



LOUISIANA DEPARTMENT OF EDUCATION

Early Childhood Provider Type III Application and Edlink Access User

2023-2024

AUGUST 2023



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PURPOSE

The purpose of this User Guide is to assist Early Childhood Providers in Edlink account registration and Edlink Security access Requests in Edlink Security.

GENERAL INFORMATION

- Edlink Security streamlines all provisioning rights into one user-friendly system for all LDOE data systems.
- Edlink Security allows users access to multiple data systems with one User ID and Password.
- While previous legacy systems may have required communication and exchange via email or paper, Edlink Security virtually eliminates these processes by integrating documentation and requirements

LINKS UTILIZED IN THIS DOCUMENT

- MYLA- Create a User ID and Password or reset a Password.
<https://myla.la.gov/>
- Edlink Ops Portal- Complete Personal Profile and create Edlink account.
<https://ldo.edlink.la.gov/>
- Edlink Security- Request Role Access to Entity/ies.
<https://registration.edlink.la.gov/>
- Edlink Tech Support- Request Role Access to Entity/ies.
<https://edlinksupportsystem.com>

USER TIPS

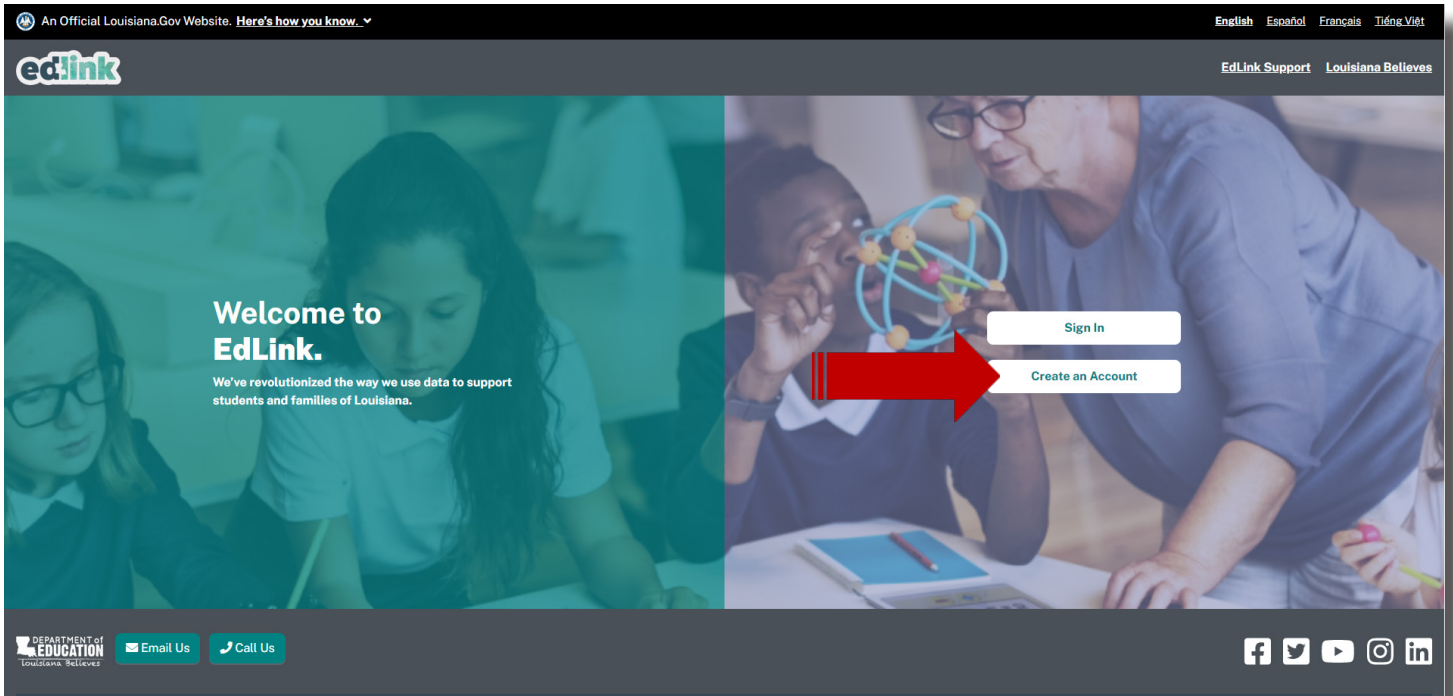
- *Google Chrome* or *Microsoft Edge* browsers must be used for functionality of Edlink Systems.
- Do not create a new account if you already have a MyLa account.
- Do not create a new account if you forget your Password or User ID.
- Use your PERSONAL email when creating your Edlink account.

[Change User Information](#)
[Forgot User ID or Password](#)

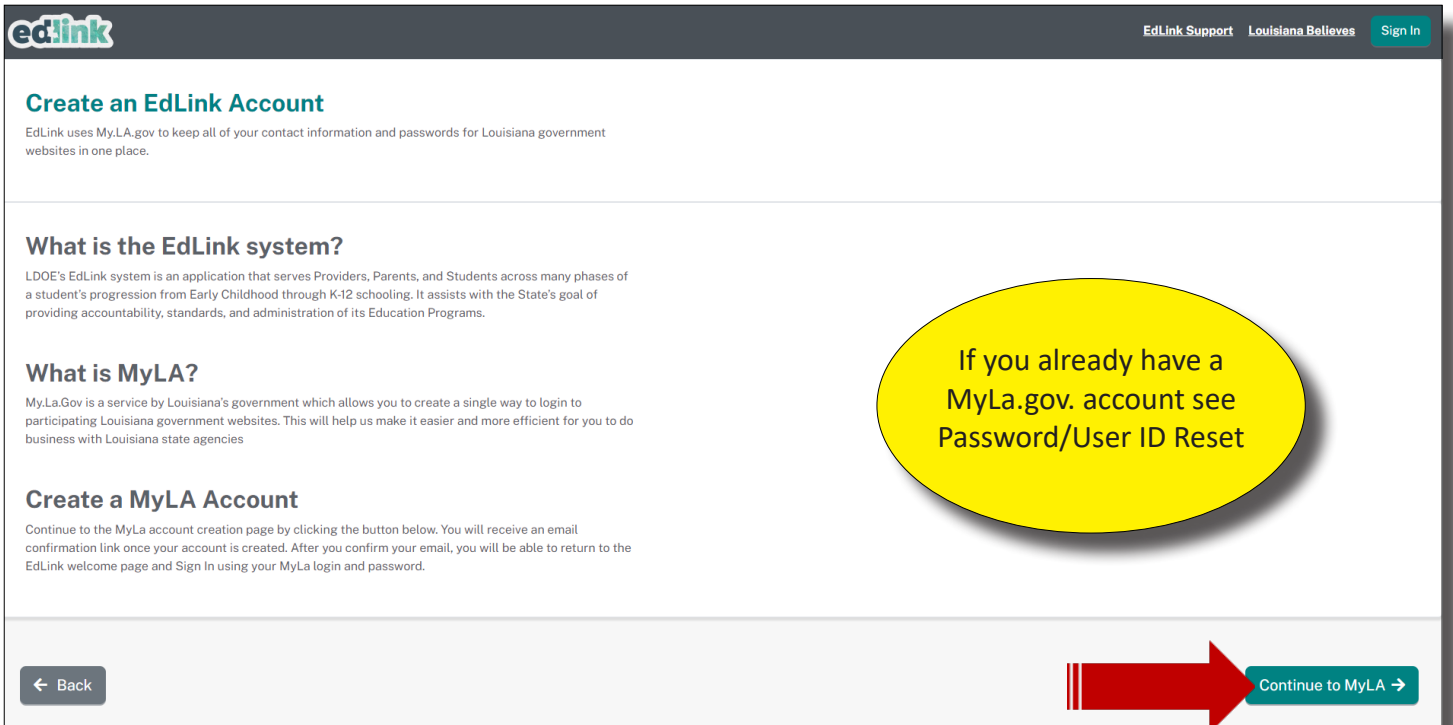
LDOE EDLINK SYSTEMS ACCESS

Using the link below, begin creating your MyLa.Gov account and gain access to EdLink. The following instructions are presented in a step-by-step format to help you do this.

<https://ldoe.edlink.la.gov/#/>



Take a moment to read the information on this page. Then select "continue to MyLa."



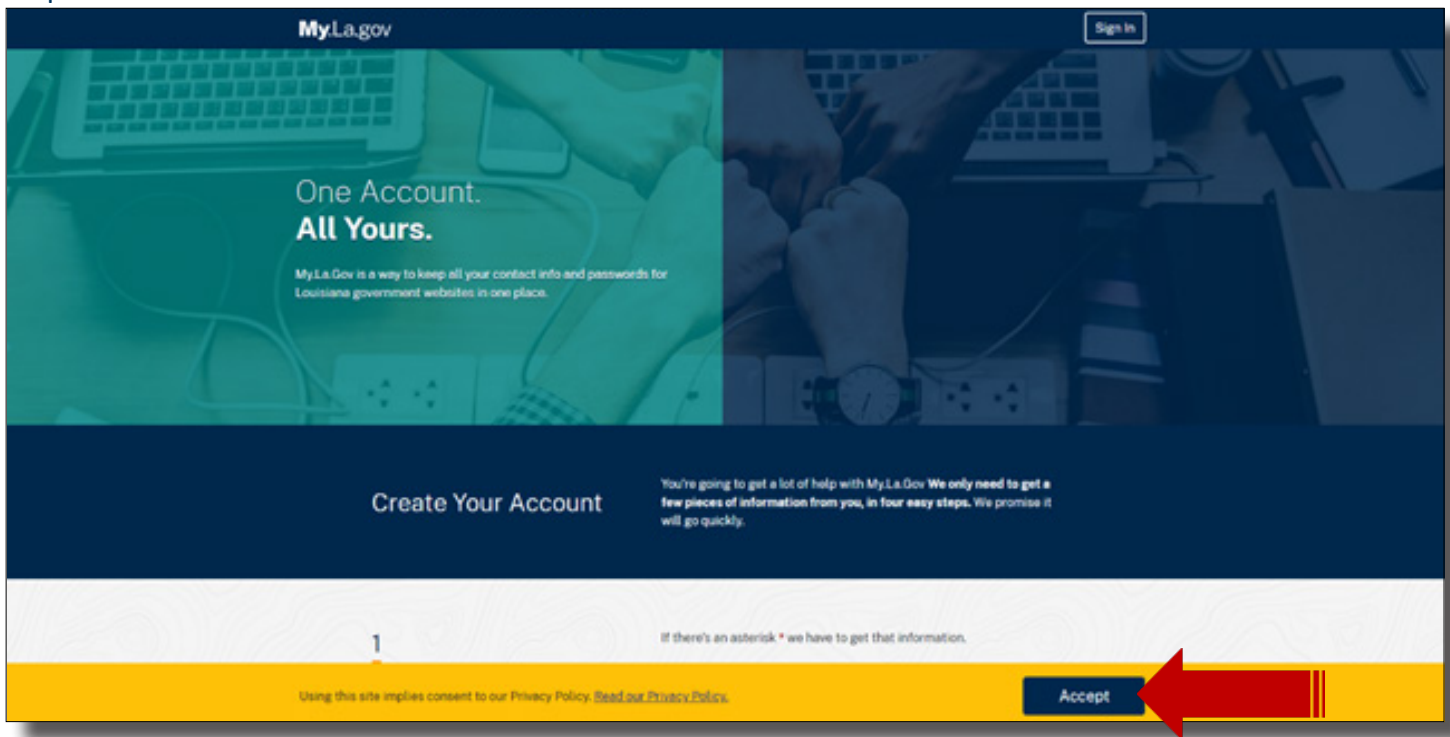
If you believe that you already have a MyLa.gov account, see the Password/User ID Reset Instructions located on the [Edlink Training](#) page. Sign into the main portal. Complete the New User Profile using your personal information. Avoid using Auto Fill (shared computers/data entry will select erroneous data). Once you've completed the profile, select Save. Continue to page 21 and SignIn to Edlink.

After selecting, "Continue to MyLa", proceed to the next page to complete your registration.

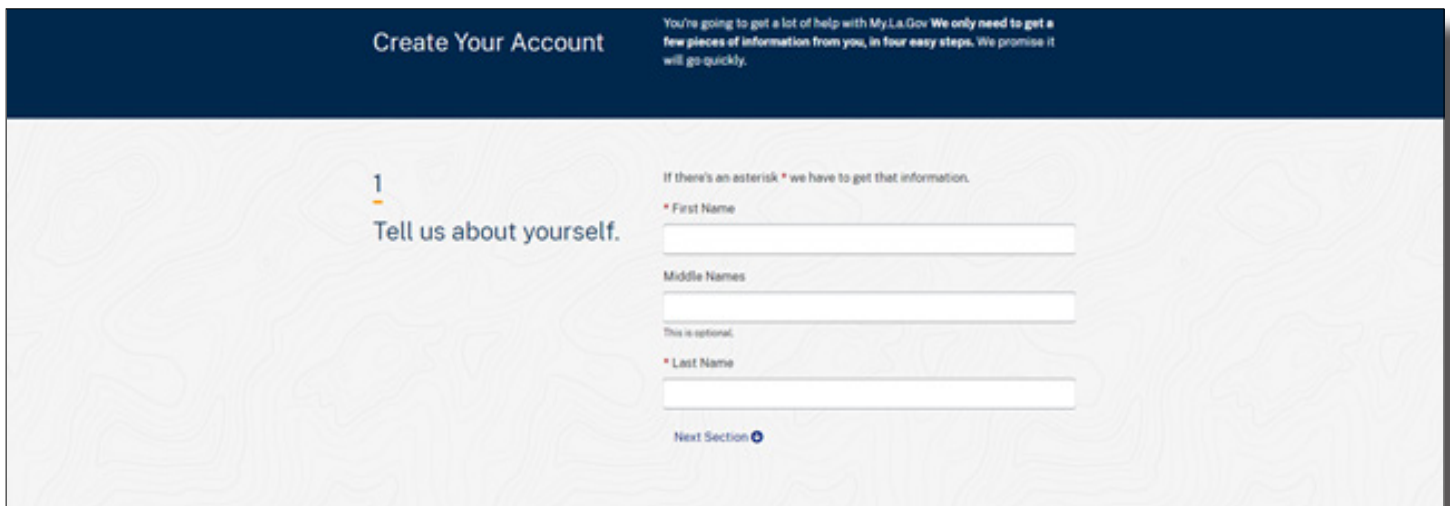


MY NOTES

The “Create Your Account” page will appear. Accept the security policies and scroll down slowly until you see Step 1 of “Create Your Account.”



Scroll down and begin inputting your information into the Tell Us About Yourself section. Please note that where there is a red asterisk, you must enter information to proceed.



Create a User ID. If you need assistance with creating a User ID, click on the blue light bulb below the text box. You will see this light bulb throughout the process.

2
Let's start your account.

We need to get some information to start. We'll ask you to create a User ID and a password.

If there's an asterisk * we have to get that information.

* User ID
[Text box]
[Want help making a User ID?](#)

* Password
[Text box]
 Show Passwords
[Want help making a Password?](#)

* Confirm Password
[Text box]

[Previous Section](#) [Next Section](#)

Do not use your email in Step 2, User ID. Please stay below 20

Click on the blue light bulb to view the required format for your User ID and Password. Click on the light bulb again to collapse the format requirements.

* User ID

[Text box]

[Want help making a User ID?](#)

- ✘ Don't use any special character twice in a row.
- ✔ You can use one of these symbols: `- @ _`, but not twice in a row.
- ✔ You must use at least one English letter, A-Z or a-z.
- ✔ You can use numbers too.
- ✔ You must use least 8 characters but fewer than 64.

* Password

Show Passwords

[Want help making a Password?](#)

- ✘ Don't use a password from any of your other accounts.
- ✔ You must use letters and numbers.
- ✔ Make some letters uppercase, make letters some lowercase.
- ✔ Use some of these symbols too:
`{ [(< ! # , $ % ^ @ : \ | / & * - _ + = ; >)] }`

* Confirm Password

[Previous Section](#) [Next Section](#)

Before moving forward, record your Password and User ID.

User IDs and Password Standards:

User IDs assigned by the Security Coordinator consists of the letter “E” plus six characters. The first three numbers is the Sponsor Code.

Users are required to maintain the confidentiality of their passwords and to change their password when they suspect that the privacy of their password may have been compromised.

Each user will be allowed to select their own password based on established password standards.

Create a pin number by selecting 6 digits. Numbers ca not be consecutive (123456) or the same number (999999). Write this number down.

3
Let's set a PIN.

The Personal Identification Number is a 6-digit number we will use to make sure you're the only one going into your account. Be sure to remember it!

If there's an asterisk * we have to get that information.

* New PIN * Confirm New PIN

[Previous Section](#) [Next Section](#)

Enter your current phone number and personal email address below. The email must be immediately accessible. Before you select, Create Your Account, make sure that your information is correct in Steps 1-4.

4
How should we contact you?


If there's an asterisk * we have to get that information.

Telephone

You only have to type the numbers, nothing else. Start with your area code.

* Email Address

[Previous Section](#) [Next Section](#)

That's it!  **Create Your Account**

Proceed to the next page to receive instructions for Confirming your Email. You will not have access until your email has been confirmed.

You'll now be asked to confirm your email. Find the email inbox of the address that you listed in your MyLa registration. Follow the instructions in the email. Once you have confirmed your email, Sign back into as shown below, as shown on the next page.

CONFIRM EMAIL



An email will be sent to the email on record that you must verify. You must click on the Confirm Email option located within the verification email. The verification email will expire in 24 hours.

Once you've confirmed your email, return to the link on the next page and Sign In. You do not need to close out any of the previous pages. However, it will be less confusing if you do not have unnecessary pages open.



YOU ARE NOW READY TO ACCESS EDLINK!

Return to <https://ldoe.edlink.la.gov> and Sign In.

Important: Due to Covid-19 we have made some changes to the licensing process. [Click here](#) for more information.

Welcome to EdLink.

We've revolutionized the way we use data to support students and families of Louisiana.

[Sign In](#)

[Create an Account](#)

DEPARTMENT of EDUCATION Louisiana Believes

Email Us Call Us

Facebook Twitter YouTube Instagram LinkedIn

Louisiana Department of Education
1201 North Third Street, Baton Rouge, LA 70802-5243
1 (877) 453-2721

Report Complaints (about Providers or Unlicensed Sites)
Call Toll-Free: (225) 342-9905
Email: LDELicensing@la.gov

Report Child Abuse
Call Toll-Free: 1 855-4LA-KIDS
(855-452-5437)

Enter the User ID and Password that was used to create the MyLa account.

An official Louisiana.gov website. [Here's how you know.](#)

MyLa

FAQs Help

Sign In

* User ID

* Password

Show Password


[Sign In](#)

Need help? [Click here to get help logging in.](#)

Home FAQs Help Privacy

Click on this link if you've forgotten your User ID or Password. You are not permitted to change your User ID, only retrieve it.

You'll now be navigated to the New User Profile page .

MyLa  [FAQs](#) [Help](#) [Sign In](#)

Account help

@ Resend Verification Email

Never got your email verification? Enter your email address and we'll send you a new verification.

