


**Florida Department of Education
Project Award Notification**

1 PROJECT RECIPIENT Charlotte County School District	2 PROJECT NUMBER 080-1274B-4CH01				
3 PROJECT/PROGRAM TITLE Title IX, Part A - Education of Homeless Children and Youth Project <p style="text-align: right;">TAPS 24A006</p>	4 AUTHORITY 84.196A Title IX Part A Homeless ESSA USDE or Appropriate Agency FAIN#: S196A230010				
5 AMENDMENT INFORMATION Amendment Number: Type of Amendment: Effective Date:	6 PROJECT PERIODS Budget Period: 07/01/2023 - 08/31/2024 Program Period: 07/01/2021 - 08/31/2024				
7 AUTHORIZED FUNDING Current Approved Budget: \$118,919.00 Amendment Amount: Estimated Roll Forward: Certified Roll Amount: Total Project Amount: \$118,919.00	8 REIMBURSEMENT OPTION Federal Cash Advance				
9 TIMELINES <ul style="list-style-type: none"> Last date for incurring expenditures and issuing purchase orders: <u>08/31/2024</u> Date that all obligations are to be liquidated and final disbursement reports submitted: <u>10/20/2024</u> Last date for receipt of proposed budget and program amendments: <u>07/31/2024</u> Refund date of unexpended funds; mail to DOE Comptroller, 325 W. Gaines Street, 944 Turlington Building, Tallahassee, Florida 32399-0400: Date(s) for program reports: Federal Award Date : <u>07/01/2023</u> 					
10 DOE CONTACTS Program: Courtney Walker Phone: (850) 245-0665 Email: courtney.walker@fldoe.org Grants Management: Unit A (850) 245-0735	<table style="width: 100%;"> <tr> <td style="width: 50%;">Comptroller Office</td> <td style="width: 50%;">UEI#: NTKBZDVK3F25</td> </tr> <tr> <td>Phone: (850) 245-0401</td> <td>FEIN#: F596000539002</td> </tr> </table>	Comptroller Office	UEI#: NTKBZDVK3F25	Phone: (850) 245-0401	FEIN#: F596000539002
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Phone: (850) 245-0401	FEIN#: F596000539002				
11 TERMS AND SPECIAL CONDITIONS <ul style="list-style-type: none"> This project and any amendments are subject to the procedures outlined in the <u>Project Application and Amendment Procedures for Federal and State Programs</u> (Green Book) and the General Assurances for Participation in Federal and State Programs and the terms and requirements of the Request for Proposal or Request for Application, RFP/RFA, hereby incorporated by reference. For federal cash advance projects, expenditures must be recorded in the Florida Grants System (FLAGS) as close as is administratively feasible to when actual disbursements are made for this project. Cash transaction requests must be limited to amounts needed and be timed with the actual, immediate cash requirements to carry out the purpose of the approved project. All provisions not in conflict with any amendment(s) are still in full force and effect and are to be performed at the level specified in the project award notification. The Department's approval of this contract/grant does not excuse compliance with any law. Other: 					
12 APPROVED: <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="width: 45%;"> <p style="text-align: center;"><i>Dinh Nguyen</i></p> <hr style="border: 0; border-top: 1px solid black; margin: 5px 0;"/> <p style="text-align: center;">Authorized Official on behalf of the Commissioner of Education</p> </div> <div style="width: 45%; text-align: center;"> <p><u>10/03/2023</u></p> <p>Date of Signing</p> </div> <div style="width: 10%; text-align: right;">  <p style="font-size: small;">FLORIDA DEPARTMENT OF EDUCATION fldoe.org</p> </div> </div>					

