>What are you trying to accomplish? What activities will you do and who will benefit? (2-3 sentences)</i>		
<b>Funding Request Narrative:</b> <i>Describe any existing LICC budget input and briefly detail the intended use of the requested funds. (2-3 sentences)</i>		

<b>Coordination and Input:</b> <i>Detail relevant community input or current initiatives that led you to the proposed work/activities. (2-3 sentences)</i>	
<b>Printed Name of Person Submitting Request:</b>	
<b>Date of Submission:</b>	

**Attach fiscal agent's W-9** (if needed)

INTERNAL USE ONLY	
<b>Reviewed By:</b>	
<b>Date Referred to SICC:</b>	
<b>Approval Date by SICC:</b>	
<b>Denial Rationale:</b>	
<b>GAN sent</b>	
<b>Date of Payment:</b>	