* Email Address

[✓ Send verification Email](#)

👤 Forgot your password?

Enter your User ID and email and we'll send you a link to reset your password.

User ID

Email Address

[✓ Send Password Reset Link](#)

👤 Forgot your User ID?

Enter your email and we'll send you the information.


Email Address


[✓ Send User ID Reminder](#)

❓ Want to know more?

MyLa will replace outdated ways of signing in to Louisiana government websites. Read our Frequently Asked Questions and get to know MyLa

[Read the FAQs →](#)



MyLa  [FAQs](#) [Help](#) [Sign In](#)

Frequently asked questions

? What is MyLa and why do I need to create an account?


MyLa is a service by Louisiana's government which allows you to create a single way to login to participating Louisiana government websites. [Learn more](#) help us make it easier and more efficient for you to do business with Louisiana state agencies.

▶ How does MyLa work?

▶ Who is responsible for MyLa?

▶ What if I change email addresses?

▶ What if I change phone numbers?



NEW USER PROFILE

You'll be asked to complete your profile by entering your personal information. Your SSN will be redacted after move to the next box. Complete each box with a red asterisk. Other boxes are optional. Select Early Childhood. Once all of your information has been entered, select, "Save."

Personal Profile

Account Settings / Personal Profile

Pamela Mertens - Personal Profile

Review or update your personal profile information below.

Name and Contact

Member Name	Contact Information
Prefix	*Primary Phone Number
*First Name Pamela	Secondary Phone Number
Middle Name	*Email Address
*Last Name Mertens	MyLA UserID
Suffix	Staff ID

Copy to Mailing

You will not receive a confirmation. Your information will be "grayed-out" and cannot be edited.

Address Information

Physical Address	Mailing Address
*Street Name 1 1201 N River Rd	*Street Name 1 1201 N River Rd
Street Name 2	Street Name 2
*City Baton Rouge	*City Baton Rouge
*State Louisiana	*State Louisiana
*Zip 70802	*Zip 70802
*Parish/County	*Parish/County

Copy to Mailing

Personal Identification

*Date of Birth 01/12/1985	*SSN ***-**-1902	*Identification Number 6754	*Issuing State Louisiana
*Gender Female	*Race White/Caucasian	Married <input checked="" type="checkbox"/> Yes	

STOP!
If you did not receive a Staff ID # after Saving, complete a Support Ticket.

Entity Affiliation Requested

Select the organization you will be interacting with. Note, your request may take up to 3-5 business days to review.

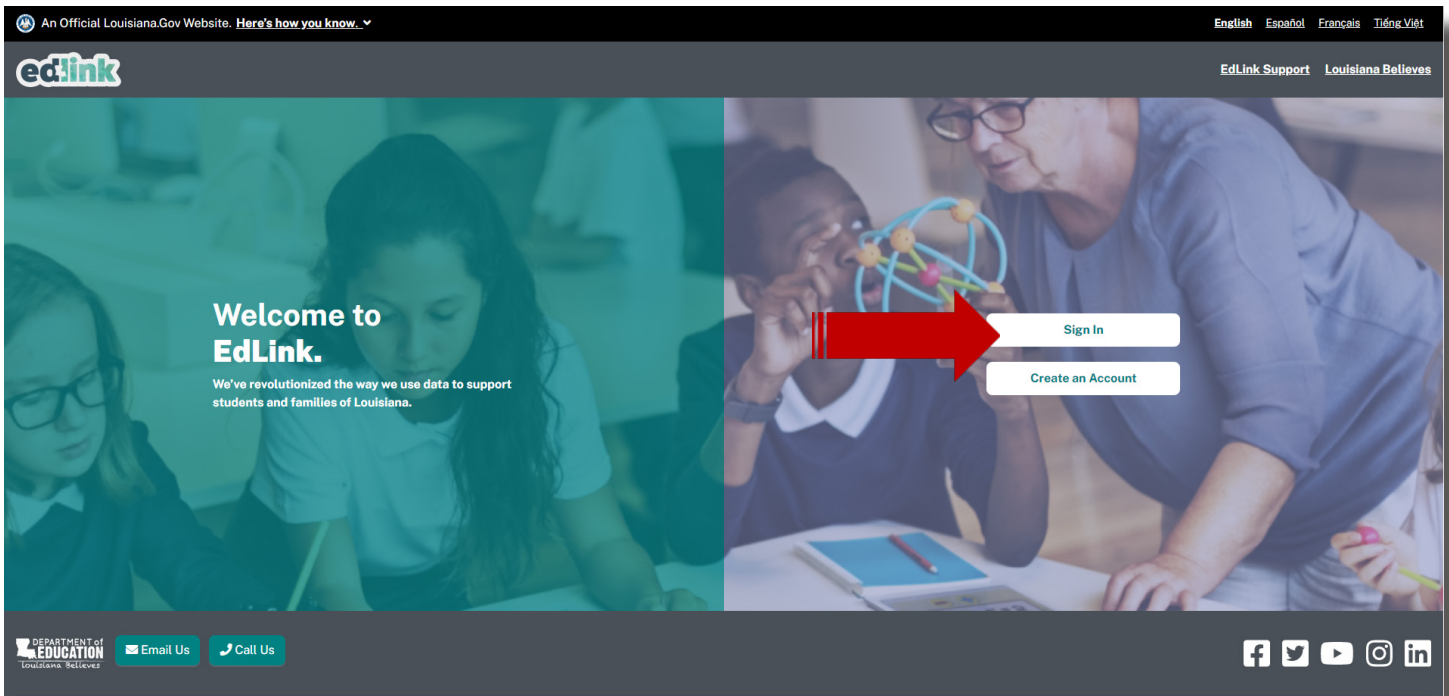
*Which organization?
 Early Childhood K-12



To complete your access, “Sign Out”, from the navigation panel, located under your User ID at the top left side of your screen.



Once again, you'll be navigated to the Edlink Sign In page shown below. Select, Sign In.”



NEW USER DASHBOARD

Your personal Dashboard will appear. On the Dashboard, your Entity Name and License Status is shown, if you are an existing Entity. If you are applying for licensing or certification for the first time, your access will be limited until your application has been approved.

The screenshot shows the EdLink 'My Dashboard' for user Pamela Mertens. The dashboard layout includes a dark sidebar with navigation links: Pamela Mertens, My Dashboard, Messages (12), Account Settings, and Help. The main content area is titled 'My Dashboard' and contains a welcome message: 'Welcome, Pamela Mertens'. Below this are two buttons: 'How to use the EdLink Entity Portal?' and 'Why am I here?'. The 'Get Started' section has two options: 'Ready to start with a new application?' with a 'Find the Right Program' button, and 'Already a member of an existing entity?' with a 'Request Access to an Entity' button. The 'Pending Applications' section shows 'You don't have any Pending Applications'. A yellow callout bubble points to the 'Welcome, Pamela Mertens' section with the text: 'All providers will see this dashboard. After existing providers request access to their Entity, the dashboard will update.'

ALL PROVIDERS WILL SEE THE NEW USER DASHBOARD!

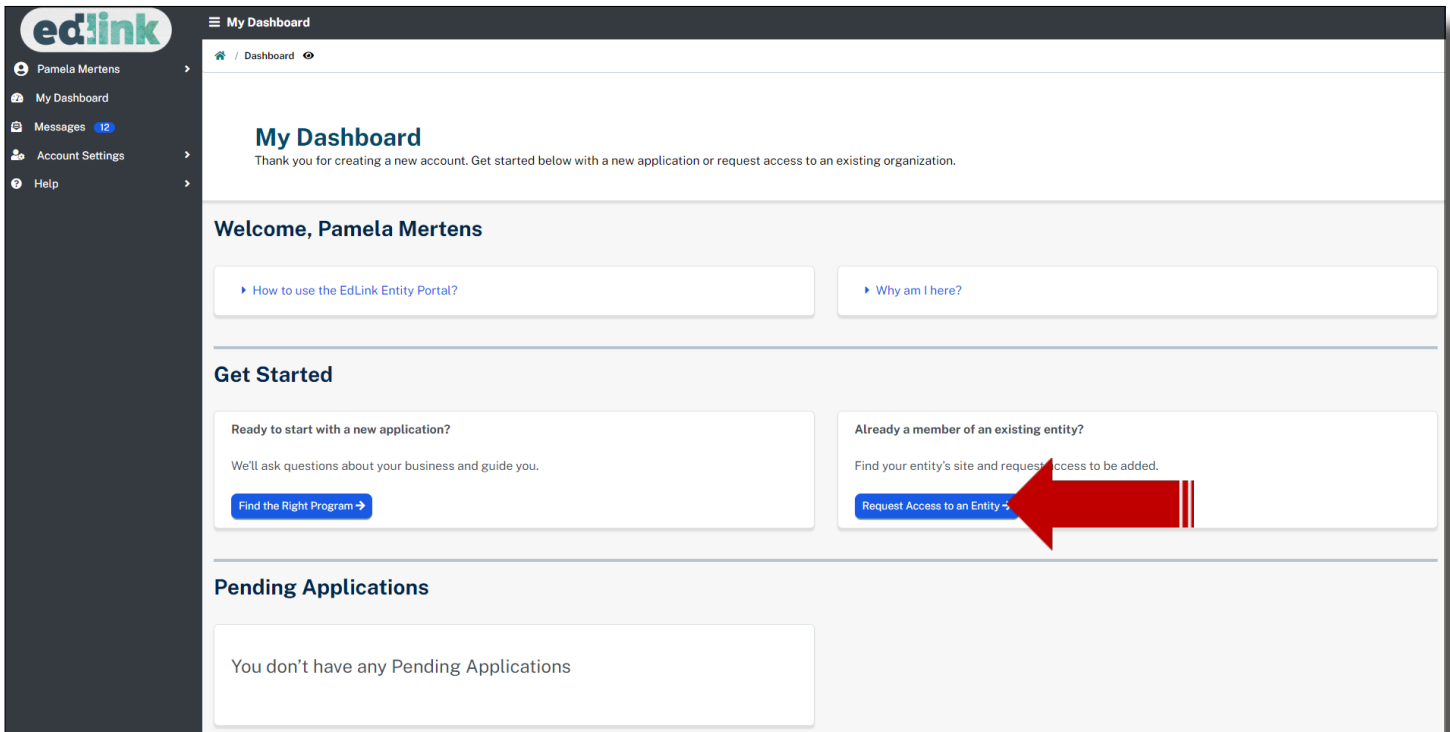
New providers, from the left menu, select Help and Find the Right Program, to begin a new application. **NEW PROVIDERS** will request access **AFTER** a license has been approved and issued.

Existing providers, continue to the next page to request access to your entity and begin your renewal application. you'll request to be assigned as the Entity Manager and Security Coordinator for your each of your entities. You will need to be assigned both roles to gain access. You must make requests for each location, one at a time, for Entity access.

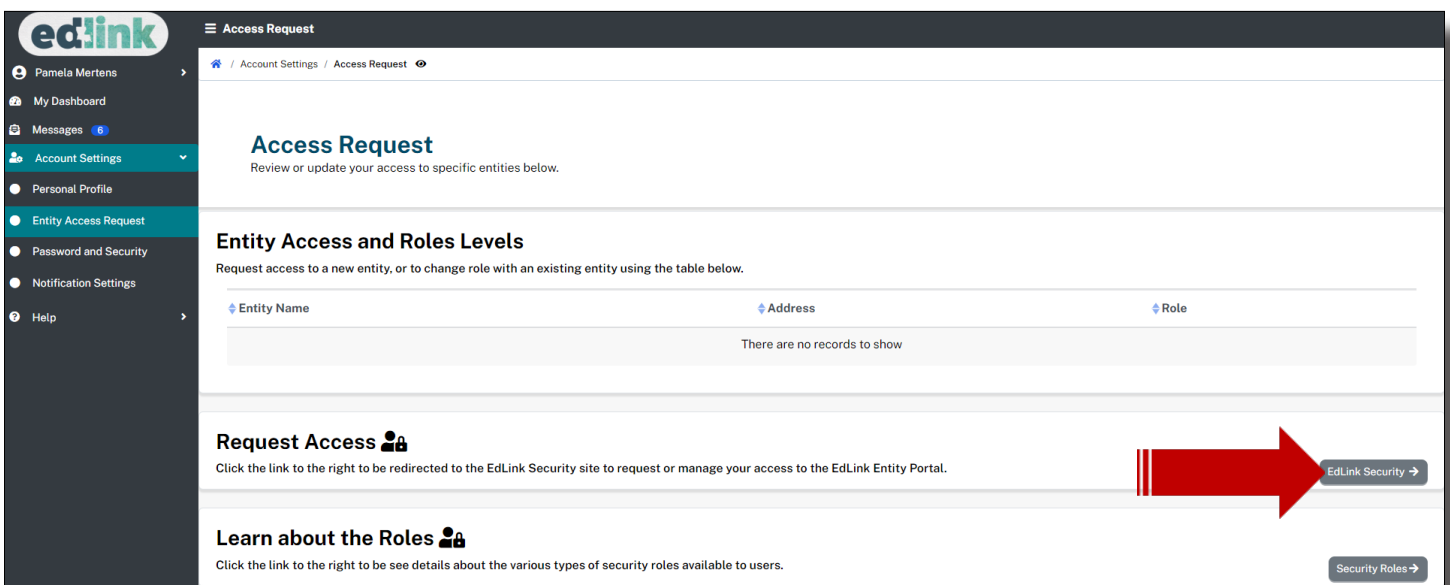
REQUESTING ACCESS FOR EXISTING PROVIDERS (DIRECTORS)

To begin the request for access to your Entity Access, follow these instructions. Directors must request Entity Manager and Security Coordinator to access their entity. **Only 1 Entity Manager per site is permitted.**

Select the blue Requesting Access to Entity button, as shown below.



Next, select the Edlink Security button. The Entity Roles page is currently unavailable. See roles descriptions at the [Edlink Training](#) page



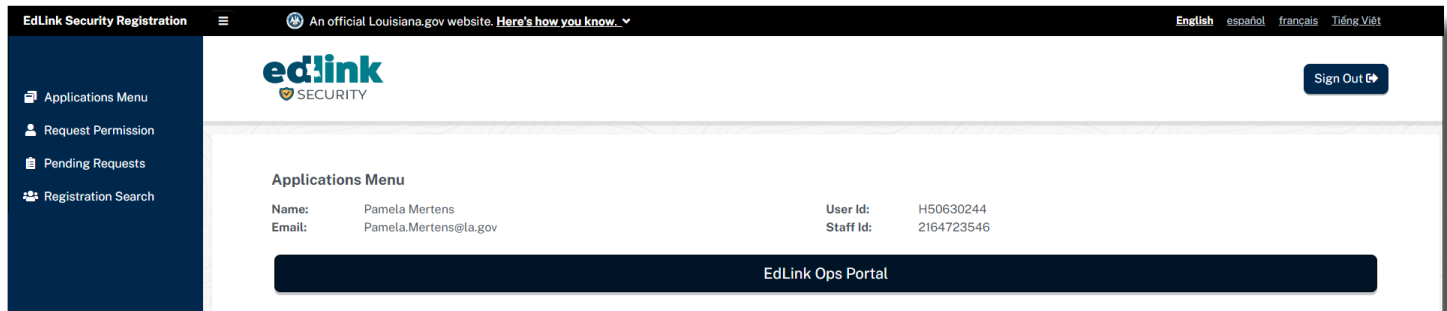
ENTITY MANAGER (DIRECTORS OR OWNERS)

You may also click on the link below to request access to your Entity. Both the previous button and this link will navigate you the same Edlink Security, Self Registration page. Follow the instructions in a step-by-step format to help you do this.

<https://registration.edlink.la.gov>

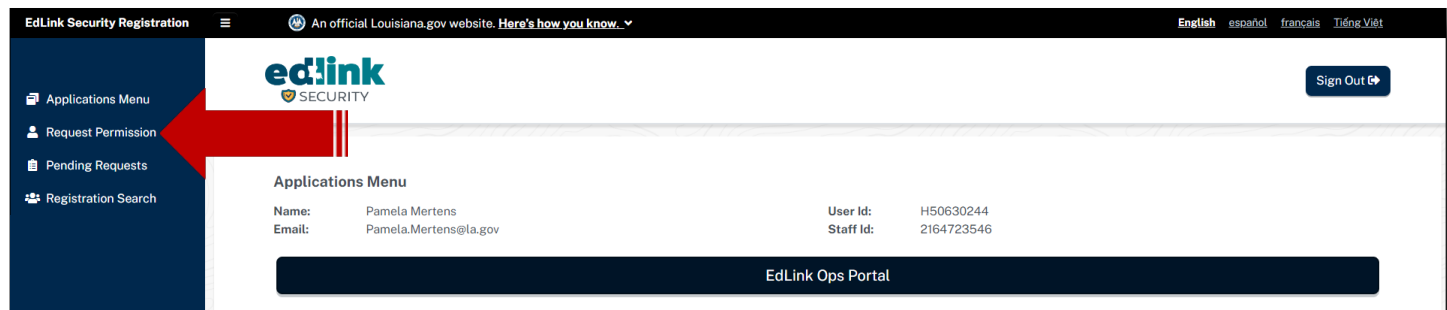


After logging in with your User ID and Password, the following image will appear with your personal information; Name, User ID, Email and Staff ID.



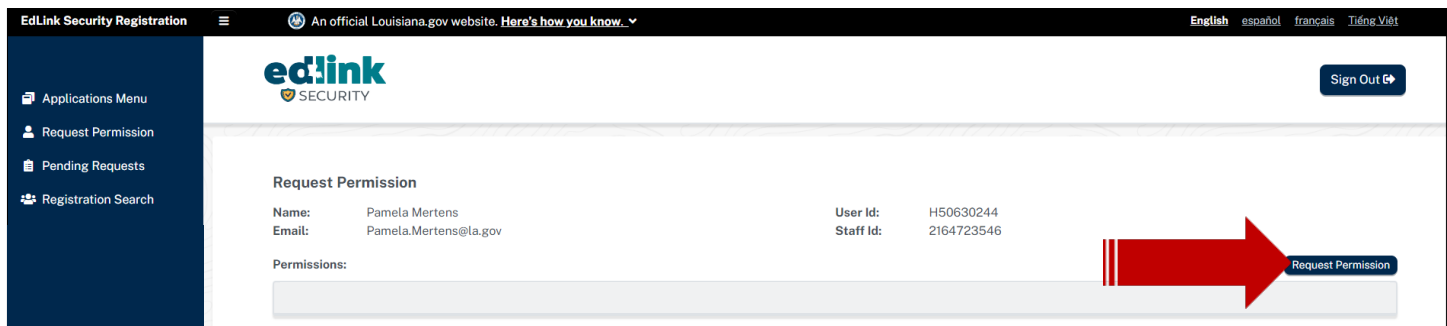
Note: the following screenshots are examples only and not intended to instruct users which roles to select. Please see the [Edlink Training](#) page for Role Descriptions.