**INSTRUCTIONS
PROJECT AWARD NOTIFICATION**

- 1** Project Recipient: Agency, Institution or Non-Governmental entity to which the project is awarded.
- 2** Project Number: This is the agency number, grant number, and project code that must be used in all communication. (Projects with multiple project numbers will have a separate DOE-200 for each project number).
- 3** Project Description: Title of program and/or project. TAPS #: Departmental tracking number.
- 4** Authority: Federal Grants - Public Law or authority and CFDA number. State Grants - Appropriation Line Item Number and/or applicable statute and state identifier number.
- 5** Amendment Information: Amendment number (consecutively numbered), type (programmatic, budgeting, time extension or others) in accordance with the Project Application and Amendment Procedures for Federal and State Programs (Green Book), and effective date.
- 6** Project Periods: The periods for which the project budget and program are in effect.
- 7** Authorized Funding: Current Approved Project (total dollars available prior to any amendments); Amendment Amount (total amount of increase or decrease in project funding); Estimated Roll Forward (roll forward funds which have been estimated into this project); and Total Project Amount (total dollars awarded for this project).
- 8** Reimbursement Options:
 - Federal Cash Advance –On-Line Reporting required monthly to record expenditures.
 - Advance Payment – Upon receipt of the Project Award Notification, up to 25% of the total award may be advanced for the first payment period. To receive subsequent payments, 90% of previous expenditures must be documented and approved by the Department.
 - Quarterly Advance to Public Entity – For quarterly advances of non-federal funding to state agencies and LEAs made in accordance within the authority of the General Appropriations Act. Expenditures must be documented and reported to DOE at the end of the project period. If audited, the recipient must have expenditure detail documentation supporting the requested advances.
 - Reimbursement with Performance - Payment made upon submission of documented allowable expenditures, plus documentation of completion of specified performance objectives.
- 9** Timelines: Date requirements for financial and program reporting/requests to the Department of Education.
- 10** DOE Contacts: Program contact for program issues, Grants Management Unit for processing issues, and Comptroller's Office number for payment information.
- 11** Terms and Special Conditions: Listed items apply to this project. (Additional space provided on Page 2 of 2 if needed.)
- 12** Approved: Approval signature from the Florida Department of Education and the date signature was affixed.

FLORIDA DEPARTMENT OF EDUCATION

PROJECT APPLICATION

Please return to: Florida Department of Education Office of Grants Management Room 332 Turlington Building 325 West Gaines Street Tallahassee, Florida 32399-0400 Telephone: (850) 245-0735	A) Program Name: 2023-24 Title IV, Part A – Education of Homeless Children and Youth – Year 3 TAPS NUMBER: 24A006	DOE USE ONLY Date Received <div style="text-align: center; color: red; font-weight: bold;">06/28/2023 via SHAREFILE</div>						
B) Name and Address of Eligible Applicant: Charlotte County District School Board 1445 Education Way Port Charlotte, FL 33948		Project Number (DOE Assigned) 080-1274B-4CH01						
C) Total Funds Requested: \$ 118,919.00 <hr style="width: 25%; margin-left: 0;"/> <div style="text-align: center;"> DOE USE ONLY Total Approved Project: \$ 118.919.00 </div>	D) Applicant Contact & Business Information <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 60%;"> Contact Name: Susan Flores Fiscal Contact Name: Elizabeth Lewis </td> <td style="width: 40%;"> Telephone Numbers: 941-255-7480 941-255-0808 ext. 2014 </td> </tr> <tr> <td> Mailing Address: 3131 Lakeview Blvd. Port Charlotte, FL 33948 </td> <td> E-mail Addresses: Susan.flores@yourcharlotteschools.net Elizabeth.lewis@yourcharlotteschools.net </td> </tr> <tr> <td> Physical/Facility Address: 3131 Lakeview Blvd. Port Charlotte, FL 33948 </td> <td> UEI number: L5AFAYVE55A5 FEIN number: 596000539 </td> </tr> </table>		Contact Name: Susan Flores Fiscal Contact Name: Elizabeth Lewis	Telephone Numbers: 941-255-7480 941-255-0808 ext. 2014	Mailing Address: 3131 Lakeview Blvd. Port Charlotte, FL 33948	E-mail Addresses: Susan.flores@yourcharlotteschools.net Elizabeth.lewis@yourcharlotteschools.net	Physical/Facility Address: 3131 Lakeview Blvd. Port Charlotte, FL 33948	UEI number: L5AFAYVE55A5 FEIN number: 596000539
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Physical/Facility Address: 3131 Lakeview Blvd. Port Charlotte, FL 33948	UEI number: L5AFAYVE55A5 FEIN number: 596000539							
CERTIFICATION <p>I, <u>Mark Vianello</u>, (Please Type Name) as the official who is authorized to legally bind the agency/organization, do hereby certify to the best of my knowledge and belief that all the information and attachments submitted in this application are true, complete and accurate, for the purposes, and objectives, set forth in the RFA or RFP and are consistent with the statement of general assurances and specific programmatic assurances for this project. I am aware that any false, fictitious or fraudulent information or the omission of any material fact may subject me to criminal, or administrative penalties for the false statement, false claims or otherwise. Furthermore, all applicable statutes, regulations, and procedures; administrative and programmatic requirements; and procedures for fiscal control and maintenance of records will be implemented to ensure proper accountability for the expenditure of funds on this project. All records necessary to substantiate these requirements will be available for review by appropriate state and federal staff. I further certify that all expenditures will be obligated on or after the effective date and prior to the termination date of the project. Disbursements will be reported only as appropriate to this project, and will not be used for matching funds on this or any special project, where prohibited.</p> <p>Further, I understand that it is the responsibility of the agency head to obtain from its governing body the authorization for the submission of this application.</p> <div style="display: flex; justify-content: space-between; align-items: flex-end; margin-top: 20px;"> <div style="width: 30%;"> E) Signature of Agency Head </div> <div style="width: 40%; text-align: center;"> School Superintendent _____ Title </div> <div style="width: 20%; text-align: right;"> <div style="text-align: center; color: blue; font-weight: bold;">6/27/2023</div> Date </div> </div>								



