



CPR and Health & Safety Class Reimbursement Form (for Child Care Providers in Contra Costa County)

Eligible providers may receive up to **\$150.00 reimbursement** for completed classes or coursework for a n **8-hour Pediatric CPR and/or an 8-hour Preventive Health and Safety** classes. Reimbursement will not exceed the actual costs. Completion of required training may consist of a course completion card or certificate issued by the American Red Cross, the American Heart Association, or an Emergency Medical Services Authority (EMSA) approved training program.

Please note that reimbursement processes may take up to 6 weeks from the date we receive your completed application.

To qualify for this reimbursement, providers must:

- Work in a licensed child care program which is registered in Contra Costa County or receive payment for providing child care services, as an exempt child care provider, through the CocoKids Subsidy Program
- Have completed eligible health and safety training between July 1, 2025, and June 30, 2026
- Request must be submitted during the fiscal year, July 1, 2025, and June 30, 2026

Due to limited funding, reimbursement will be provided on a first-come, first-served basis.

Reimbursements are **limited** by the following per **year**:

- **Exempt Care Provider:**
 - One (1) reimbursement for one-time completion of the required 8-hour Preventive Health and Safety class.
 - One (1) reimbursement for CPR every 2 years as required
- **Small Family Child Care:**
 - Two (2) reimbursements for one-time completion of the required 8-hour Preventive Health and Safety class.
 - Two (2) reimbursements for CPR every 2 years as required
- **Large Family Child Care:**
 - Three (3) reimbursements for one-time completion of the required 8-hour Preventive Health and Safety class.
 - Three (3) reimbursements for CPR every 2 years as required
- **Child Care Center Program:**
 - Six (6) reimbursements for one-time completion of the required 8-hour Preventive Health and Safety class.
 - Six (6) reimbursements for CPR every 2 years as required

To receive this reimbursement, providers will need to submit **ALL** the following:

- Copy of receipt** showing proof of payment for training(s)
- Copy of the front and back of the card or certificate** of completion from the training institution
- Copy of current program license of your program or place of employment** provided by Community Care Licensing. If you are an Exempt provider for the CocoKids Subsidy program, we will verify your participation.
- Completed request form** on the next page. **Signature must be handwritten and mailed to CocoKids (We do not accept scanned documents)**



Request for Reimbursement Form:

Name of person to be reimbursed: _____

Program type: _____

Signature of person to be reimbursed: _____

Street address: _____

City: _____ Zip code: _____

Phone number: _____

Email: _____

Name of person(s) and amount paid per training:

Total Amount Paid: _____

Please send this form and all required paperwork for reimbursement to:

**CocoKids
Attn: Nargis Kamran
1035 Detroit Avenue, Suite 200
Concord, CA 94518**

Incomplete packets will be returned.

If you require further information, please don't hesitate to contact **Nargis Kamran**
at **(925) 265-6453** or **nargis.kamran@cocokids.org**