STEP 1

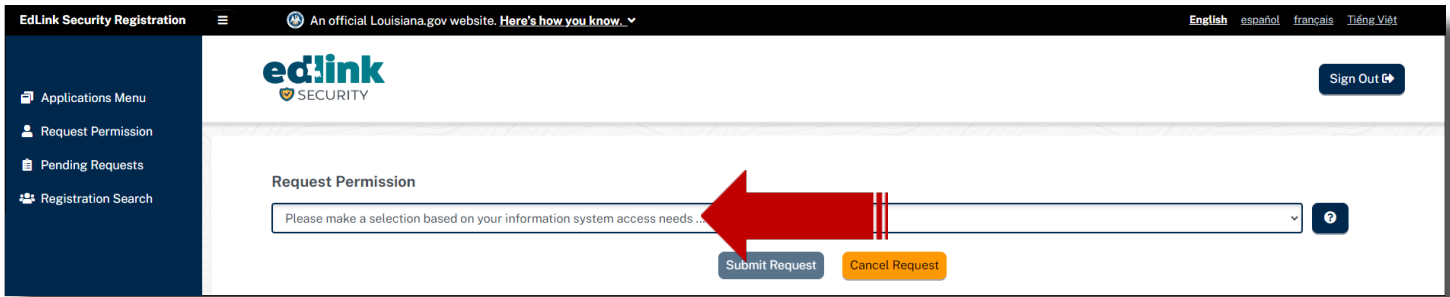


Select Request Permission from the left side Menu.

STEP 2

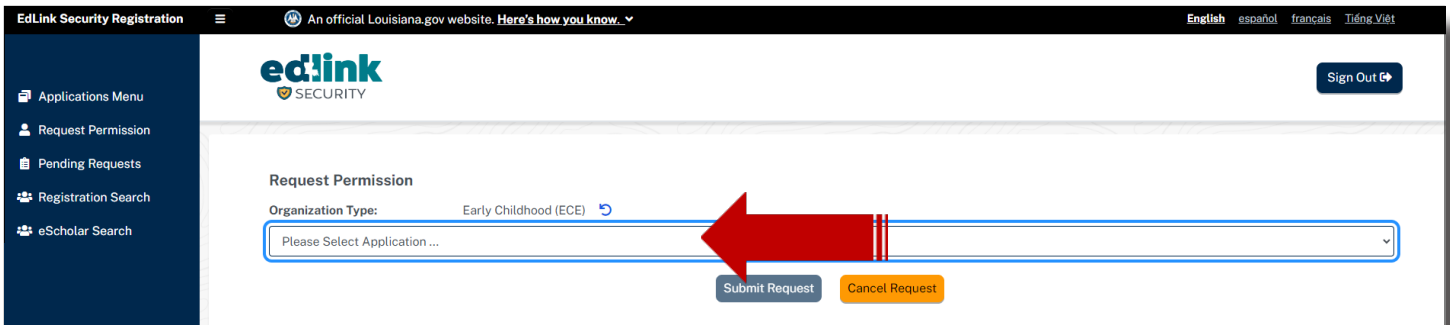


STEP 3



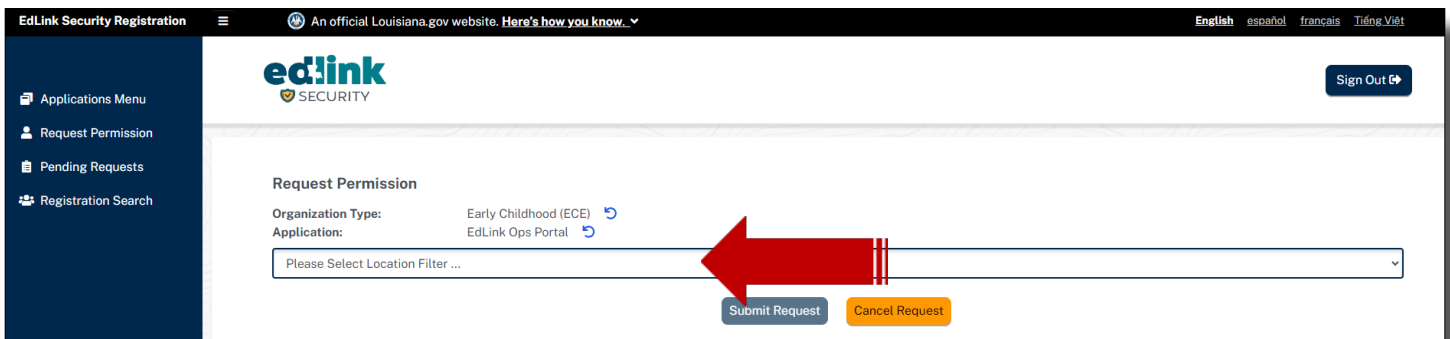
Select Early Childhood (ECE) from the drop-down menu.

STEP 4



Select Edlink Ops Portal from the drop-down menu. Note the small circle with the arrow next to ECE. Click on the circle if you would like to return to the previous screen to make another selection.

STEP 5



Select District and Local from the drop-down menu (bottom selection).

STEP 6

EdLink Security Registration | An official Louisiana.gov website. Here's how you know. | English español français Tiếng Việt

edlink SECURITY | Sign Out

Request Permission

Organization Type: Early Childhood (ECE) ↻
Application: EdLink Ops Portal ↻
Location Filter: District and Local ↻

Please Enter Your Location ...

Submit Request Cancel Request

Begin entering the name of your Entity. IH/FH will enter their first and/or last name. Select the appropriate site as shown in Step 7.

STEP 7

EdLink Security Registration | An official Louisiana.gov website. Here's how you know. | English español français Tiếng Việt

edlink SECURITY | Sign Out

Request Permission

Organization Type: Early Childhood (ECE) ↻
Application: EdLink Ops Portal ↻
Location Filter: District and Local ↻

Please Enter Your Location ...

- 1, 2 Buckle My Shoe (Early Childhood)
1058 Highway 155, Mansura, LA 71350
District Code: Site Code: KL1001
- 1st Academy Early Learning Center (Early Childhood)
78111 Hwy 25, Folsom, LA 70437
District Code: Site Code: ZBF001
- 1st Academy Learning Center (Early Childhood)

Submit Request Cancel Request

Select the appropriate site. Ensure the address is your address, as many Entities have very similar names.

STEP 8

EdLink Security Registration | An official Louisiana.gov website. Here's how you know. | English español français Tiếng Việt

edlink SECURITY | Sign Out

Request Permission

Organization Type: Early Childhood (ECE) ↻
Application: EdLink Ops Portal ↻
Location Filter: District and Local ↻

Location: 1, 2 Buckle My Shoe (Early Childhood) ↻
Address: 1058 Highway 155, Mansura, LA 71350
District Code: Site Code: KL1001

Please Select Role ...

Submit Request Cancel Request

Select Entity Manager (Directors, Owners or Director Designees) and Staff Administrator (HR, Owners, Director Designees and Other Staff). Only 1 Entity Manager per site is permitted.

STEP 10

EdLink Security Registration

An official Louisiana.gov website. [Here's how you know.](#)

English español français Tiếng Việt

Sign Out

Request Permission

Organization Type: Early Childhood (ECE)

Application: EdLink Ops Portal

Location Filter: District and Local

Location: 1, 2 Buckle My Shoe (Early Childhood)

Address: 1058 Highway 155, Mansura, LA 71350
District Code: Site Code: KLI001

Role: ELC Entity Manager

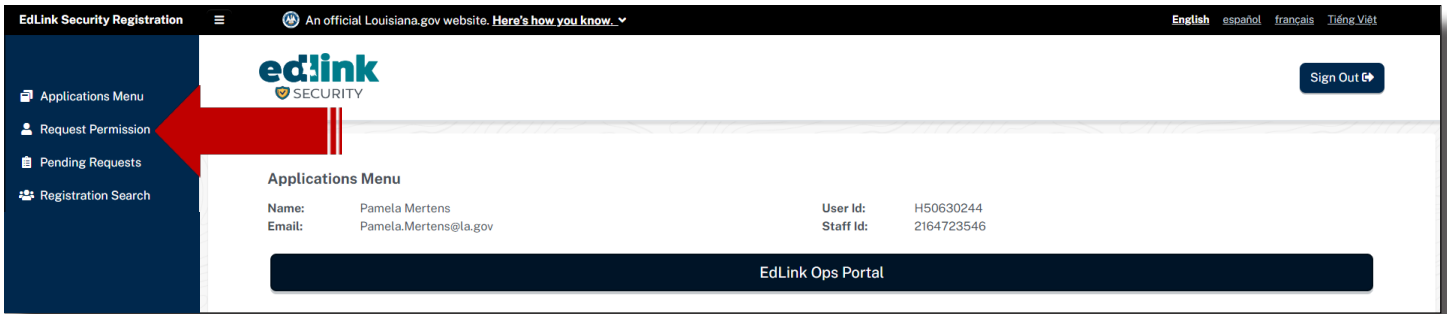
Optional Notification: Requesting Access

Submit Request

Enter “Requesting Access” in the text box and Submit for Approval by LDOE. Please allow 2 business days for LDOE to review your requests. An email notification will be sent as soon as the requests has been reviewed.

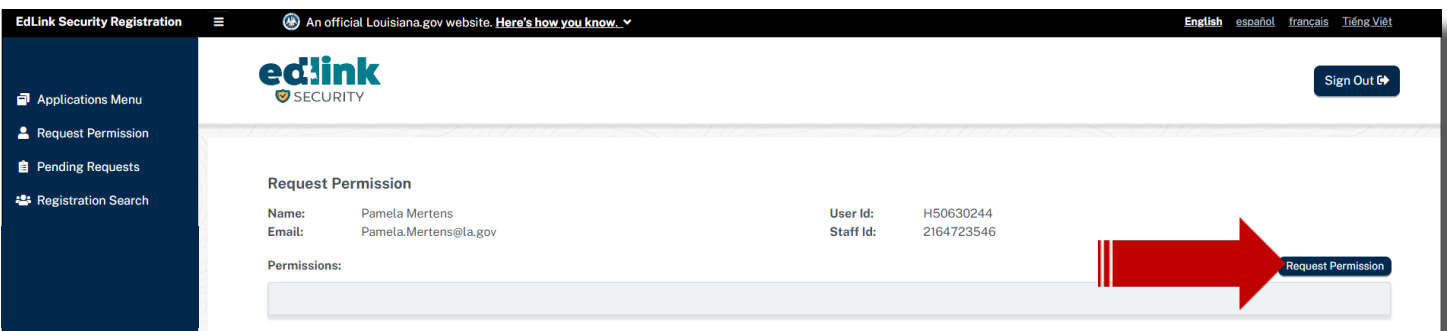
SECURITY COORDINATORS (DIRECTORS OR OWNERS)

STEP 1



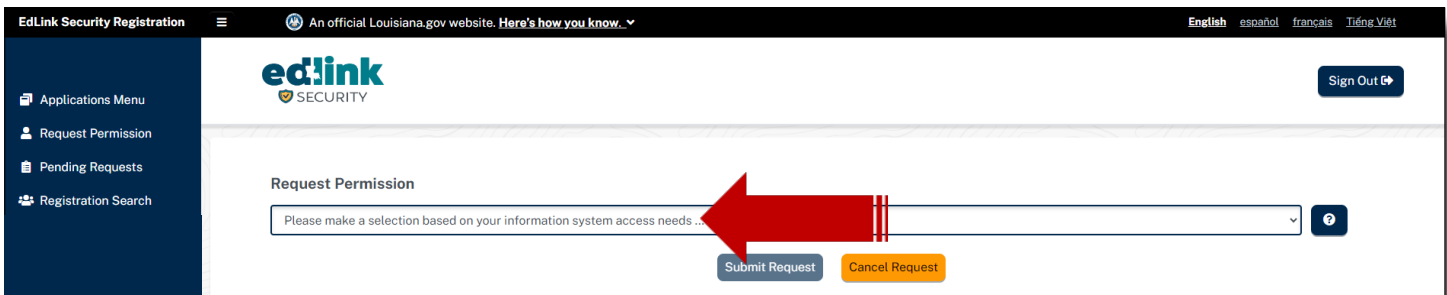
Select Request Permission from the left side Menu.

STEP 2



Select Request Permission from the right side of the screen.

STEP 3



Select Early Childhood (ECE) from the drop-down menu.

STEP 4

EdLink Security Registration | An official Louisiana.gov website. Here's how you know. | English español français Tiếng Việt

Applications Menu
Request Permission
Pending Requests
Registration Search

edlink SECURITY | Sign Out

Request Permission

Organization Type: Early Childhood (ECE)

Please Select Application ...

Submit Request Cancel Request

Select Edlink Security Access from the drop-down menu. Note the small circle with the arrow next to ECE. Click on the circle if you would like to return to the previous screen to make another selection.

STEP 5

EdLink Security Registration | An official Louisiana.gov website. Here's how you know. | English español français Tiếng Việt

Applications Menu
Request Permission
Pending Requests
Registration Search

edlink SECURITY | Sign Out

Request Permission

Organization Type: Early Childhood (ECE)

Application: EdLink Ops Portal

Please Select Location Filter ...

Select District and Local from the drop-down menu (bottom selection).

STEP 6

EdLink Security Registration | An official Louisiana.gov website. Here's how you know. | English español français Tiếng Việt

Applications Menu
Request Permission
Pending Requests
Registration Search

edlink SECURITY | Sign Out

Request Permission

Organization Type: Early Childhood (ECE)

Application: EdLink Security (Access)

Location Filter: District and Local

buck|

1, 2 Buckle My Shoe (Early Childhood)
1058 Highway 155, Mansura, LA 71350
District Code: Site Code: KLJ001

Bucks & Bows Learning Center, LLC (Early Childhood)
387 Major Parkway, New Roads, LA 70760
District Code: Site Code: YA8001

Li'l Bucks N Does Adventure & Learning Center (Early Childhood)

Begin entering the name of your Entity. IH/FH will enter their first and/or last name. Select the appropriate site as shown in Step 7.

STEP 7

EdLink Security Registration

An official Louisiana.gov website. Here's how you know.

English español français Tiếng Việt

Sign Out

Request Permission

Organization Type: Early Childhood (ECE)

Application: EdLink Security (Access)

Location Filter: District and Local

Location: 1, 2 Buckle My Shoe (Early Childhood)

Address: 1058 Highway 155, Mansura, LA 71350

District Code: Site Code: KLI001

Role: Local

Permissions:

- Select All
- Security Coordinator EdLink Contacts
- Security Coordinator EdLink Ops Portal
- Security Coordinator EdLink Security (Access)
- Security Coordinator KinderConnect
- Security Coordinator KinderTrack

Optional Notification:

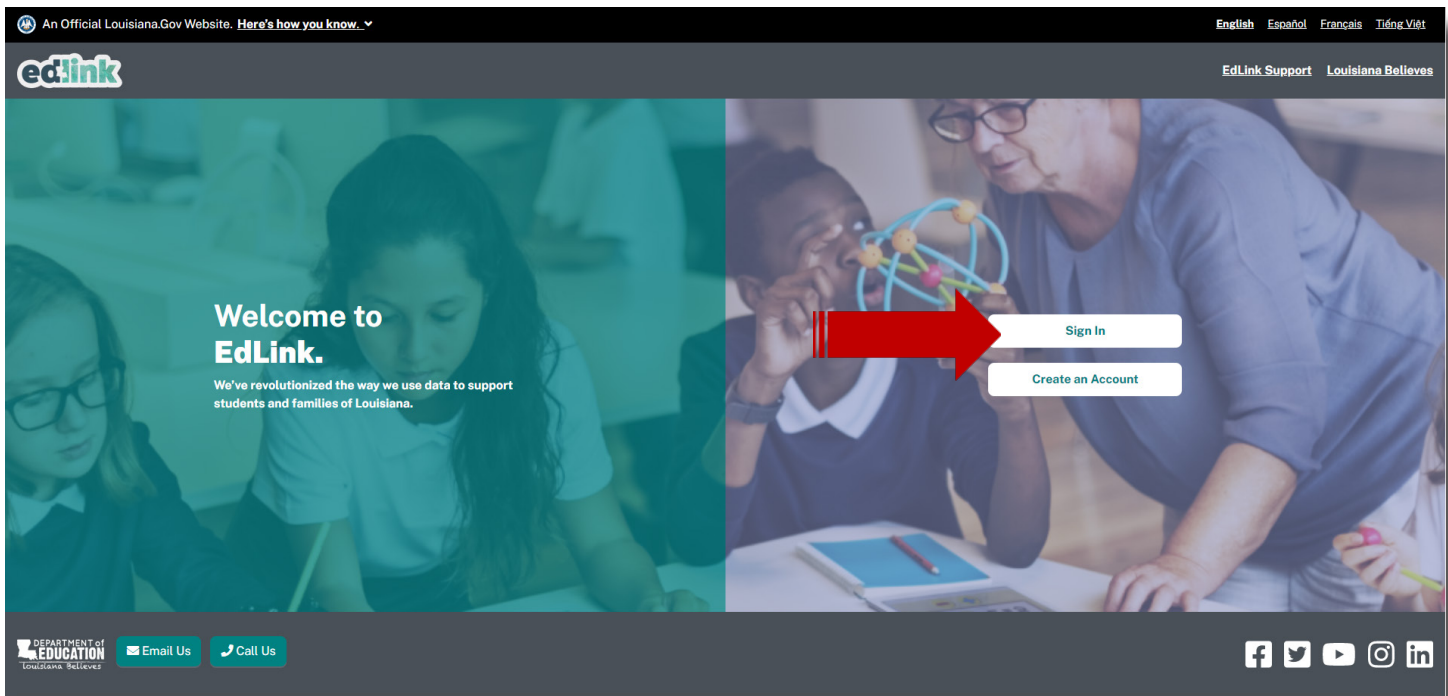
Requesting Access

Submit Request

Check the box for Security Coordinator Edlink Security (Access).

Enter “Requesting Access” in the text box and Submit for Approval by LDOE. Please allow 2 business days for LDOE to review your requests. An email notification will be sent as soon as the request has been reviewed.

Sign Out in the top right-hand corner of the page. Return to <https://ldoe.edlink.la.gov> and Sign In.



ENTITY DASHBOARD

Welcome Back, Pamela Mertens
Welcome to your Entity Management Dashboard. Here you can review and make changes to your entity.

Renew License

Click the "Start Renewal" button to begin a Renewal Application for your entity. If you have multiple entities, select the appropriate site in the left side navigation. Note: An LDOE Licensing Consultant will need to review and approve your submission to receive a new license.

Entity
G-Test the Renew Functionality
1400 Test3
Baton Rouge, Louisiana, 70128

License Details

Licenses Type Type I	License Number 87983365
License Status Open	Expires 10/16/2023

Helpful links

- EdLink Support
- Child Care Health Consultants
- CCCBC
- Office of Public Health
- Publicly-Funded Provider Programs
- CPR and First Aid Vendors
- Emergency Preparedness
- Fire Marshal Inspection
- Quality Providers Library
- Child Care Resource & Referral Agencies

Pending Application and Actions

Your Dashboard will display a left-side navigation menu, Entity drop-down, Entity Snapshot, Entity Name, Address, License Status, License Number and Expiration Date of your License or Certification.

Use the white drop-down menus to view and work with a different Entity, if you have multiple sites.

In the QUICK LINKS section, your renewal button will only be active if you are less than 90 days from your expiration date. If the button is dark green, you may click it and begin your renewal.

