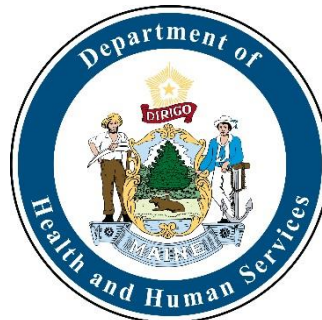


# Early Childhood Education Enrollment Data Collection Project

**Diane Nicholson-Early Care and Education Workforce Development  
Program Manager**

**[Diane.Nicholson@Maine.gov](mailto:Diane.Nicholson@Maine.gov)**

**Department of Health and Human Services (DHHS)  
Office of Child and Family Services (OCFS)**



# Early Childhood Education Enrollment Data Collection Project

The Department of Health and Human Services (DHHS) Office of Child and Family Services (OCFS) announces the Early Care & Education Enrollment Data Collection Project. By collecting this data from providers, the Department hopes to gain more knowledge of Maine's supply and demand as it applies to the [Child Care Supply/Demand Analysis](#). The Department will ultimately use this data to continue developing the [Child Care Plan for Maine](#) to ensure that all families in our state have access to affordable, reliable, and quality care for their children that supports them in their daily lives.

# Details of Reporting Your Program's Enrollment Data

You can report your data each month in the Early Childhood Educator Salary Supplement portal

If you log on once each month and report and/or verify your enrollment data, a \$50 provider stipend will be included in your Supplemental Salary/Provider Transition Grant check. This stipend can be used in the same manner as the grant funds.

# Wage Portal Log On Screen



STATE OF MAINE

Department of  
Health and Human Services

## OCFS Child Care Provider Wage Supplement Program

This service will allow existing Maine childcare providers to add or edit information about current staffing levels and apply for the Wage Supplement program. Please enter the license number and access code for your program.

**Please sign in**

Enter license # →

License Number

Access Code

← Enter Access Code

Sign in

The Access code will be emailed to you. **Please save your access code!**

# Wage Portal Log On Screen

## Enrollment Information

### Enrollment Data Collection (Optional)

By providing this data and keeping it updated each month you will receive an additional \$50 per month.

☐ Participate in Enrollment Data Program (Optional)

Save

Check the "Participate in Enrollment Data Project" box

## Edit/Update Application

### Instructions:

1. Please update the **Staffing Info** section below to accurately list all eligible staff within your program.
2. You may choose to apply for the **Provider Transition Grant** in addition to the **Wage Supplement Program**
3. Click the **Save & Submit** button to submit your application(s).

### Program Administrative Details

License Number: 123654  
License Capacity: 12  
QRIS Level: Star 4  
CCSP Provider: Yes  
Your Program's Vendor Code: VC123456789  
Program Name: Diane Nicholson  
Program Address: 123 Maine st  
ZIP: 04330  
Program Type: Family Child Care

### Owner Director Info

First: Diane  
Last: Nicholson  
Email: diane.nicholson@maine.gov

### Staffing Info

First Name\*

Diane

Last Name\*

Nicholson

Email Address\*

diane.nicholson@maine.gov

MRTQ Career Lattice Level\*

8

[Remove](#)

[Add New Employee](#)

### Application Types

- ☒ Apply for Wage Supplement Program (automatic enrollment)  
☒ Apply for Provider Transition Grant (Check to opt-in)

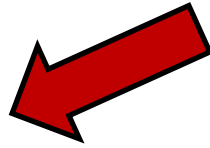
### Attestation

#### Wage Supplement Program Agreement

By checking the box below, you are attesting to the fact that the information provided is true and accurate at the time of completion. Any funds received

# Enrollment Data Project Portal

Add the number of infants, toddlers, preschoolers & school age children currently enrolled



Current Enrollment Age Groups			
<b>Infant*</b> Birth to 1 year	<b>Toddler*</b> 1 - 2 years old	<b>Preschool*</b> 3 - 4 years old	<b>School Age*</b> 5 years old and up
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

County?\*

Select ▼

## Enrollment Data Program Agreement

By checking the box below, you are attesting to the fact that the information provided is true and accurate at the time of completion. Any funds received must be used in accordance with the Act to Build a Child Care System by Recruiting Maine's Early Childhood Educator's Workforce (LD 1652). Per state law 22 MRSA §3737-A all funds received fall under the guidelines of maintaining program integrity. All funds received as staff bonuses will be paid directly to staff. Investigation and recovery of fraudulent payments and the right to impose sanctions implies.

☐ Yes, the information I provided is accurate

Your Enrollment Data has been successfully submitted. Please return next month to review and confirm.

**Confirm Enrollment Data**

## Edit/Update Application

### Instructions:

1. Please update the **Staffing Info** section below to accurately list all eligible staff within your program.
2. You may choose to apply for the **Provider Transition Grant** in addition to the **Wage Supplement Program**
3. Click the **Save & Submit** button to submit your application(s).

### Program Administrative Details

License Number: 123654

License Capacity: 12

QRIS Level: Star 4

CCSP Provider: Yes

Your Program's Vendor Code: VC123456789

# Enrollment Data Project Portal

## Enrollment Information

### Enrollment Data Collection (Optional)

By providing this data and keeping it updated each month you will receive an additional \$50 per month.

☒ Participate in Enrollment Data Program (Optional)

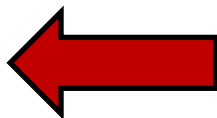
Last Updated: 04/05/2023

#### Current Enrollment Age Groups

Infant*	Toddler*	Preschool*	School Age*
Birth to 1 year	1 - 2 years old	3 - 4 years old	5 years old and up
<input type="text" value="1"/>	<input type="text" value="2"/>	<input type="text" value="4"/>	<input type="text" value="5"/>

County?\*

Kennebec ▼



Use the drop down menu to enter your county

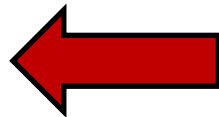
# Enrollment Data Project Portal

By checking the box below, you are attesting to the fact that the information provided is true and accurate at the time of completion. Any funds received must be used in accordance with the American Rescue Plan Act (ARPA) (Public Law 117-2). Per federal law 45 C.F.R. §98.68 all CCDF funds received fall under guidelines of maintaining program integrity.

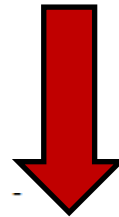
☒ Yes, the information I provided is accurate

Check the attestation box to agree

Confirm Enrollment Data



Submit your data by clicking on the Confirm Enrollment Data box  
Be sure to look for the green box stating your data was submitted!



☒ Yes, the information I provided is accurate

Your Enrollment Data has been successfully submitted. Please return next month to review and confirm.

Confirm Enrollment Data



# Questions?

**For more information or questions, please contact**

**[ECEWageProgram.DHHS@Maine.gov](mailto:ECEWageProgram.DHHS@Maine.gov)**

