Continuation Applications

What is this?

This quick reference guide provides step-by-step instructions for programs who would like to continue their grant agreements (with no site or location changes) for the upcoming school year.

Login to the GAPREK Provider Portal (note: the Project Director/ Primary Authorized User roles must be used). On the Pre-K Portal tile, click "Go To Providers List".

rogram List	
Georgia's	
Pre-K Portal	
Submit Pre-K grant applications, Manage Student and Teacher Rosters, Reconciliation, Payments and many more.	

On your Dashboard, click "Apply Now".

ĺ.	Dashboard
	Pre-K Continuation Grant Applications are open for the upcoming school year. Applications are due by 12:00 PM on June 30, 2026. Click "Apply Now" to begin the application. Apply Now
	Important Communications
	Critical Reporting Dates >

Requirements and Contact Information will be displayed.

D	Requirements and Contact Information	New Pre-K Application
2	Business Information	Requirements and Contact Information
3	Site Information	
1	Document Upload	Get Started ~
	Applicant Questions	* indicates a required field
	Program Assurances	New Applicants 1. All applicants interested in applying for Pre-K grant must complete and submit a Pre-K application on later than 5:00 n.m. June 30, 2026.
,	Review and Submit	Late or incomplete applications will not be accepted. 2. Georgia's Pre-K Programs are regulated and guided by the <u>Pre-K Providers' Operating Guidelines re</u> located on the Department website. The guidelines outline grant requirements, explain operating regulations, and provide detailed funding information. The guidelines should be reviewed by all new applicants prior to completing the application process.



Read the instructions then click the "I affirm" checkbox.





Review (and update if needed) the Contact Information, then click "Save & Next".

	Is Business Mailing Address same as	s the Business Address?		
	Street Address	Building or Suite Number	• City	
	Flat no 305	sf	Georgia	
15	* State	• Zip Code	County	
i.	AL	▼ 45678	Appling	
	Business Information • Business Designation			
	Governmental	*		
	Save & Exit		Sa	ive & Next

The Grant Agreement Signatory Page will be displayed. If changes need to be made, document here. Verification will be needed if any changes are made.

Welcome to Testing VLP 02 Prov	rider ID 869355			← Return to Pre-K provid
Requirements and Contact Information Grant Agreement Signatory Information	Continuation	Application for G Signatory Information	eorgia's Pre-K Program	I
Site Information Document Upload S Program Assurances	The Grant Agreement agreement if the Pre-I Superintendent, etc.) must sign the grant ag	Signatory must be an officer or re K grant is awarded. The Grant Agr who has apparent authority or legi greement if the grant is awarded.	presentative vested with the powers to commit to eement Signatory (CEO, CCO, CFO, President, S al authority for the provider/company/school sys	he organization to a binding ble Proprietor, School tem/etc. applying for the grant
6 Review and Submit	* Indicates required field Grant Agreement Sig * Prefix Mr.	d natory Information * First Name	• 0	
	Richard	7	• Title Secretary	



Review the details in the Grant Agreement Signatory Business Address, and Mailing Address sections, then click "Save & Next".

	Street Address	Building or Suite Number	• City
	325709 Park Avenue		Duluth
Signatory			
	• State	• Zip Code	
	AK	▼ 30137	
	Grant Agreement Signatory Busi	ness Mailing Address	
15	* Street Address	Building or Suite Number	*City
-	325709 Park Avenue		Duluth
	* State	*Zip Code	
	AK	· 30137	

Select the checkboxes to affirm the Program Assurance, enter the Name, then click the "Save & Next" button.

ting VLP 02 Provider I	ID 869355			 Return to Pre-K provide
nts and Contact h	Program Assurances			Edit
ement Signatory h	Lagree:			
ation	All information provided in this agreement.	application is true and accurate. I understand that faisif	ying information reported will result in automatic termi	ination of the grant
Upload	* I understand that all informatic	in contained within this application, as well as document	ation required as a Pre-K fiscal agent, is considered p	ublic information and
ssurances d Submit	 I will concern in the programs piece in the programs piece in the program piece in the program piece in the p	Internet the and is subject to open necords request(s). Infrancial integrity and fiscal responsibility including, bu- blance with rules and regulations of the Secretary of Sta- t of employee and other financial obligations. Ny with the Pre-K Provider's Operating Guidelines.	t not limited to, appropriate use of Pre-K grant funds, ters office, the State Department of Audits, and other s	compliance with state state agencies, as ap-
	Signature of Grant Agreem	ent signatory		
	•Name Paresh D	• Title Secretary	• Date of signature Dec 16, 2024	
	Save & Exit		Pres	vious

Review the information provided in the previous sections, then click the "Submit" button.

quirements and Contact formation	Program Assurances			
				Edit
ant Agreement Signatory formation	Lagree:			
te Information	All information provided in thi agreement.	is application is true and accurate. I understand that falsil	lying information reported will result in automatic termin	ation of the grant
scument Upload	I understand that all informati will be included in the program's g	ion contained within this application, as well as document permanent file and is subject to Open Records request(s)	tation required as a Pre-K fiscal agent, is considered put	blic information and
ogram Assurances	I will conduct my business will	ith financial integrity and fiscal responsibility including b	ut not limited to appropriate use of Pre-K grant funds, o	ompliance with state
wiew and Submit	and federal tax requirements, com plicable, and appropriate settleme	npliance with rules and regulations of the Secretary of Sta ant of employee and other financial obligations.	ste's office, the State Department of Audits, and other st	ate agencies, as ap-
	I have read and agree to com	ply with the Pre-K Provider's Operating Guidelines.		
	Signature of Grant Agreem	nent Signatory		
	•Name	• Title	Date of signature	







What if I still have questions?

If you have additional questions, please contact your Georgia's Pre-K Specialist or <u>GAPREK.support@decal.ga.gov</u>.