OR

Quick Links
The links below are for common, frequently-used actions for applications, changes, or renewals for your business.

[Update Entity Information](#) [Change License Type](#) [Change of Location](#) [+ Start New Application](#) [Submit Renewal Application](#)

All information pertaining to your Entity will be accessible for change within the Renewal Application. This includes Director and staff additions or deletions, credentials, hours of operation and any changes to your services. Read the instructions carefully once you've opened the Renewal Application.

***Only 1 application may be in progress at any given time, per Entity. If of the green buttons have been clicked on; Change Entity Information, Change of License Type, Change of Location or Submit renewal Application, you will not be able to select any other type of application. The selections will remain light green until LDOE approves the application (changes), the application is canceled or withdrawn.**

***The Start New Application button should only be selected if a provider wants to ADD AN ADDITIONAL Entity.**

NEW PROVIDER APPLICATION PROCESS

Find the Right Program will navigate you to a series of questions that will help identify which Type of licensing or Certification is the best fit for you and children who will be in your care.

edlink My Dashboard

Home / Dashboard

My Dashboard

Thank you for creating a new account. Get started below with a new application or request access to an existing organization.

Welcome, Pamela Mertens

[How to use the EdLink Entity Portal?](#) [Why am I here?](#)

Get Started

Ready to start with a new application?
We'll ask questions about your business and guide you.
[Find the Right Program](#)

Already a member of an existing entity?
Find your entity's site and request access to be added.
[Request Access to an Entity](#)

Pending Applications

You don't have any Pending Applications

Find the Right Program is also located in the left navigation panel in Help. Both methods will navigate to the same series of questions.

Select, Early Childhood by clicking on the box. The box will darken slightly and another set of options will appear beneath the previous question.


The screenshot shows the 'Find the Right Program' page on the edlink platform. The user is Pamela Mertens. The page title is 'Find the Right Program' with a subtitle: 'Answer the questions below to determine the correct application for your center. You can change your answers as you go to update the recommendation below.' A 'Return to Dashboard' button is visible. The main question is 'Which service do you want to provide?' with two options: 'Early Childhood' and 'K-12 Schooling'. A large red arrow points to the 'Early Childhood' button, which is highlighted with a dark grey background.

The screenshot shows the next step in the 'Find the Right Program' process. The 'Early Childhood' button from the previous screen is now dark grey, indicating it has been selected. A red arrow points to it. Below this, a new question appears: 'Where do you provide your services?' with three options: 'At My Home', 'In the Child's Home', and 'Early Learning Center'. A red arrow points to the 'At My Home' option. Below each option is a brief description: 'At My Home' (I want to provide child care in my home with a maximum of 6 children), 'In the Child's Home' (I want to provide care to children in their home. Example: babysitter or nanny), and 'Early Learning Center' (I want to be a Licensed Center, that provides care for 7 or more children).

edlink Find the Right Program


Pamela Mertens
My Dashboard
Messages 6
Account Settings
Help

Where do you provide your services?




At My Home

I want to provide child care in my home with a maximum of 6 children



Home


I want to provide care to children in their home. Example: babysitter or nanny




Early Learning Center

I want to be a Licensed Center, that provides care for 7 or more children


Do you wish to provide service to families, who are approved for Child Care Assistance?





Yes

Our CCAP providers are **eligible for up to \$9,411 annually per publicly funded child!**




No


Your center will be **missing out on earning up to \$35.65 per child per day in assistance.**

edlink Find the Right Program

Pamela Mertens
My Dashboard
Messages 6
Account Settings
Help


Do you wish to provide service to families, who are approved for Child Care Assistance?





Yes

Our CCAP providers are **eligible for up to \$9,411 annually per publicly funded child!**



No


Your center will be **missing out on earning up to \$35.65 per child per day in assistance.**

You may be eligible for the following benefits

Click "Learn More" to see additional details of the programs and tools available to you.


Child Care Assistance

Registered Family Child Care providers can be eligible for up to \$9,411 annually per publicly funded child!




Child and Adult Care Food Program

You can be eligible for up to \$6 per child per day from the Federal Division of Nutrition Services.



Advertise your School or Center

Families interested in attending your center can be able to find your provider information on the School Finder Website.



RECOMMENDED

Type III License Application ←

Let's begin filling out your application today.

→ Start Application

By scrolling back up and changing your responses, a new recommendation for license type will be displayed. Click on any of the picture links above for more information on benefits that may be available to you as a provider and children in your care. Once you have decided which license or certification type you'll need, select, Start Application.

In this section, you'll confirm your license type and if you have either situation listed below. You will most likely not select either situation and will leave the selection on None (default). If the correct license or certification type is not displayed, click on the large gray button, Return to Find the Right Program, to change the responses to the series of questions. A new type may be recommended. Start the application as before. If the license type is correct, select, Continue to Application.

edlink Confirm License Type

Home / Help / Find the Right Program / Confirm License Type

Confirm License Type

Please review the additional question below to continue to your application home page.

Section 1: Application Type

* Please answer the following questions about your application. Are you either a Military Organization or Purchasing a Center from another entity?

None I am a Military Organization I am purchasing an existing entity

Choose the License Type you want to continue to.

* Select License Type

Type III

[← Return to Find the Right Program](#) [Continue to Application →](#)

Begin your application. 

APPLICATION HOME AND INSTRUCTIONS

Take a few moments to read all of the instructions, especially those within banners. This particular blue banner provides specific instructions on the order of operations and how to navigate through the application. You must visit each Step in chronological order first. Then you will be permitted to revisit any of the Steps in any order.

Blue: Need to select first

Green: Step is complete (Exception: Step 7)

Yellow: Incomplete

Badges will change colors as you complete the application.

The screenshot shows the 'Application Home' page with a navigation breadcrumb: [Find the Right Program](#) / [New Type III Application](#) / [Application Home](#). Below the breadcrumb is the title 'Application Home' and a brief description: 'The Application Home page lists all the required steps in completing the Type III Licensing Application. Once all required information is submitted, you will be able to submit your application for review.' A button labeled 'Return to Application Selector' is located below the description. A blue banner contains a 'Page Help' message: 'We have provided a way for you to keep track of all the information needed for you to complete your school's application. After all required information is submitted within each step, you will see a green "Completed" badge on the Application Home page. If a section remains incomplete there will be a yellow "Incomplete" badge. Once you have started a step, you can always return to a previous section using the "Return to Previous" button or return to this Home page by using the "Return to Application Home" button.' Below the banner is a list of 9 steps, each with a description and a 'Fill Out Step' button. A large red arrow points to the 'Fill Out Step 1' button. The steps are: 1 - Application Instructions, 2 - Funding Source, 3 - Early Learning Center Information, 4 - Services and Hours, 5 - Ownership Type, 6 - Center Owner, 7 - Center Staff, 8 - Criminal Background Check, and 9 - Emergency Plan.

Application Home
The Application Home page lists all the required steps in completing the Type III Licensing Application. Once all required information is submitted, you will be able to submit your application for review.

[Return to Application Selector](#)

Page Help. We have provided a way for you to keep track of all the information needed for you to complete your school's application. After all required information is submitted within each step, you will see a green "Completed" badge on the Application Home page. If a section remains incomplete there will be a yellow "Incomplete" badge. Once you have started a step, you can always return to a previous section using the "Return to Previous" button or return to this Home page by using the "Return to Application Home" button.

1 - Application Instructions
This page describes all the requirements and instructions for completing the Licensing Application. [Fill Out Step 1](#)

2 - Funding Source
Enter all the funding sources for your Early Learning Center on this page. [Fill Out Step 2](#)

3 - Early Learning Center Information
Provide the name, location, and contact information for your Early Learning Center on this page. [Fill Out Step 3](#)

4 - Services and Hours
This page allows you to enter the Center's hours of operation and list the services offered at your facility. [Fill Out Step 4](#)

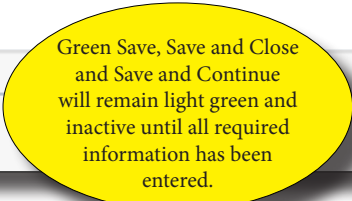
5 - Ownership Type
This page asks for the legal Ownership type of your Early Learning Center. [Fill Out Step 5](#)

6 - Center Owner
List all the legal Owners of the Early Learning Centers on this page. [Fill Out Step 6](#)

7 - Center Staff
Enter in all currently hired Directors, Director Designees and Other Staff on this page. [Fill Out Step 7](#)

8 - Criminal Background Check
This page will provide you the status of all Owners, Directors, and Staff who have completed a Criminal Background check. [Fill Out Step 8](#)

9 - Emergency Plan
The center's Emergency Preparedness Plan and emergency contacts will be completed on this page. [Fill Out Step 9](#)

10 - CCAP Review and accept the details of the Child Care Assistance Program on this page, and supply additional information about your Center's fees.	Fill Out Step 10
11 - Academic Approval Review and accept the details of the Academic Approval Agreement.	Fill Out Step 11
12 - Document Upload This page allows you to upload all required supporting documentation for your Early Learning Center.	Fill Out Step 12
13 - Banking Information This page will collect you banking information.	Fill Out Step 13
	
Submit Application →	

Step 1 consists of the application instructions. The instructions are specific to your license type, so take the time to read them carefully. There are new regulations that may regulations that impact your licensing. Links and detailed instructions are provided in this section for various requirements you'll need for licensing or certification. Links are provided for updating credentials for all staff. A link to the CCCBC (background check) is also in this section. Expand to read the instructions.

The "Application Instruction" page has 18 Sections, which are:

- List of all Staff Members
- Child Care Civil Background Check
- Current Commercial and Medical Liability Insurance
- Current State Fire Marshal Inspection
- Current Office of Public Health Approval
- Pictures of Center
- Emergency Preparedness Plan
- Documentation of Ownership
- Qualifications of Director and Designee
- Additional Supporting Documents (based on location or services offered)
- Provider Agreement /Provider Rate Agreement
- Verification of identity (must be a government issued picture ID)
- Social Security Cards (copy) for all owners and directors
- IRS SS-4 Form (IRS generated copy)
- Verification of checking or savings account
- Verification of Rates
- Pre-Service Orientation Training
- Louisiana CCAP Time and Attendance Equipment Agreement

Notes:

- Providers may "Expand" the sections one by one or all at the same time;
- Providers may "Collapse" the sections one by one or all at the same time.
- The "Agree" option must be checked "Yes, I Agree" to proceed to the next page.
- Select the "Save and Continue" option to retain Provider information and to proceed.

Application Instructions

Initial Application for license to operate an Early Learning Center. A License is required **Prior** to opening your Center.

[← Return to Application Home](#)



▼ List of all Staff Members

All On-Site Staff Members will need to be identified in the Center Staff section of the license application. This information will be validated against the CCCBC system status of background checks. Director information is required in this section of the application. If the Director has a responsibility at another Center then a Director Designee is also required.

You will need to provide information about all Current Hired Staff. This includes their personal address, phone number, and additional personally identifiable information. You will also need to upload training documentation for any Directors and Director-Designees. Owners who are also On-Site Staff members will be required to enter their details on both the Center Owner and Center Staff pages.

▶ Child Care Civil Background Check

▶ Current Commercial and Medical Liability Insurance

▶ Current State Fire Marshal Inspection

▶ Current Office of Public Health Approval

▶ Pictures of Center

▶ Emergency Preparedness Plan

▶ Documentation of Ownership

▶ Qualifications of Director and Designee

▶ Additional Supporting Documents (based on location or services offered)

▶ Provider Agreement / Provider Rate Agreement

▶ Verification of identity (must be a government issued picture ID)

▶ Social Security Cards (copy) for all Owners and Directors

▶ IRS SS-4 Form (IRS generated copy)

▶ Verification of checking or savings account

▶ Verification of Rates

▶ Pre-service Orientation Training

▶ Louisiana CCAP Time and Attendance Equipment Agreement

***I have read and understand all the application instructions. I'm aware that supporting documentation will need to be uploaded prior to submitting my application.**

Yes, I Agree

[← Back to Application Home](#) [Save and Continue →](#)

You must check the, Yes I Agree, for the Save and Continue button to proceed to Step 2, Funding Source. You will have the option at any time throughout your application, to return to this Step to review the instructions or to access links. Simply click on, Back/Return to Application Home Page. Then select, Step 1.

FUNDING SOURCES

Funding Source

Find the Right Program / New Type III Application / Funding Source

Funding Source
Please fill in the Funding Source for your Center. Note: Type III applications include the Child Care Assistance Program funding by default.

[← Return to Application Home](#)

Section 1: Funding Source
How will your center be funded? Choose all that apply:

Early Head Start Head Start

Private Pay Child Nutrition Program

Early Head Start Child Care Partnership

[← Back to Application Instructions](#) [Save and Continue →](#)

Private Pay will be a default even if you are Grant, CCAP or Headstart funded. Select any additional sources. Select Save and continue.

Select, Save and Continue to proceed to Step 3, Early Learning Center Information.

EARLY LEARNING CENTER INFORMATION

In the early Learning Center section, input the name of your new center. Many centers are identically or similarly named, so click on the School and Center Finder link to see if the name you've chosen is already taken by another provider. If so, return to the ELC Name section and modify your center name so that it is unique.

☰ Early Learning Center Information

Early Learning Center Information

The Early Learning Center information on this page will be linked to the center profile on the LDOE School Finder website.

← Return to Application Home

Section 1: Early Learning Center Name


*As it will appear on [School or Center Finder](#)

DEPARTMENT of EDUCATION
Louisiana Believes

School Finder Home Favorites Compare Español Louisiana Believes

Louisiana School and Center Finder

Welcome to our newly redesigned Louisiana School Finder rebuilt to better meet your needs. ✕



Explore Schools, Centers, and Systems

Search by Address, Name, or School System

Age / Grade Level

Search

Louisiana Department of Education

1201 North Third Street
Baton Rouge, LA 70802-5243
1-877-453-2721

Louisiana Schools Data

Call Us Toll-Free

f t

Close the link's browser tab if you are finished searching. All links opened from within the application, may be closed at any time without impacting the application process. Each link opens into a separate window.




DEPARTMENT of **EDUCATION**
Louisiana Believes

School Finder Home Favorites Compare Español Louisiana Believes

Louisiana School and Center Finder

Welcome to our newly redesigned Louisiana School Finder rebuilt to better meet your needs.



Explore Schools, Centers, and Systems

Search by Address, Name, or School System

baby

Explore schools and centers by Address

- Baby J's Smokehouse - Grill, Mohican Street, Baton Rouge, LA, USA
- Babytown Lane, Brusly, LA, USA
- Baby Depot, Airline Highway, Baton Rouge, LA, USA
- Babylonia, Coursey Boulevard, Baton Rouge, LA, USA

Go right to your school or center

- Baby Your Baby Childcare, 2724 S. Hodgeson Avenue, Gonzales, LA, 70737
- Barney & Baby Bop, 520 Martin Luther King Avenue, Patterson, LA, 70392
- St. Mary Parish-Baby Bear Head Start Center, 710 Greenwood Street, Morgan City, LA, 70380**
- Country Day's Early Childhood Baby, 305 Woodvine Avenue, Metairie, LA, 70005

powered by Google

Louisiana Department of Education

1201 North Third Street
Baton Rouge, LA 70802-5243
1-877-453-2721

Call Us Toll-Free

Louisiana Schools Data

The School and Center Finder displays individual Center and Provider pages for parents and other providers.

DEPARTMENT of **EDUCATION**
Louisiana Believes

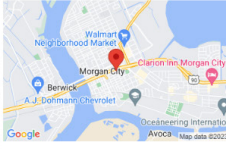
School Finder Home Favorites Compare Español Louisiana Believes

St. Mary Parish-Baby Bear Head Start Center

+ Add to Compare + Add to Favorites

Early Childhood Performance Rating
Not applicable for this center for 2020-2021.

Star Rating ★★★★★



[View Maps](#) 710 Greenwood Street
Morgan City, LA 70380

985-385-6950
afrank6333@aol.com

Mon	7:45am to 2:45pm
Tue	7:45am to 2:45pm
Wed	7:45am to 2:45pm
Thu	7:45am to 2:45pm
Fri	7:45am to 2:45pm

About Academic Performance

Early Childhood Data Limitations for 2020-2021. Due to the impact of COVID-19, BESE adopted flexibilities in publishing performance scores and ratings. The Department has published Performance Scores based on 2020-2021 data when these scores were higher than Performance Scores published in Fall 2020. In all other cases, the Department extended 2019-2020 Performance Scores.

Overview

Ages / Grades Served Toddler (ages 1-2)-PK (ages 3-4)	Director / Principal Mrs. Damita Hawkins Mrs. Vicky Burrell
District / Parish St. Mary Parish	Transportation Yes
School Type Early Head Start/Head Start Licensed Center	How to Enroll https://www.stmaryk12.net/Page/6771
License Type III	Inspection Visit Information Click here to view inspection visit information

Close the link's browser tab if you are finished searching. All links opened from within the application, may be closed at any time without impacting the application process. Each link opens into a separate window.

In “Step 3: Early Learning Center Information,” there are 3 subsections, which are:

- Section 1: Early Learning Center Name
- Section 2: Address Information
- Section 3: Early Learning Center Contacts

In “Section 1: Early Learning Center Name,” there is 1 text box that requires Provider to enter information:

- Type in the school or center name as it will appear on School or Center Finder (red marked part is a hyperlink)

In “Section 2: Early Learning Center Name,” there are 2 subsections that requires Provider to enter information within, which are:

- Physical Address-Enter the physical address here.
- Mailing Address-Enter the mailing address here.

In the “Physical Address” drop-down, there is only 1 drop-down but 5 text boxes that requires Provider to enter information, which are:

- Street Name 1
- Street Name 2
- City
- Zip
- State(drop-down)
- Parish/County

Note:

- Providers may utilize the “Copy to All” selection if physical and mailing addresses are the same.

In the “Mailing Address” drop-down, there is only 1 drop-down but 5 text boxes that requires Provider to enter information, which are:

- Street Name 1
- Street Name 2
- City
- Zip
- State (Drop-down)
- Parish/County

In “Section 3: Early Learning Center Contact,” there are 7 text boxes that requires Provider to enter information, which are:

- Primary Telephone Number
- Secondary Telephone Number
- Notification Email Address
- Center Website Address
- Center Facebook Page
- Center Twitter Account
- Center Instagram Account
- Is your Center located in a School? (Yes/no question)

After entering all of the Provider’s information and once again selecting, “Save and Continue,” the “Service and Hours” page will appear. Provider must enter all mandatory information before proceeding to the next page.

Early Learning Center Information

Section 1: Early Learning Center Name

*As it will appear on [School or Center Finder](#)

NASA Babies

If you receive any errors on this page, check that the name is not already taken or contact EdlinkSupport@la.gov.

Section 2: Address Information

Physical Address

*Street Name 1
4562 Apollo Rd.

Street Name 2

*City
Houston

*State
Louisiana

*Zip
89874

*Parish/County
Claiborne

[Copy to Mailing](#)

Mailing Address

*Street Name 1
4562 Apollo Rd.

Street Name 2

*City
Houston

*State
Louisiana

*Zip
89874

*Parish/County
Claiborne

Early Learning Center Information

*City
Houston

*State
Louisiana

*Zip
89874

*Parish/County
Claiborne

[Copy to Mailing](#)

*City
Houston

*State
Louisiana

*Zip
89874

*Parish/County
Claiborne

Section 3: Early Learning Center Contacts

*Primary Telephone Number
365-987-5489

Secondary Telephone Number

*Notification Email Address
nasababies@gmail.com

Center Website Address

Center Facebook Page

Center Twitter Account

Center Instagram Account

Is your Center located in a School?
 No

[← Back to Funding Source](#)

[Save and Continue →](#)

The information that is entered in this Step will be visible to anyone who accesses and searches centers and providers using the School and Center Finder. This is a great and free opportunity to advertise your center and the services that will be offered. Include your URL's, social media pages, email and phone numbers. This information can be edited at a later time by submitting an Entity Change Application, which is very quick and simple.

Select, Save and Continue to proceed to Step 4, Services and Hours.

SERVICE AND HOURS

In the “Services and Hours” section, there are 3 subsections that initially appear and requires information to be entered, which are:

- Section 1: Licensed Capacity
- Section 2: Operating Hours
- Section 3: Additional Services
-

In “Section 1: Licensed Capacity,” there are 3 text boxes and 2 drop-downs, requiring information to be entered, which are:

- Select total capacity -Enter total capacity number here.
- Enter Age- Enter age here.
- Select Age Range (Drop-down)
- Enter Age- Enter age here.
- Select Age Range (Drop-down)

In “Section 2: Operating Hours” section, questions must be answered using Yes or No, selection of each day and time ranges. Each day requires that the Provider select whether or not the school or center will be open or closed. If the school or center will be open, select the “Open From” option and enter the time in which it will open. Next, select the “Open Until” option and enter the time in which the school or center will be closed.

A “Yes or No” response is required the following 2 questions:

- Is this facility open all months of the year?
- Is this facility open 24 hours a day?

A time range must be entered within the following 2 drop-downs:

- From (Open)
- To (Close)

Select a day of the week that the previous time range will apply to.

- Monday
- Tuesday
- Wednesday
- Thursday
- Friday
- Saturday
- Sunday

Note:

- Providers may utilize the “Copy to All” selection if all of the days will have the same operational open and close times.

In "Section 3: Additional Services," there are 10 options from which the Provider must choose from, in addition to 1 "checked/unchecked" box. These options are:

- Before Care
- After Care
- Summer/Holiday Hours
- All Day
- Half Day
- Half-Day Only
- Overnight Care (9 pm to 6 am)
- Transportation (To/From Home or School)
- Transportation (Field Trips)
- Special Needs

Note:

If a Provider chooses any of the options from "Section 3: Additional Services", "Section 4: Additional Service Hours" will appear requesting that additional information be entered.

In this section, complete all boxes that contain red asterisks. Information must be entered and be formatted properly to Save and Continue.

Services and Hours
The information entered on this page will be linked to the Center's profile on the LDOE School Finder website.

[← Return to Application Home](#)

Section 1: Licensed Capacity

*How many buildings will be used by the children:

*How many classrooms will be used by the children:

*Enter Age: Minimum age being served

*Select Age Range:

*Enter Age: Maximum age being served

*Select Age Range:

If you are offering care to children under 1 year in age, you'll be mandated to sign and date (always today's date) into the Safety Approved Crib Statement shown below. You will need to update the date each time this page is accessed.

Section 1: Licensed Capacity

*How many buildings will be used by the children:

*How many classrooms will be used by the children:

*Enter Age: Minimum age being served

*Select Age Range:

*Enter Age: Maximum age being served

*Select Age Range:

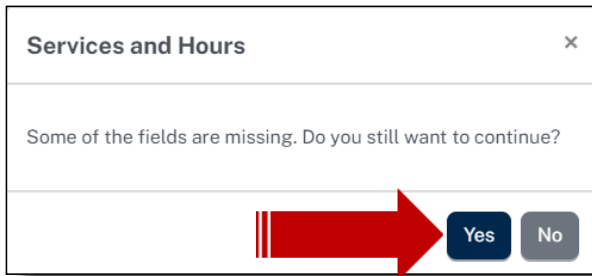
Safety Approved Cribs (less than 1 yr old)

This statement must be certified by the applicant anytime they make a new request to take care of a child that is less than 1 year old in a center.

I certify that the center listed on this application currently has the safety approved cribs available for each infant in care.

*Signature: Type your full name to certify.

*Today's Date: Enter today's date in the format of MM/DD/YYYY.



If you need to leave this page or any other page in the application, before it's complete, select, Save and Continue. You'll receive this message box. Do not be alarmed. It's only a reminder that you did not enter all information. What you have entered will be saved and you can return to this page at any time to finish entering all of your information.

Use the toggles to slide and select yes or no and the days that the center will be in operation. Sections 3 and 4, Additional Services and Hours, will provide additional toggle options if you indicate that additional hours and services will be provided.

Section 2: Operating Hours

*Is this facility open all months of the year? Yes

*Is this facility open 24 hours a day? No

Day	Open	Open From:	Open Until:
Monday	<input checked="" type="checkbox"/> Open	07:00 AM	05:00 PM
Tuesday	<input checked="" type="checkbox"/> Open	07:00 AM	05:00 PM
Wednesday	<input checked="" type="checkbox"/> Open	07:00 AM	05:00 PM
Thursday	<input checked="" type="checkbox"/> Open	07:00 AM	05:00 PM
Friday	<input checked="" type="checkbox"/> Open	07:00 AM	05:00 PM
Saturday	<input type="checkbox"/> Closed	--:--	--:--
Sunday	<input type="checkbox"/> Closed	--:--	--:--

[Copy to all](#)

Section 3: Additional Services

<input checked="" type="checkbox"/> Before Care	<input type="checkbox"/> All Day	<input type="checkbox"/> Transportation (To/From Home or School)
<input checked="" type="checkbox"/> After Care	<input type="checkbox"/> Half Day	<input type="checkbox"/> Transportation (Field Trips)
<input type="checkbox"/> Summer/Holiday Hours	<input type="checkbox"/> Half Day Only	<input checked="" type="checkbox"/> Special Needs
	<input type="checkbox"/> Overnight Care (9pm to 6am)	

Section 4: Additional Service Hours

Before Care

Start Time: 06:00 AM End Time: 08:00 AM

Days Available: Monday, Tuesday, Wednesday, Thursday, Friday, Saturday, Sunday

After Care

Start Time: 04:00 PM End Time: 06:00 PM

Days Available: Monday, Tuesday, Wednesday, Thursday, Friday, Saturday, Sunday

← Back to ELC Information
Save and Continue →

OWNERSHIP TYPE

Within the overall “Ownership Type” page, there are 4 sections, each consisting of drop-down options or text boxes requiring that information be entered by the Provider.

In “Section 1: Ownership Type”, the drop-down menu consists of 5 options; select the appropriate option.

- Individual
- Corporation/Limited Liability company
- Partnership
- Church and/or religious organization
- University

If the “Individual” option was selected in “Section 1: Ownership Type”, proceed to “Section 2: Individual Owner”.

In “Section 2: Individual Owner,” enter the tax information into the “Tax Information” subsection text boxes, which are:

- Federal EIN (9 digit number)
- State Tax ID Number (9 digit number)

If the “Corporation/Limited Liability Company” option was selected in “Section 1: Ownership Type”, 3 remaining sections require the entry of information, which are:

- Section 2: Corporation/LLC
- Section 3: Address Information
- Section 4: Tax Information

In “Section 2: Corporation/LLC,” there are 2 text boxes that requires the entry of information, which are:

- Business Entity Name
- Previous Name

In “Section 3: Address Information,” there are 2 subsections that requires the entry of information, which are:

- Physical Address
- Mailing Address

In “Physical Address,” there are 5 text boxes and one drop-down that requires the entry of information, which are:

- Street Name 1
- Street Name 2
- City
- Zip
- State(Drop-down)
- Parish/County

In “Mailing Address,” there are 5 text boxes and 1 drop-down that requires the entry of information, which are:

- Street Name 1
- Street Name 2
- City
- Zip
- State(Drop-down)
- Parish/County

Note:

- Providers may utilize the “Copy to All” selection if the physical and mailing address is the same.

In “Section 4: Tax Information”, will require a Yes or No response for 1 question and information entered into 2 text boxes, which are:

- Federal EIN
- State Tax ID Number
- Is your organization a nonprofit organization?

If the “Partnership” option was selected in “Section 1: Ownership Type” 3 remaining sections requires the entry of information, which are:

- Section 2: Partnership
- Section 3: Address Information
- Section 4: Tax Information

In “Section 2: Partnership,” there are 2 text boxes that requires the entry of information, which are:

- Business Entity Name

In “Section 3: Address Information,” there are 2 subsections that requires the entry of information, which are:

- Physical Address
- Mailing Address

In “Physical Address,” There are 5 text boxes and 1 drop-down that require the entry of information, which are:

- Street Name 1
- Street Name 2
- City
- Zip
- State(Drop-down)
- Parish/County
- Previous Name

In” Mailing Address,” there are 5 text boxes and 1 drop-down that require the entry of information, which are:

- Street Name 1
- Street Name 2
- City
- Zip
- State(Drop-down)
- Parish/County

Note:

- Providers may utilize the “Copy to All” selection if all of the days will have the same operational open and close times.

In “Section 4: Tax Information” requires a Yes or No response for 1 question and information entered into 2 text boxes, which are:

- Federal EIN
- State Tax ID Number
- Is your organization a nonprofit organization?

If the “Church and/or religious organization,” option was selected in “Section 1: Ownership Type” 3 remaining sections that require the entry of information, which are:

- Section 2: Church and/or Religious Organization
- Section 3: Address Information
- Section 4: Tax Information

In “Section 2: Church and/or Religious Organization,” there are 2 text boxes that require the entry of information, which are:

- Business Entity Name
- Previous Name

In “Section 3: Address Information,” there are 2 subsections that require the entry of information, which are:

- Physical Address
- Mailing Address

In “Physical Address,” There are 5 text boxes and 1 drop-down that require the entry of information, which are:

- Street Name 1
- Street Name 2
- City
- Zip
- State(Drop-down)
- Parish/County

In “Mailing Address,” there are 5 text boxes and 1 drop-down that require the entry of information, which are:

- Street Name 1
- Street Name 2
- City
- Zip
- State(Drop-down)
- Parish/County

Note:

- Providers may utilize the “Copy to All” selection if all if the physical and mailings addresses are the same.

In “Section 4: Tax Information” requires a Yes or No response for 1 question and information entered into 2 text boxes, which are:

- Federal EIN
- State Tax ID Number
- Is your organization a nonprofit organization?

If the “University” option was selected from the “Ownership Type,” there are 3 remaining sections that requires the entry of information, which are:

- Section 2: University
- Section 3: Address Information
- Section 4: Tax Information

In “Section 2: University,” there are 2 text boxes that require the entry of information, which are:

- Business Entity Name
- Previous Name

In “Section 3: Address Information,” there are 2 subsections that require the entry of information, which are:

- Physical Address
- Mailing Address

In “Physical Address,” There are 5 text boxes and 1 drop-down that require the entry of information, which are:

- Street Name 1
- Street Name 2
- City
- Zip
- State(Drop-down)
- Parish/County

In” Mailing Address,” there are 5 text boxes and 1 drop-down that require the entry of information, which are:

- Street Name 1
- Street Name 2
- City
- Zip
- State(Drop-down)
- Parish/County

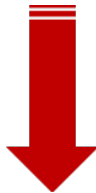
Note:

- Providers may utilize the “Copy to All” selection if all if the physical and mailings addresses are the same.

In “Section 4: Tax Information” requires a Yes or No response for 1 question and information entered into 2 text boxes, which are:

- Federal EIN
- State Tax ID Number
- Is your organization a nonprofit organization?

After providing all of the required information, select, Save and Continue, and the “Center Owner” page will appear.



Ownership Type

Your Ownership Type selection will determine which information will need to be entered for Center Owners and also to determine if you are eligible for certain programs.

[Return to Application Home](#)

Section 1: Ownership Type

*Select your organization structure type

--Select--
--Select--
Individual
Corporation
Partnership
Church and/or Religious Organization
University
Government
Limited Liability Company



[Save and Continue](#)

Select an Ownership Type and provide the required data, as shown below. You may have different requirements depending upon the type chosen.

Ownership Type

Your Ownership Type selection will determine which information will need to be entered for Center Owners and also to determine if you are eligible for certain programs.

[Return to Application Home](#)

Section 1: Ownership Type

*Select your organization structure type

Limited Liability Company

Section 2: LLC

Any entity incorporated in Louisiana or incorporated in another State, registered with the Secretary of State in Louisiana, and legally authorized to do business in Louisiana.

*Business Entity Name

Previous Name

Section 3: Address Information

Physical Address	Mailing Address
<p>*Street Name 1 4562 Apollo Rd.</p>	<p>*Street Name 1 4562 Apollo Rd.</p>
<p>Street Name 2</p>	<p>Street Name 2</p>
<p>*City Houston</p>	<p>*City Houston</p>
<p>*State Louisiana</p>	<p>*State Louisiana</p>
<p>*Zip 89874</p>	<p>*Zip 89874</p>
<p>*Parish/County Claiborne</p>	<p>*Parish/County Claiborne</p>
<p>Copy to Mailing</p>	

Click on the Copy to Mailing button to transfer physical address information to mailing, if it is the same.

Section 4: Tax Information

Is your organization a non-profit organization?
 Yes

<p>*Federal EIN 545465446</p>	<p>*State Tax ID Number 4654654</p>
-----------------------------------	---

[← Back to Services and Hours](#) [Save and Continue →](#)

Enter Tax information, as shown above.

Select, Save and Continue, to proceed to the Center Owner, page.

CENTER OWNER

After the Provider is navigated to the “Center Owner” Page, “Section 1: Officers and Agents” will appear. Provider must select “Add New”.

- Section 1 - Officers and Agents

After selecting, “Add New” 5 remaining sections that require the entry of information will appear, which are:

- Section 1: Officers/Agent Designation
- Section 2: Name and Contact
- Section 3: Additional Names
- Section 4: Address Information
- Section 5: Personal Identification

In “Section 1: Officers/Agent Designation,” there are 3 subsections consisting of 1 drop-down, 1 text box and a date picker requiring the entry or selection of information, which are:

- Owner Type (Drop-down: Officer, Agent)
- Title (Text box)
- Appointment Date Picker)

In “Section 2: Name and Contact,” there are 2 subsections requiring that information be entered, which are:

- Owner name
- Owner Information

In the “Owner Information” subsection, there are 5 text boxes that require the entry of information, which are:

- Prefix
- First Name
- Middle Name
- Last Name
- Suffix

Also, in the “Owner Information” subsection, there are 3 text boxes and 2 Yes or No questions that require information to be entered or selections, which are:

- Primary Phone Number
- Secondary Phone Number
- Email Address
- Is this employee an emergency contact for this Center?
- I will be working on-site at this Center

In “Section 3: Additional Names,” there is 1 Yes/No question that requires the entry of information, which is:

- Have you used another name in the past 5 years?

In “Section 4: Address Information,” there are 2 sections, which are:

- Physical Address
- Mailing Address

In “Physical Address,” There are 5 text boxes and 1 drop-down that require the entry of information, which are:

- Street Name 1
- Street Name 2
- City
- Zip
- State(Drop-down)
- Parish/County

In” Mailing Address,” there are 5 text boxes and 1 drop-down that require the entry of information, which are:

- Street Name 1
- Street Name 2
- City
- Zip
- State(Drop-down)
- Parish/County

Note:

- Providers may utilize the “Copy to All” selection if all if the physical and mailings addresses are the same.

In “Section 5: Personal Identification,” there are 4 subsections that require information to be entered, which are:

- Date of Birth (Date Picker)
- SSN 9 (Text box)
- Identification Number (Text Box)
- Issuing State (Drop-down)

The screenshot displays the 'Center Owner' application interface. At the top, there is a breadcrumb trail: 'Find the Right Program / New Type III Application / Center Owner'. Below this, the title 'Center Owner' is followed by a note: 'The Ownership Type you selected is a business entity. You will need to add all listed Officers and Agents of the Business as provided on the [Louisiana Secretary of State's website](#).' A 'Return to Application Home' button is visible. The main section is titled 'Section 1: Officers and Agents' and contains a table with columns for 'Type', 'Name', 'Contact Number', 'Email Address', and 'Appointment Date'. The table is currently empty, with the text 'There are no records to show'. A red arrow points to the '+Add New' button. A modal dialog box is open in the foreground, titled 'Center Owner', with the message: 'The ownership type you selected requires at least one owner and two owners for partnerships. Do you still want to continue?'. The dialog has 'Yes' and 'No' buttons at the bottom. A 'Save and Continue' button is also visible in the bottom right corner of the application interface.

If you would like to return to this page later, click on Save and Continue and then Yes.

Center Owner

The Ownership Type selected was a business entity. You will need to add all listed Officers and Agents of the Business as provided on the [Louisiana Secretary of State's website](#).

Section 1: Officers/Agent Designation

*Owner Type: Officer
*Title: Director
*Appointment Date: 01/04/2023

Section 2: Name and Contact

Owner Name: Prefix, First Name (Betsy), Middle Name, Last Name (Ross), Suffix

Owner Information: *Primary Phone Number (646-546-5465), Secondary Phone Number, *Email Address (BetsyRoss@gmail.com)

This employee is an emergency contact for this Center: Yes
I will be working on-site at this Center: Yes



Section 3: Additional Names

Have you used another name in the past 5 years?
 No

Section 3: Additional Names

Have you used another name in the past 5 years?
 Yes

Please add at least one additional name.

First Name	Middle Name	Last Name	Date Started	Date Ended
There are no records to show				

+Add New



Section 3: Additional Names

Have you used another name in the past 5 years?
 Yes

Please add at least one additional name.

First Name	Middle Name	Last Name	Date Started	Date Ended
There are no records to show				

+Add New

*First Name: Sally, Middle Name: , *Last Name: Fields, Suffix:

*Date Started: 11/01/2022, *Date Ended: 01/11/2023

✓ ✕

Click on the check icon to save the entry.

Section 4: Address Information

Physical Address		Mailing Address	
*Street Name 1	55 Flamingo Lane	*Street Name 1	55 Flamingo Lane
Street Name 2		Street Name 2	
*City	New Orleans	*City	New Orleans
*State		*State	
*Zip	87954	*Zip	87954
*Parish/County	--Select--	*Parish/County	--Select--

Copy to Mailing

Be sure to select a Parish from above and utilize the Copy to Mailing option.

A legitimate date of birth, SSN#, Identification # (govt. Issued ID), Sex and Race are required.

Section 5: Personal Identification

*Date Of Birth	01/05/1976	*SSN	***-**-6555	*Identification Number	65465651561	*Issuing State	Louisiana
*Sex	Female	*Race	White				

Save Cancel

SSN#'s will be synced with CCCBC statuses and must match exactly for all owners, directors and staff.

Select, Save and you'll be navigated to early Learning Center Staff page.



EARLY LEARNING CENTER STAFF (DIRECTOR/DESIGNEE)

edlink Early Learning Center Staff

Find the Right Program / New Type III Application / Early Learning Center Staff

Early Learning Center Staff

Enter all hired Staff Members who will be on site at the Early Learning Center. Every Center must have at least one Director identified. If that Director is responsible for multiple Centers, then a Director Designee will also be required. Owners who will be working on site will also need to be re-entered to Staff Member page.

[← Return to Application Home](#)

Section 1: Staff Members

Name	Position Type	Primary Phone Number	Email Address	Date Hired
There are no records to show				

[+ Add New](#)

[← Back to Center Owner](#) [Continue →](#)

Add additional staff by selecting the “Add new” option, which will navigate a Provider to the “Early Learning Center Staff” page, as shown below.

On the “Early Learning Center Staff” there are 5 sections where a Provider must provide all required information if a new “Staff Member” is to be added, which are:

- Section 1: Name and Contact
- Section 2: Address Information
- Section 3: Personal Identification
- Section 4: Employment Details
- Section 5: Degrees and Certifications

After entering data and information in the previous 5 sections, a “Staff Member” may be added on the “Early Learning Center Staff” page, as shown below.

Center Staff Detail

Early Learning Center Staff

Provide the details for all Center Staff that will be working on site at the Center.

Section 1: Name and Contact

Prefix:

*First Name:

Middle Name:

*Last Name:

Suffix:

*Primary Phone Number:

Secondary Phone Number:

*Email Address:

This employee is an emergency contact for this Center: Yes

Center Staff Detail

Section 2: Address Information

Physical Address

*Street Name 1
25 Blue Bird Circle

Street Name 2

*City: New Orleans *State: Louisiana

*Zip: 54656 *Parish/County: East Baton Rouge

[Copy to Mailing](#)

Mailing Address

*Street Name 1
25 Blue Bird Circle

Street Name 2

*City: New Orleans *State: Louisiana

*Zip: 54656 *Parish/County: East Baton Rouge

Center Staff Detail

Section 3: Personal Identification

*Date Of Birth: 01/05/1980

*SSN: ***-**-4554

*Identification Number: 54654654

*Issuing State: Louisiana

*Sex: Female

*Race: Black/African American

Married: No

Section 4: Employment Details

*Position Type: Director

*Years of experience in a licensed center: 15

*Date appointed to current role: 01/06/2023

Responsible for other Early Learning Centers: No

*Date Hired in any Capacity: 01/06/2023

Qualify for School Readiness Tax Credit Level: No

The date of birth and Social Security Number must be accurate for each staff member. They are used to synch to the CCCBC System and provides an up-to-date status on all background checks. These statuses are integrated into your application. The Identification Number is any Government Issued ID. See Bulletin 137-140 for position requirements.

Section 5: Degrees and Certifications

The reported credentials may qualify for an Early Childhood Ancillary Certificate (ECAC). An ECAC can be used as a qualifying credential to become a Director or Director Designee of a licensed child care center. Visit the [Teach LA Live Portal](#) to apply for an ECAC. Note: The submitted ECAC application will need to include a transcript showing the degree completion. For Directors and Director Designees, please review [Application Instructions](#).

Category: Type:

no records to show

[+ Add New](#)

[Save](#) [Cancel](#)

Upload all documents and Save.

Directors and Director Designees are required to upload, Pre-Service Orientation (CCAP/All Type III), CPR, Pediatric First Aid, Mandated Reporter, Medication Administration, ELC Experience. If you are a Headstart or Grant Funded, upload a blank doc into the Pre-Service Orientation Category. [Please see Bulletin 137 for details.](#)

Other Staff will need CPR, Pediatric First Aid and Mandated Reporter.

All documents, with the exception of ELC Experience, will be located in the Education and Training category. ELC Experience is located in the Experience category. Upload all mandatory documents listed on the previous page and within Bulletin 137, first. Save your uploads. You may return to the Staff Member's page to upload Certificates by selecting the Pencil icon next to their name. Be sure to always Save.

Section 5: Degrees and Certifications

The reported credentials may qualify for an Early Childhood Ancillary Certificate (ECAC). An ECAC can be used as a qualifying credential to become a Director or Director Designee of a licensed child care center. Visit the [Teach LA Live Portal](#) to apply for an ECAC. Note: The submitted ECAC application will need to include a transcript showing the degree completion. For Directors and Director Designees, please review [Application Instructions](#).

Category Type

There are no records to show

+ Add New

*Category --Select--

*Type --Select--

*Choose File

Choose File Browse

Save Cancel

*Category

--Select--

Education/Training

Certifications

Experience

*Type --Select--

Browse

*Category Education/Training

*Choose File

Choose File Browse

*Type

--Select--

CPR Training

Pediatric First Aid

Pre-service Orientation

Medication Administration Training

Degree

Continuing Education Training

College Credit Hours

Mandated Reporters

*Category Education/Training

*Certified by

state

*Choose File

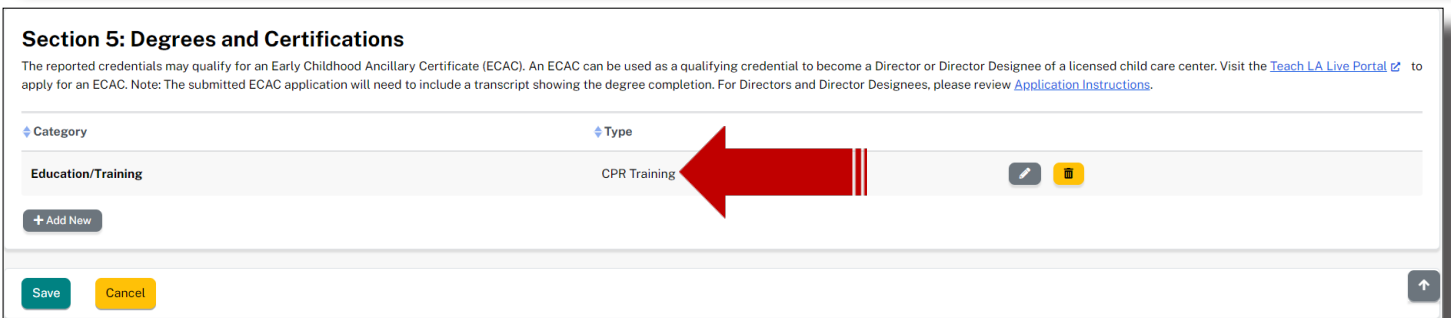
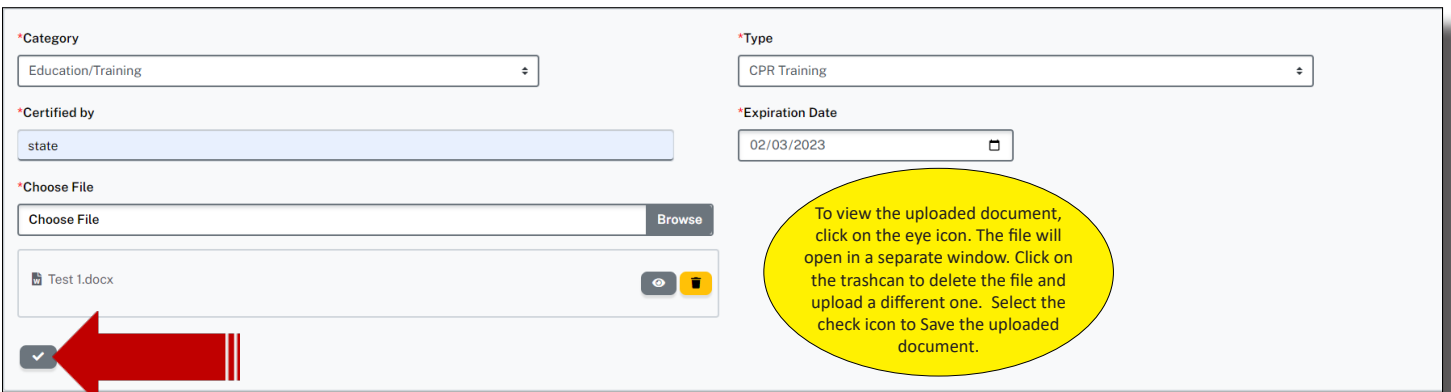
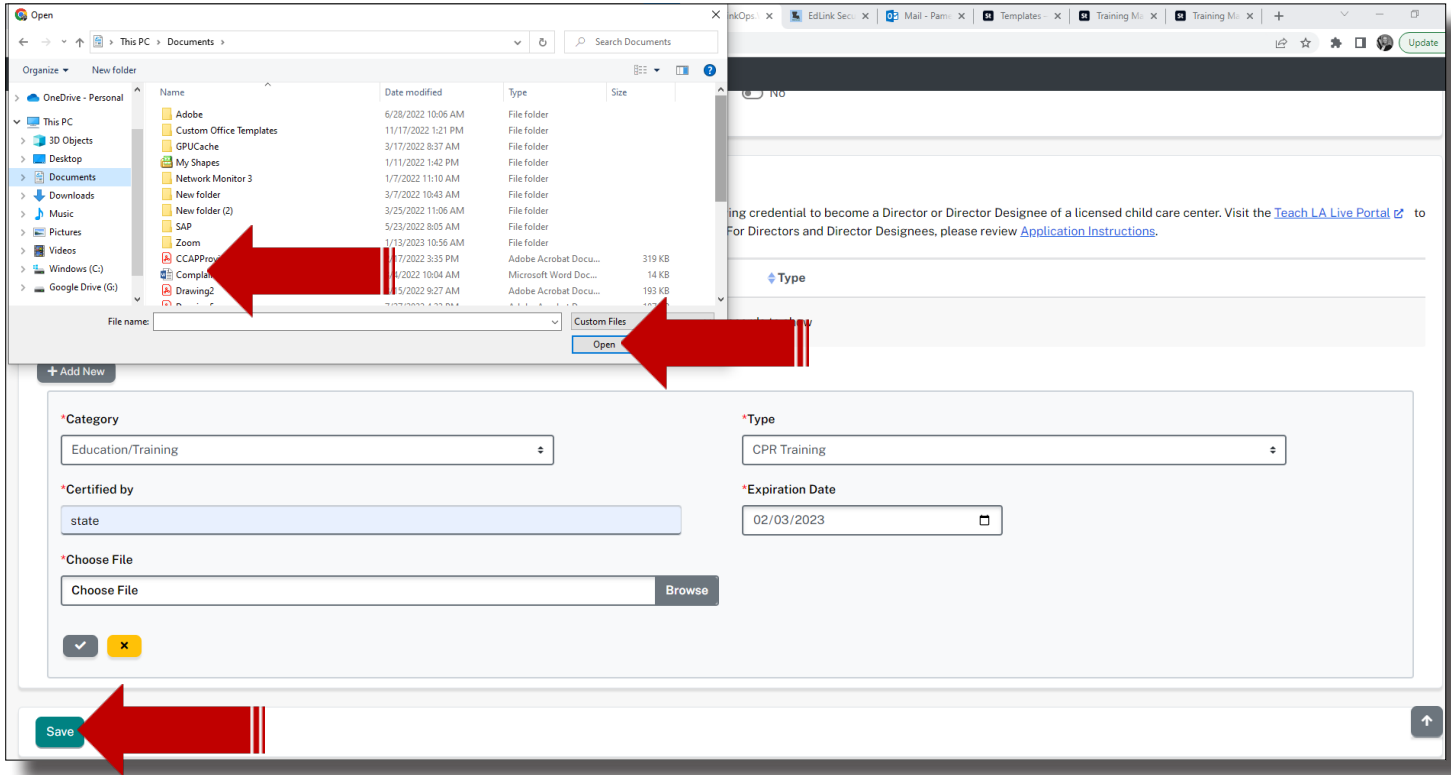
Choose File Browse

*Type CPR Training

*Expiration Date

02/03/2023

To upload files, select Browse. The file Explorer will open, as shown below. Double click on the file and it will automatically upload into the application. You may also locate the file and select Open for the same result. Enter information into all text boxes.



*Category: Education/Training

*Type: Pediatric First Aid

*Certified by: state

*Expiration Date: 02/03/2023

*Choose File: Choose File [Browse]

Test 1.docx [View] [Delete]

[Checkmark] [Close]

Section 5: Degrees and Certifications

The reported credentials may qualify for an Early Childhood Ancillary Certificate (ECAC). An ECAC can be used as a qualifying credential to become a Director or Director Designee of a licensed child care center. Visit the [Teach LA Live Portal](#) to apply for an ECAC. Note: The submitted ECAC application will need to include a transcript showing the degree completion. For Directors and Director Designees, please review [Application Instructions](#).

Category	Type	
Education/Training	CPR Training	[Edit] [Delete]
Education/Training	Pediatric First Aid	[Edit] [Delete]

+ Add New

Save Cancel [Up Arrow]

*Category: Education/Training

*Type: Pre-service Orientation

*Certified by: state

*Date Completed: 01/11/2023

*Expiration Date: 01/28/2023

*Choose File: Choose File [Browse]

Test 1.docx [View] [Delete]

[Checkmark] [Close]

Section 5: Degrees and Certifications

The reported credentials may qualify for an Early Childhood Ancillary Certificate (ECAC). An ECAC can be used as a qualifying credential to become a Director or Director Designee of a licensed child care center. Visit the [Teach LA Live Portal](#) to apply for an ECAC. Note: The submitted ECAC application will need to include a transcript showing the degree completion. For Directors and Director Designees, please review [Application Instructions](#).

Category	Type	
Education/Training	CPR Training	[Edit] [Delete]
Education/Training	Pediatric First Aid	[Edit] [Delete]
Education/Training	Pre-service Orientation	[Edit] [Delete]

+ Add New

Save Cancel [Up Arrow]

*Category: Education/Training

*Type: Medication Administration Training

*Certified by: state

*Expiration Date: 02/04/2023

*Choose File: Choose File [Browse]

Test 1.docx [View] [Delete]

[Checkmark] [Close]

Section 5: Degrees and Certifications

The reported credentials may qualify for an Early Childhood Ancillary Certificate (ECAC). An ECAC can be used as a qualifying credential to become a Director or Director Designee of a licensed child care center. Visit the [Teach LA Live Portal](#) to apply for an ECAC. Note: The submitted ECAC application will need to include a transcript showing the degree completion. For Directors and Director Designees, please review [Application Instructions](#).

Category	Type	
Education/Training	CPR Training	[Edit] [Delete]
Education/Training	Pediatric First Aid	[Edit] [Delete]
Education/Training	Pre-service Orientation	[Edit] [Delete]
Education/Training	Medication Administration Training	[Edit] [Delete]

+ Add New

Save Cancel [Up Arrow]

*Category: Education/Training

*Type: Mandated Reporters

*Choose File: Choose File [Browse]











*Expiration Date: 01/28/2023

Test 1.docx [View] [Delete]


[Checkmark] [Close]

Section 5: Degrees and Certifications

The reported credentials may qualify for an Early Childhood Ancillary Certificate (ECAC). An ECAC can be used as a qualifying credential to become a Director or Director Designee of a licensed child care center. Visit the [Teach LA Live Portal](#) to apply for an ECAC. Note: The submitted ECAC application will need to include a transcript showing the degree completion. For Directors and Director Designees, please review [Application Instructions](#).

Category	Type		
Education/Training	CPR Training		
Education/Training	Pediatric First Aid		
Education/Training	Pre-service Orientation		
Education/Training	Medication Administration Training		
Education/Training	Mandated Reporters		

[+ Add New](#)

[Save](#) [Cancel](#) 

*Category

*Type

*Category

*Choose File


*Type

*Category

*Type
Licensed Early Learning Center or comparable

*Number of years

*Choose File

 Test 1.docx

Section 5: Degrees and Certifications

The reported credentials may qualify for an Early Childhood Ancillary Certificate (ECAC). An ECAC can be used as a Director or Director Designee of a licensed child care center. Visit the [Teach L.A Live Portal](#) to apply for an ECAC. Note: The submitted ECAC application will need to include a transcript showing the degree. For more information, please review [Application Instructions](#).

Category	Type		
Education/Training	CPR Training		
Education/Training	Pediatric First Aid		
Education/Training	Pre-service Orientation		
Education/Training	Medication Administration Training		
Education/Training	Mandated Reporters		
Experience	ELC Experience		

These documents must be uploaded into each category to submit the application.

[Save](#) [Cancel](#)

Early Learning Center Staff Great Job Center Staff information saved successfully.

Find the Right Program / New Type III Application / Early Learning Center Staff

Early Learning Center Staff

Enter all hired Staff Members who will be on site at the Early Learning Center. Every Center must have at least one Director identified. If that Director is responsible for multiple Centers, then a Director Designee will also be required. Owners who will be working on site will also need to be re-entered to Staff Member page.

[Return to Application Home](#)

Section 1: Staff Members

Name	Position Type	Primary Phone Number	Email Address	Date Hired	
Sally Fields	Director	564-654-6546	sallyf@gmail.com	01/06/2023	

[+ Add New](#)

[Back to Center Owner](#)

[Continue](#)

After entering all of the staff members' documents, select, continue.

EARLY LEARNING CENTER OTHER STAFF

Center Staff Detail

Early Learning Center Staff

Provide the details for all Center Staff that will be working on site at the Center.

Section 1: Name and Contact

Prefix	<input type="text"/>	*Primary Phone Number	<input type="text" value="645-556-3563"/>
*First Name	<input type="text" value="Abby"/>	Secondary Phone Number	<input type="text"/>
Middle Name	<input type="text"/>	*Email Address	<input type="text" value="abby@gmail.com"/>
*Last Name	<input type="text" value="Rhodes"/>	This employee is an emergency contact for this Center	<input type="radio"/> No
Suffix	<input type="text"/>		

You must appoint at least 1 On-Site and 1 Off-Site Emergency Contact.



Section 2: Address Information

Physical Address	Mailing Address
*Street Name 1 <input type="text" value="25 London Dr."/>	*Street Name 1 <input type="text" value="25 London Dr."/>
Street Name 2 <input type="text"/>	Street Name 2 <input type="text"/>
*City <input type="text" value="New Orleans"/>	*City <input type="text" value="New Orleans"/>
*State <input type="text" value="Louisiana"/>	*State <input type="text" value="Louisiana"/>
*Zip <input type="text" value="54545"/>	*Zip <input type="text" value="54545"/>
*Parish/County <input type="text" value="East Baton Rouge"/>	*Parish/County <input type="text" value="East Baton Rouge"/>
<input type="button" value="Copy to Mailing"/>	

Personal Information must match the information on the Staff Members' CCCBC application.

Section 3: Personal Identification

*Date Of Birth <input type="text" value="01/06/1995"/>	*SSN <input type="text" value="***-**-4655"/>	*Identification Number <input type="text" value="55641654"/>	*Issuing State <input type="text" value="Louisiana"/>
*Sex <input type="text" value="Female"/>	*Race <input type="text" value="Asian"/>	Married <input type="radio"/> No	

Section 4: Employment Details

*Position Type <input type="text" value="Other Staff"/>
*Date appointed to current role <input type="text" value="01/11/2023"/>
*Date Hired in any Capacity <input type="text" value="01/01/2023"/>

Section 5: Degrees and Certifications

Add all validated education, training, and/or certifications. Choose the category and type from the drop down selections and upload your supporting documentation. For Directors and Director Designees, please review [Application Instructions](#)

Category

Type

There are no records to show

+ Add New

Save

Cancel



*Category

--Select--
--Select--
Education/Training
Certifications
Experience

Browse

✓ ✕

*Type

--Select--

*Category

Education/Training

*Choose File

Choose File Browse

✓ ✕

*Type

--Select--
--Select--
CPR Training
Pediatric First Aid
Pre-service Orientation
Medication Administration Training
Degree
Continuing Education Training
College Credit Hours
Mandated Reporters

*Category

Education/Training

*Certified by

state

*Choose File

Choose File Browse

Test 1.docx



✓ ✕

*Type



CPR Training

*Expiration Date


01/27/2023

Section 5: Degrees and Certifications

Add all validated education, training, and/or certifications. Choose the category and type from the drop down selections and upload your supporting documentation. For Directors and Director Designees, please review [Application Instructions](#)

Category	Type	
Education/Training	CPR Training	 

[+ Add New](#)

[Save](#) [Cancel](#) 



*Category: Education/Training



*Type: Pediatric First Aid

*Certified by: state

*Expiration Date: 02/11/2023





*Choose File: Choose File [Browse](#)

Test 1.docx  


 

Section 5: Degrees and Certifications

Add all validated education, training, and/or certifications. Choose the category and type from the drop down selections and upload your supporting documentation. For Directors and Director Designees, please review [Application Instructions](#)

Category	Type	
Education/Training	CPR Training	 
Education/Training	Pediatric First Aid	 



[+ Add New](#)



[Save](#) [Cancel](#) 

*Category: Education/Training

*Type: Mandated Reporters

*Choose File: Choose File [Browse](#)

Test 1.docx  

Section 5: Degrees and Certifications

Add all validated education, training, and/or certifications. Choose the category and type from the drop down selections and upload your supporting documentation. For Directors and Director Designees, please review [Application Instructions](#)

Category	Type	
Education/Training	CPR Training	
Education/Training	Pediatric First Aid	
Education/Training	Mandated Reporters	

[+ Add New](#)

[Save](#) [Cancel](#)

These documents must be uploaded into each category to submit the application.

Early Learning Center Staff

Great Job Center Staff information saved successfully.

Find the Right Program / New Type III Application / Early Learning Center Staff

Early Learning Center Staff

Enter all hired Staff Members who will be on site at the Early Learning Center. Every Center must have at least one Director identified. If that Director is responsible for multiple Centers, then a Director Designee will also be required. Owners who will be working on site will also need to be re-entered to Staff Member page.

[Return to Application Home](#)

Section 1: Staff Members

Name	Position Type	Primary Phone Number	Email Address	Date Hired	
Sally Fields	Director	564-654-6546	sallyf@gmail.com	01/06/2023	
Abby Rhodes	Other Staff	645-556-3563	abby@gmail.com	01/01/2023	

[+ Add New](#)

[Back to Center Owner](#) [Continue](#)

After entering all staff members and documents, select, continue.

The CCCBC page is informational. While you can refresh the status of yourself and Staff, there is no requirement to enter any information. Green Eligible status must be present for consideration of approval. Click on the CCCBC image or the link to access the CCCBC System and complete a background check.

Background Check

Criminal Background Check


All Center Staff members are required to submit to a Criminal Background Check. Employer and Employees will need to submit their information on the Child Care Civil Background Check System (CCCBCS).

← Return to Application Home

Section 1: Submit CCCBC Application

Employees of a Provider/Entity who want to submit applications for background check on behalf of applicants must first be registered to use the CCCBC system. Existing licensed Child Care Providers will be given one user account by LDOE when the system is first available to the public. Additional users for that Provider must register using the link on that page. For additional information about the registration form and process [click here](#).

Click the image below to access the CCCBCS Page



Section 2: Background Status

The table below includes all Center Owners, Directors, and currently hired staff entered during the previous steps. All individuals will need to be reviewed by the CCCBC system and have an "Eligible" or "Provisional" status for their application to be approved.

Filter by Status

--Select--

Refresh CCCBC Status

Status	Name	Contact Number	Email Address
Eligible	Sally Fields	564-654-6546	sallyF@gmail.com
Eligible	Abby Rhodes	645-556-3563	abby@gmail.com
Eligible	Betsy Ross	646-546-5465	BetsyRoss@gmail.com

← Back to Center Staff

Save and Continue →

If you need to step away or take a break from the application, simply sign out. When you return, sign into your dashboard. Scroll down to Pending Applications. Select Edit to return to the Application Home page and continue the application.

Boing School - Type 3

In Progress

Application ID	Category	Last Update	Expires on
112824	Renewal	01/12/2023	04/12/2023

Edit

Cancel

EMERGENCY PREPAREDNESS PLAN

Emergency Preparedness Plan

The Emergency Plan describes the procedures that your Early Learning Center uses to provide for the care and well-being of children under care and your staff. This plan addresses circumstances that threaten lives and property.

[← Return to Application Home](#)

Section 1: Upload your Plan

Upload your plan below, if you do not have an existing plan, download the template below.

[Download Plan Template](#)

*File

[Browse](#)

	Emergency Plan		
	Test 1.docx		
	01/16/2023		

Download the Emergency Preparedness Template located at the top of the page. Save the document to your computer. The PDF document is editable, meaning that you may complete all but your signature electronically. Make sure you save your information as you progress through the document.

You'll need to print, scan and upload the completed Plan. Select the Browse to locate the file from your personal computer. Double-click on the file or select the file and Open to initiate the upload.

If you already have a EPP, you may upload the file, as long as it addresses all areas that the Template has indicated. Download the Emergency Plan Requirements and save to your computer.

Section 2: Emergency Plan Requirements

Once your application is submitted, your plan is reviewed and a field inspection is scheduled. The plan must provide the items outlined in the file below. [Emergency Preparedness and Evacuation Planning](#)

Info. If you choose to upload an Emergency Plan not based on the template provided, you must ensure your plan meets the requirements outlined in the file available below. Plans that do not meet the requirements will be rejected and the application will not move forward until all elements are fulfilled. ✕

[Download Emergency Plan Requirements](#)

Section 3: Emergency Contacts

Your plan must have named contacts for Staff in the event of an Emergency. Please review below to confirm that these are your intended Emergency Contacts.

Warning! The Center will need one on-site and one off-site emergency contacts. Off-site emergency contacts are individuals who the Department can reach in the event of an emergency should we be unable to reach anyone via the Center, Office, or Director's Home Phone Numbers. ✕

Contact Type	Name	Primary Phone	Secondary Phone
On-Site	Sally Fields	564-654-6546	

[+Add New](#)

Next, you'll identify at least one On-Site and one Off-Site Emergency Contact. You should see at least one On-Site already listed. If you do not have an On-Site listed, return to the Center Staff Step from the Application Home page. Select the pencil icon next to the Staff Member or yourself to view the details. In the top section, look for the toggle button asking, "Will this person be working On-Site?" Select, Yes. Scroll to the bottom of the page and select, Save. Now return to the Emergency Preparedness Step to ensure that the On-Site Emergency Contact is now listed.

The next images will show you how to add Off-Site Emergency Contacts.

Section 3: Emergency Contacts

Your plan must have named contacts for Staff in the event of an Emergency. Please review below to confirm that these are your intended Emergency Contacts.

Warning! The Center will need one on-site and one off-site emergency contacts. Off-site emergency contacts are individuals who the Department can reach in the event of an emergency should we be unable to reach anyone via the Center, Office, or Director's Home Phone Numbers.

Contact Type	Name	Primary Phone	Secondary Phone
On-Site	Sally Fields	564-654-6546	

+Add New

*Do you want to select an existing on-site Owner or Staff member as an emergency contact or add a new off-site emergency contact? Use on-site owner/staff New off-site

*Off-Site Emergency Contact Name *Primary Phone Number Secondary Phone Number

*Email Address



Pencil=Edit
Trashcan=Delete
Check=Save

Section 3: Emergency Contacts

Your plan must have named contacts for Staff in the event of an Emergency. Please review below to confirm that these are your intended Emergency Contacts.

Warning! The Center will need one on-site and one off-site emergency contacts. Off-site emergency contacts are individuals who the Department can reach in the event of an emergency should we be unable to reach anyone via the Center, Office, or Director's Home Phone Numbers.

Contact Type	Name	Primary Phone	Secondary Phone
On-Site	Sally Fields	564-654-6546	
Off-Site	Clark Gable	654-654-6546	

+Add New

← Back to Background Check

Save and Continue →

You must have 1 On-Site and 1 Off-Site Emergency Contact to proceed. Once you have both, select, Save.

CHILD CARE ASSISTANCE PROGRAM (CCAP)

All Type III centers must also be CCAP providers. The CCAP is defaulted into the Type III application, so there is no need to upload a separate application. An exception to this mandate is for Headstarts and Grant funded centers. These providers do not charge for their services and are funded either privately or sources outside of the CCAP. All Types III's will need to read through (grab the scroll bar and slide down) the Provisions to activate the Accepted button. Download the CCAP Agreement for your records.

Child Care Assistance Program

Child Care Assistance Program

The following required information includes the Child Care Assistance Program (CCAP) Agreement, Center's rates and fees, and Time and Attendance agreement.

[← Return to Application Home](#)

Section 1: CCAP Agreement Provisions

Please review the CCAP Agreement below and click the box agreeing that you have read and understood all the provisions.

must submit a new Agreement; or
H. Payment shall not be made outside of the effective date of this Agreement.

24. The Department may terminate a Provider's certification and impose a period of ineligibility on the Provider for program violations, which include but are not limited to the violations listed in Section 321 of BESE Bulletin 139, Louisiana Child Care and Development Fund Program or a condition or situation exists that places the lives, safety, or physical, mental or emotional well-being of any child entrusted to the Provider's care in imminent danger, regardless if such a condition or situation results from an act or omission by the Provider.

25. Neither the federal government nor the State of Louisiana offers appeal rights for Providers whose participation in the Child Care Assistance Program is refused or terminated. The decision to deny appeal rights was made by the State Legislature and the Department does not have the authority to overrule State law. The Provider is not entitled to CCAP payments during any appeal process and winning the appeal does not restore CCAP payments of eligibility.

26. Provider Compliance
Provider initials below indicates provider has thoroughly read each statement and agrees to adhere to the terms written therein.

* By clicking this box I have read through all the provisions and agree to them.

Accepted

Download a copy of the CCAP Agreement for your records.

[Download CCAP Agreement](#)

All Types III center (Entity Manager's) initials next to each CCAP Assurance. If you are Headstart or Grant funded, you are not accepting CCAP. You are simply attesting to having read the CCAP Provisions and Assurances. Your entity is already on record as nonCCAP provider. Future versions of Edlink will redirect Headstarts and Grant funded centers around the CCAP section as well as banking.

Section 2: CCAP Assurances

Please initial each section as you agree to the provisions.

*Initial Here I understand that Federal CCAP rules require that the provider must charge caregivers the rate provided on the current CCAP 10 form and must collect the difference between the rate charged and the amount of CCAP assistance received. This difference is the caregiver's "copay".

*Initial Here I agree to report problems with a Point of Service (POS) device or finger image scanner to the Conduent Provider Help Desk and the Department within 48 hours of failure.

*Initial Here I agree to notify the Department immediately of the removal of any child from its care so that payment from the Department for that child can be discontinued.

*Initial Here I will retain supporting fiscal documents (invoices, remittances, attendance logs, etc.) adequate to insure that claims for matching federal funds are in accordance with federal requirements. Provider will retain such documents for three (3) years after the close of the state fiscal year (July 1 through June 30) in which services are provided.

*Initial Here I understand that when the Department determines the provider is not in compliance with an administrative requirement, the Department may send written notice by mail or email informing the provider of the administrative noncompliance and requiring that the provider come into compliance.

*Initial Here I understand that If the provider does not come into compliance within 14 calendar days of such notice, the Department may suspend payments to the provider until the provider is in compliance.

*Initial Here I understand that if I do not turn my required documentation in timely manner than my application will be denied.

Enter your rates and fees in the respective boxes next to the ages that you will service. Place a value of at least zero into all boxes of ages not serviced. Enter your current rates into the boxes of the ages that are serviced. These rates will be verified by the Licensing Consultant, CCAP and by submitted a Notification of Rates to parents.

Headstarts and Grant funded centers will place a 1 in all boxes if there is no charge for care.

Section 3: Rates and Fees

Please enter your Center's rates and registration fees. Provide them both as a daily rate for full time care and as an hourly rate for part time care. Rates can be changed in the future from the Entity Management section of the Entity Portal. However, changes will not take affect until the next calendar month.

Enter Your Daily Rates

Age	*Full Daily Rate	*Part Time Hourly Rate
Age 0	75	20
Age 1	75	20
Age 2	75	20
Age 3	75	20
Age 4	75	20
Age 5 & Over	75	20

*Do you charge a registration fee?
 No

If a registration fee will be charged for any service that is offered, select yes. See each drop-down for options. If no registration fee will be charged, leave the box empty. You do not have to charge fees for a specific services.

*Do you charge a registration fee?
 Yes

Registration Fee	*This fee is charged	*This fee is collected
45 <small>Example 75.00</small>	Per Child	Annually
*Before Care Fee 25 <small>Example 75.00</small>	Per Child	One-Time
*After Care Fee 025 <small>Example 75.00</small>	Per Child	One-Time

Download the Time and Attendance Agreement, complete, sign and scan. Upload the scanned in document by clicking on, Browse, and selecting the file by double clicking on it.

Section 4: Time and Attendance Agreement

Download and complete the Louisiana CCAP Provider Time and Attendance Equipment Agreement below. Then scan your signed and completed document and upload using the "Upload File" option below.

[Download CCAP 14EA Form](#)

*Upload File

Choose File

Time and Attendance Agreement
Test 1.docx
01/16/2023

Section 5: Agreement Signatures

An authorized Director or Owner will need to sign the Child Care Assistance Program Agreement.

I certify that I have personally completed this application and have carefully investigated all facts necessary to complete this application. I further certify that all information contained in this application is true and correct to the best of my knowledge and ability. I understand that knowingly providing false information on this application may cause my application to be denied or my certification to be terminated, or not renewed. I further understand that failure to provide complete information may result in my application being delayed, denied, or my certification terminated, or not renewed. I also understand that knowingly providing false information may result in criminal charges. I understand that failure to comply with the law and regulations governing the certification of child care facilities could result in my certification being denied or revoked.

*Position Type

Director

*Full Name

Betsy Ross

*Date of Birth

01/06/1969



← Back to Emergency Plan

Save and Continue →



Select, Save and Continue, to be navigated to the Academic Approval page.

ACADEMIC APPROVAL

In “Academic Approval,” there are two sections that will require entry of information or acknowledgment, which are:

- Section 1: Academic Approval Agreement
- Section 2: Agreement Signatures

In “Section 1: Academic Approval Agreement,” there are 3 options of acknowledgment that must be checked, which are:

- I elect to participate in the School Readiness Tax Credit Program
- I certify that all of the lead teachers who have been working in my center for 24 months or more will have met the requirement set forth in Bulletin 140
- Please Note: Your application will be valid for the following calendar years

In “Section 2: Agreement Signatures”, there is 1 drop-down and 2 text boxes that will require information to be entered, which are:

- Position Type (drop-down)
- Full Name
- Date of Birth (date picker)

Academic Approval

Publicly-funded child care centers are required to meet a set of performance and academic standards resulting in academic approval. Academic Approval requires publicly-funded child care centers to participate in the community network system.

[← Return to Application Home](#)

Section 1: Academic Approval Agreement

Please review the Academic Approval Agreement document below. Once you have read through the agreement and scrolled to the bottom, you will be able to sign electronically.

*Does your site offer full time or part-time care?

Part Time

Part-time care is defined as offering less than 30 hours of care per week, with up to a maximum of 129 hours per month, including care offered on holidays, and before and after school. Full-time care is defined as offering care for 30 hours or more per week.

Select part-time or full-time.

I. ANCILLARY CERTIFICATE REQUIREMENTS FOR TYPE III CENTERS

I understand the following:

- A Lead Teacher is defined as the early childhood care and education classroom teacher that is primarily responsible for the classroom for a minimum 20 hours a week for every classroom providing full-day care in a publicly-funded site;
- Pursuant to Bulletin 140, all lead teachers in full day type III early learning centers hired into their role prior to July 1, 2018 must obtain their early childhood ancillary certificate by July 1, 2020; and all lead teachers in full day type III early learning centers hired into their role on or after July 1, 2018 must obtain their early childhood ancillary certificate within 24 months from their date of hire;

PLEASE NOTE: The Early Childhood Ancillary Certificate does not fulfill the requirement of a valid and current Louisiana teaching certificate for lead teachers in publicly funded pre-K (LA 4 and NSECD) classrooms and it will not qualify an individual to work as a lead teacher in public schools. The bachelor's degree and teaching certificate requirement for pre-K teachers in public and non-public schools will remain the same. Head Start teacher requirements will continue to follow the national credential and qualification guidelines.

I elect to participate in the School Readiness Tax Credit Program

I Agree

I certify that all of the lead teachers who have been working in my center for 24 months or more will have met the requirement set forth in Bulletin 140

I Agree

Please Note: Your application will be valid for the following calendar years:

2022-2023

Section 2: Site Contact Information

Select your Program Partner Chief Administrator from the list of owners/staff you have identified with your entity. If you need to make a correction please return to the Center Information page.

Entity Name

NASA Babies

Physical Address

4562 Apollo Rd.
Houston, Louisiana, 89874
Claiborne

Mailing Address

4562 Apollo Rd.
Houston, Louisiana, 89874
Claiborne

Primary Phone

3659875489

Secondary Phone

Email Address

nasababies@gmail.com

*Select your program partner Chief Administrator

--Select--
--Select--
Sally Fields
Abby Rhodes
Betsy Ross

Select a Chief Administrator. This is usually the Owner or Director.

Section 3: Agreement Signatures

An authorized Owner, Director, or Director Designee will need to sign the Academic Assurance Agreement.

My organization will comply with all provisions of State Board of Elementary and Secondary Education (BESE) Bulletin 140-Louisiana Early Childhood Care Education network.

*Position Type

Director

*Full Name

Betsy Ross

*Date Of Birth

01/20/1969

Note: An email notification will be sent to the Entity/Site's email address once the full Licensing application is submitted for review.

[← Back to CCAP](#)

[Save and Continue →](#)

DOCUMENT UPLOAD

In “Document Upload,” there are 10 sections display, which are:

- Section 1: Commercial and Medical Liability Insurance
- Section 2: State Fire Marshal Information
- Section 3: Office of Public Health Approval
- Section 4: Center Pictures
- Section 5: Documentation of Ownership
- Section 6: Rates Verification
- Section 7: Verification of Identity
- Section 8: Social Security Cards
- Section 9: W-9 or IRS SS-Form
- Section 10: Rates Verification

Upload the required documents below. Multiple files may be uploaded in each section. Ensure that your scanned documents are not too large for your personal computer to upload. Scan Profiles should be 70-100 DPI, B&W and a common file type, such as PDF, JPG, BMP...Edlink will take most types with the exception of video files. This profile will ensure that the files are small in file size but completely viewable.

Document Upload

Document Upload

The Type III licensing application has several types of documents that are required to be uploaded in order for your application to be submitted. Based on some of the selections and programs your Early Learning Center is participating, there may be additional documents required.

[← Return to Application Home](#)



Section 1: Commercial and Medical Liability Insurance

Upload a copy of the declaration page for the Center's Commercial and Medical Liability Insurance. Please reach out to your insurance company if you have questions regarding this document.

*Upload File

Choose File

Test 1.docx 100%

Commercial and Medical Liability Insurance	Status	
Test 1.docx 01/16/2023	Under Review	 

Continue to upload the mandatory documents. Take a moment to read the excerpts below each section for descriptions of what is needed. More detailed instructions and links are also located on the Application Home page in Step 1, Application Instructions.

Section 2: State Fire Marshal Information

Upload the Center's completed and approved State Fire Marshal Inspection Form. To request a State Fire Marshal Inspection, visit [here](#) for more details.

*Upload File

Choose File



Section 3: Office of Public Health Approval

Upload the Center's completed and approved Office of Public Health Inspection. To schedule your inspection, complete and submit your Day Care Plans Review Packet to LDH [here](#).

*Upload File

Choose File

Section 4: Center Pictures

Pictures of the Facility will need to be uploaded as part of the Licensing Application process. Picture should include at a minimum: The center's front entrance, kitchen, direct exit, and playground.

*Upload File

Choose File

Section 5: Documentation of Ownership

A signed, dated, and notarized documentation of ownership of the Early Learning Center will need to be uploaded to your licensing application.

*Upload File

Choose File

Section 6: Rates Verification

Upload a copy of notice to parents such as newsletter, bulletin, memo, etc.

*Upload File

Choose File



Section 7: Verification of Identity

Upload a copy of a government issued picture ID for all owners, directors, and designees.

*Upload File

Choose File

Section 8: Social Security Cards

Upload a copy of a government issued social security card for all owners and directors.

*Upload File




Choose File

Section 9: W-9 or IRS SS-Form

Upload a copy of the most recent W-9 or IRS SS-Form

*Upload File

Choose File

 IRS SS-4 Form Test 1.docx 01/16/2023	Status Under Review	 
--	------------------------	---

[← Back to Academic Approval](#)

[Save and Continue →](#)



After uploading all documents, Select, Save and Continue, to be navigated to the Banking Information page.

BANKING INFORMATION

Download the direct authorization form. Fill in the correct banking information, legibly. Scan the document and upload it into Sections 1. Only the Director or Entity Manager will have the ability to change the center's banking information.

Banking Information

Upload document that has information about your bank.

← Return to Application Home



Section 1: Banking Information

Please upload your banking information to indicate where provider reimbursements and public funding will be deposited for your Early Learning Center. A template is provided below that includes all instructions and requirements to receive State funding.

Download Bank Info Template

*Upload File

Choose File

Banking Information	Status	
Test 1.docx 01/16/2023	Under Review	 

← Back to Document Upload

After uploading the Direct Authorization Form, Select, Save and Continue, to be navigated to the Application Home page.

APPLICATION HOME PAGE

The Application Home page is the final page before you submit the application. Ensure that all badges are green and complete. You will need to visit or revisit any blue or yellow badges before the application can be submitted. To do this, click onto the Review or Edit button above the incomplete badge and enter the missing documents or information. Then return to the Application Home page to submit.

Application Home
The Application Home page lists all the required steps in completing the Type III Licensing Application. Once all required information is submitted, you will be able to submit your application for review.

[← Return to Application Selector](#)

Page Help. We have provided a way for you to keep track of all the information needed for you to complete your school's application. After all required information is submitted within each step, you will see a green "Completed" badge on the Application Home page. If a section remains incomplete there will be a yellow "Incomplete" badge. Once you have started a step, you can always return to a previous section using the "Return to Previous" button or return to this Home page by using the "Return to Application Home" button.

- 1 - Application Instructions**
This page describes all the requirements and instructions for completing the Licensing Application. [Review or Edit 1](#) [Complete](#)
- 2 - Funding Source**
Enter all the funding sources for your Early Learning Center on this page. [Review or Edit 2](#) [Complete](#)
- 3 - Early Learning Center Information**
Provide the name, location, and contact information for your Early Learning Center on this page. [Review or Edit 3](#) [Complete](#)
- 4 - Services and Hours**
This page allows you to enter the Center's hours of operation and list the services offered at your facility. [Review or Edit 4](#) [Complete](#)
- 5 - Ownership Type**
This page asks for the legal Ownership type of your Early Learning Center. [Review or Edit 5](#) [Complete](#)
- 6 - Center Owner**
List all the legal Owners of the Early Learning Centers on this page. [Review or Edit 6](#) [Complete](#)
- 7 - Center Staff**
Enter in all currently hired Directors, Director Designees and Other Staff on this page. [Review or Edit 7](#) [Complete](#)
- 8 - Criminal Background Check**
This page will provide you the status of all Owners, Directors, and Staff who have completed a Criminal Background check. [Review or Edit 8](#) [Complete](#)
- 9 - Emergency Plan**
The center's Emergency Preparedness Plan and emergency contacts will be completed on this page. [Review or Edit 9](#) [Complete](#)
- 10 - CCAP**
Review and accept the details of the Child Care Assistance Program on this page, and supply additional information about your Center's fees. [Review or Edit 10](#) [Complete](#)
- 11 - Academic Approval**
Review and accept the details of the Academic Approval Agreement. [Review or Edit 11](#) [Complete](#)
- 12 - Document Upload**
This page allows you to upload all required supporting documentation for your Early Learning Center. [Review or Edit 12](#) [Complete](#)
- 13 - Banking Information**
This page will collect you banking information. [Review or Edit 13](#) [Complete](#)

[Withdraw Application →](#) [Submit Application →](#)

After you've submitted the application, you'll be navigated back to your New User Dashboard.

The screenshot shows the 'My Dashboard' page for Pamela Mertens. The dashboard includes a navigation sidebar with links to 'Pamela Mertens', 'My Dashboard', 'Messages', 'Account Settings', and 'Help'. The main content area is titled 'My Dashboard' and contains a welcome message, two quick links ('How to use the EdLink Entity Portal?' and 'Why am I here?'), a 'Get Started' section with two options ('Ready to start with a new application?' and 'Already a member of an existing entity?'), and a 'Pending Applications' section. The 'Pending Applications' section displays a table with one application: 'NASA Babies - Type 3' (Application ID: 303850, Category: New, Last Update: 01/16/2023, Expires on: 04/16/2023). The application status is 'Pending'.

Scroll to the bottom of the Dashboard to see the status of the submitted application.

- In Progress=Not Submitted Yet
- Pending=Submitted and may take up to 90 days to review/approve
- Withdrawn=Submitted application has been deleted from LDOE. No information will be retained.
- Edit=Return to complete an incomplete application.
- View=Read only of a submitted application. No changes can be made.

This close-up view of the 'Pending Applications' section shows the application details for 'NASA Babies - Type 3'. The application ID is 303850, the category is 'New', the last update is 01/16/2023, and it expires on 04/16/2023. The status is 'Pending'. There are two buttons: 'View' and 'Withdraw Application'.

This close-up view shows the bottom section of the dashboard, which contains two application cards. The first card is for '- Type 3' (Application ID: 304655, Category: New, Last Update: 02/06/2023, Expires on: 05/07/2023) with 'In Progress' status and 'Edit' and 'Cancel' buttons. The second card is for 'Pamela Mertens - Type In Home' (Application ID: 304588, Category: New, Last Update: 02/03/2023, Expires on: 05/04/2023) with 'Withdrawn' status.

HELP

edlink Report Child Abuse

Pamela Mertens

My Dashboard

Messages 6

Account Settings

Help

Find the Right Program

Report Child Abuse

Submit a Complaint

Report Child Abuse

Helpful Links

The links below are for common, frequently-used resources

[Report Child Abuse](#)

edlink

Pamela Mertens

My Dashboard

Messages 6

Account Settings

Help

Find the Right Program

Report Child Abuse

Submit a Complaint

Help us protect Louisiana's children. Report Child Abuse & Neglect: 1-855-4LA-KIDS (1-855-452-5437) toll-free, 24 hours a day

Department of Children & Family Services
Building a Stronger Louisiana

I Am About Us Child Welfare Disaster

Louisiana.gov DCFS Child Welfare

Child Welfare

- About Child Welfare
- Adoption
- Child Abuse/Neglect Background Checks
- Child Protection Investigation
- Extended Foster Care
- Family First
- Family Services
- Foster Parenting
- Grandparents Link
- Kinship Navigator
- Louisiana Fosters
- QPI Louisiana
- Report Abuse/Neglect

Reporting Child Abuse/Neglect

Support

VIA LINK Louisiana Parent Line

- Phone: 833-LA-CHILD (833-522-4453)
- Text: (225) 424-1533

VIA LINK offers the **Louisiana Parent Line**. Specialists offer emotional support, de-escalation, crisis intervention, and plans for coping. Follow-up calls can be arranged to increase parents' circle of support.

Report

DCFS Child Abuse/Neglect Hotline

- 855-4LA-KIDS (855-452-5437)

If you know a Louisiana child is being abused or neglected, or is a victim of juvenile sex trafficking, call toll-free, 24 hours a day, 365 days a year. **All calls are confidential.** Trained social workers determine if the reported information constitutes a report of child abuse and/or neglect or juvenile sex trafficking.

- What is abuse/neglect?
- What are the signs and symptoms of child abuse and neglect?
- Who are mandated reporters?
- Child Abuse/Neglect Background Checks
- Child Protection Investigation
- Juvenile Sex Trafficking Reporting
- Substance Exposed Newborn Reporting

ACCOUNT SETTINGS

Select Account Settings from the left side navigation menu. Next, select, Password and Security and Reset Password. Complete the Password and/or the User ID options to reset your Password. You will receive emails with instructions for doing this within 2-3 minutes.

The screenshot shows the 'edlink' interface. On the left is a navigation menu with 'Account Settings' selected. The main content area is titled 'Password and Security' and contains two sections: 'Password Reset' and 'User History'. The 'Password Reset' section has a 'Reset Password' button, which is highlighted by a red arrow. The 'User History' section shows a table with columns for User, Field, Original Value, New Value, and Request Date/Time, with a note that there are no records to show.

The screenshot shows the 'Account Help' page with the heading 'What help do you need?'. It features three help forms. The first is 'Resend Verification Email' with an email address input field and a 'Send verification Email' button. The second is 'Forgot your password?' with input fields for 'User ID' and 'Email Address', and a 'Send Password Reset Link' button. A red arrow points to this form. The third is 'Forgot your User ID?' with an 'Email Address' input field and a 'Send User ID Reminder' button. Social media icons for Facebook, LinkedIn, Twitter, and Email are visible in the top right.

An Official Louisiana.Gov Website. [Here's how you know.](#) English Español Français 日本語

edlink EdLink Support Louisiana Believes

Note to all EdLink Users: There is a known issue with the system not displaying correct Messages and Notifications. We are working to correct this as soon as we can.

Important: Due to Covid-19 we have made some changes to the licensing process. [Click here](#) for more information.

Welcome to EdLink.
We've revolutionized the way we use data to support students and families of Louisiana.

Sign In
Create Account

DEPARTMENT OF EDUCATION Louisiana, Believes Email Us Call Us

<https://my.la.gov/en-us/Help> (copy and paste into browser)

An official Louisiana.gov website. [Here's how you know.](#)

Resend Verification Email
Never got your email verification? Enter your email address and we'll send you a new verification.

* Email Address

Send verification Email

Forgot your password?
Enter your User ID and email and we'll send you a link to reset your password.

User ID

Email Address

Send Password Reset Link

Forgot your User ID?
Enter your email and we'll send you the information.

Email Address

Send User ID Reminder

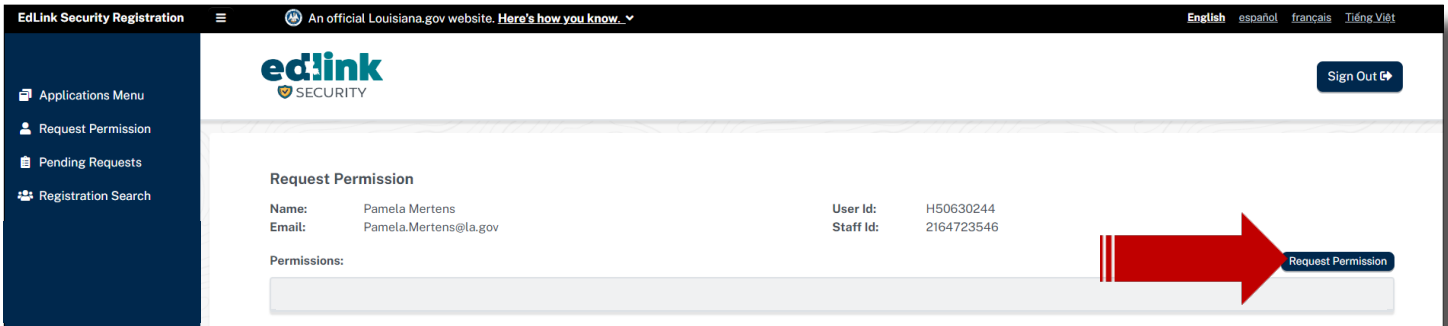
Want to know more?
My.La.Gov will replace outdated ways of signing in to Louisiana government. Frequently Asked Questions and get to know My.La.Gov

Read the FAQs →

Write down your User ID and New Password!

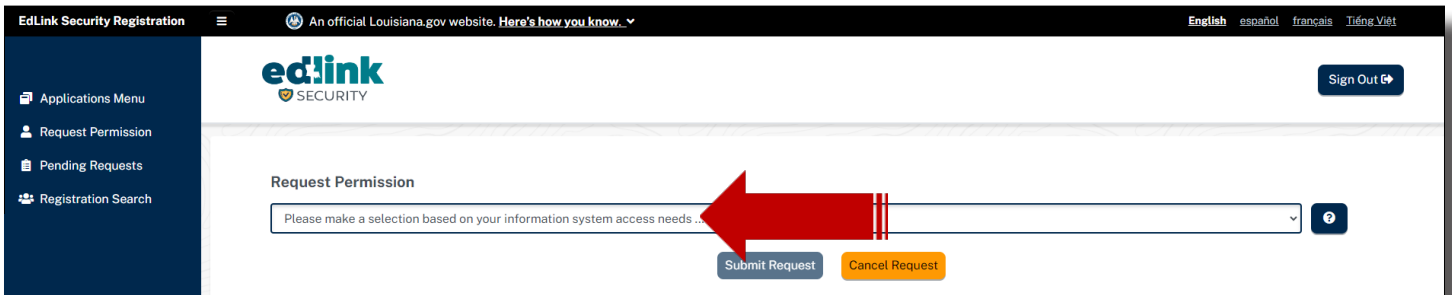
KINDERCONNECT ACCESS

STEP 1



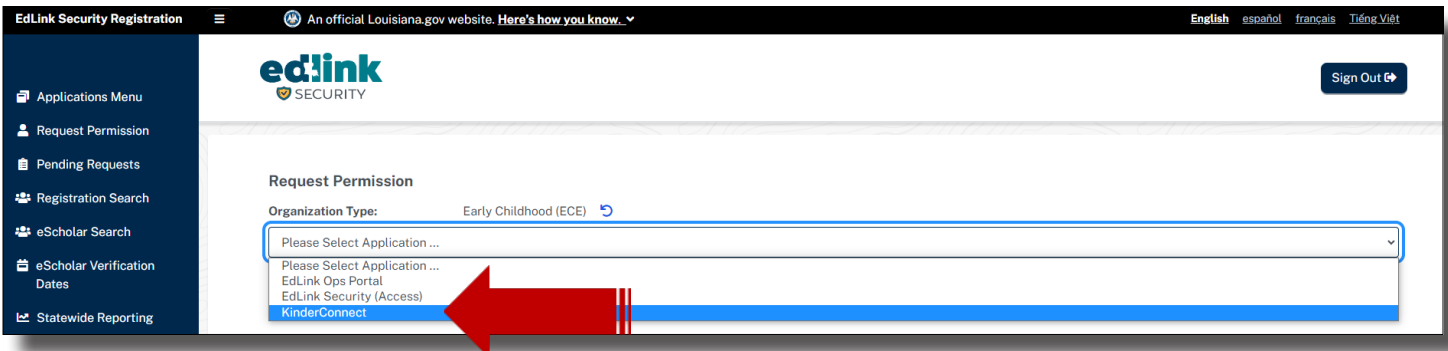
Select Request Permission on the right side of the page.

STEP 2



Select Early Childhood (ECE) from the drop-down menu.

STEP 3



Select KinderConnect from the drop-down menu.

STEP 4

EdLink Security Registration | An official Louisiana.gov website. Here's how you know... | English español français Tiếng Việt | Sign Out

Request Permission

Organization Type: Early Childhood (ECE) ↻
Application: KinderConnect ↻

Please Select Location Filter ...
District (School System)
Local (Site)
District and Local

Select District and Local from the drop-down menu.

STEP 5

EdLink Security Registration | An official Louisiana.gov website. Here's how you know... | English español français Tiếng Việt | Sign Out

Request Permission

Organization Type: Early Childhood (ECE) ↻
Application: KinderConnect ↻
Location Filter: District and Local ↻

buck

1, 2 Buckle My Shoe (Early Childhood)
1058 Highway 155, Mansura, LA 71350
District Code: Site Code: KLI001

Bucks & Bows Learning Center, LLC (Early Childhood)
387 Major Parkway, New Roads, LA 70760
District Code: Site Code: YA8001

L'I Bucks N Does Adventure & Learning Center (Early Childhood)

Begin entering the name of your Entity. IH/FH will enter their first and/or last name. Select the appropriate site as shown in Step 7.

STEP 6

EdLink Security Registration | An official Louisiana.gov website. Here's how you know... | English español français Tiếng Việt | Sign Out

Request Permission

Organization Type: Early Childhood (ECE) ↻
Application: KinderConnect ↻
Location Filter: District and Local ↻
Location: 1, 2 Buckle My Shoe (Early Childhood) ↻
Address: 1058 Highway 155, Mansura, LA 71350
District Code: Site Code: KLI001

Please Select Role ...
Please Select Role ...
CCAP Attendance Administrator
CCAP Attendance User

Select CCAP Attendance Administrator from the drop-down menu.

STEP 7

EdLink Security Registration

An official Louisiana.gov website. Here's how you know.

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Sign Out

Request Permission

Organization Type: Early Childhood (ECE)

Application: KinderConnect

Location Filter: District and Local

Location: 1, 2 Buckle My Shoe (Early Childhood)

Address: 1058 Highway 155, Mansura, LA 71350

District Code: Site Code: KLI001

Role: CCAP Attendance Administrator

Permissions:

- CCAP Attendance Administrator

Optional Notification:

Requesting Access

Submit Request Cancel Request

Check the box for CCAP Attendance Administrator.

Enter “Requesting Access” in the text box and Submit for Approval by LDOE. Please allow 2 business days for LDOE to review your requests. An email notification will be sent as soon as the requests has been reviewed.

Sign Out in the top right-hand corner of the page. Return to [Edlink](#) and Sign In.

MY NOTES