**2023-24 Title IX, Part A (TIXPA)
Education for Homeless Children and Youth (EHCY) Project –
Year 3 Application**

Local Educational Agency Name:	Charlotte County Public Schools
Project Contact Name:	Susan Flores
Project Contact Title:	Coordinator of Social Work and Mental Health Services
Project Contact Telephone:	941-255-7480
Project Contact E-mail:	Susan.flores@yourcharlotteschools.net
McKinney-Vento Liaison Name:	Lisa Bratton

For more information, please contact:

Florida McKinney-Vento Program

Phone: (850) 245-0479

Email: flmvp@fldoe.org

**Bureau of Federal Educational Programs
Florida McKinney-Vento Program**

2023-24 TIXPA–EHCY Project – Year 3

Program Specific Assurances

The Local Educational Agency (LEA) must assure that:

- The LEA will comply with all reporting requirements at such time and in such manner and containing such information as required, including but not limited to the requirements under the McKinney-Vento Act;
- All costs are reasonable and necessary and that these uses of funds align with the purpose of, and other requirements in, the [McKinney-Vento Homeless Assistance Act](#) (MVA); and
- The LEA will meet the requirements of section 442 of the General Education Provisions Act (GEPA), 20 U.S.C. 1232e, [Single local educational agency application](#).

☒ By checking this box, I hereby certify that the LEA agrees to all the assurances of the EHCY Program, and will abide by all federal, state and local laws.

Part 1: SUMMARY

☒ By checking this box, I hereby certify that the intended outcomes for Year 3 have not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the intended outcomes for Year 3 have changed, please describe the changes below.

Part 2: GOALS AND PROGRESS MONITORING

☒ By checking this box, I hereby certify that the Areas of Focus for Year 3 have not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the Areas of Focus for Year 3 have changed, please describe the changes below.

☒ By checking this box, I hereby certify that the Goals for Year 3 have not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the Goals for Year 3 have changed, please describe the changes below.

☒ By checking this box, I hereby certify that the Progress Monitoring Indicators for Year 3 have not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the Progress Monitoring Indicators for Year 3 has changed, please describe the changes below.

Part 3: IMPLEMENTATION PLAN

A. Use of Other Resources

What other federal funds is the LEA/consortium using to support the identification, enrollment, retention, and educational success of children and youth experiencing homelessness specifically? Select all that apply.

- ☐ Coronavirus Aid, Relief, and Economic Security (CARES) Act funds (signed into law March 2020)
- ☐ Coronavirus Response and Relief Supplemental Appropriations (CRRSA) Act (December 2020)
- ☐ American Rescue Plan (ARP) ESSER funds
- ☒ Title I, Part A Homeless Set-aside funds reserved for children and youth experiencing homelessness
- ☒ American Rescue Plan-Homeless Children and Youth (ARP-HCY) funds
- ☐ Other funds and services available to children, youth, and families experiencing homelessness. Please specify:

Use of Title I, Part A Reservation for Homeless Education

1. Provide the amount of the Title I, Part A Homeless (TIPA) Reservation for the 2022-23 and 2023-24 subgrants. Verify this amount with TIPA staff, especially for the 2023-24 school year.

2022-23 TIPA Homeless Reservation	2023-24 TIPA Homeless Reservation*
\$149,241.00	\$168,001.00

****The 2023-24 amount above must match the Homeless Set-Aside amount on the 2023-24 Title I, Part A application in order to be approved.***

2. Indicate how the amount of the 2023-24 Title I, Part A Reservation was determined. Include in your response, a brief explanation as to why the amount has increased or decreased from the previous year (2022-23).

A meeting was held with the Title I project manager, the McKinney-Vento Liaison, and the Coordinator for Social Work and Mental Health Services to review expenditures for the current year and the needs for the 2023-24 school year. The McKinney-Vento's Liaison's job title will be changing to the Families in Transition (FIT) Program Manager. The position will be year-round, making FIT services available for the 3 year-round school. The FIT manager will identify any eligible students, complete a needs assessment, and provide outreach services. It was agreed to continue to send the FIT manager and 2 additional staff members that work with HCY to the NAEHCY conference. Additional funds will be needed to attend the Pre-Conference. The pre-conference covers essential topics related to McKinney-Vento guidelines and regulations.

3. List by number (e.g., 1, 2, 3) the activities supported with the use of the 2023-24 Title I, Part A reservation.

1. 90% of the salary and benefits of the FIT Program Manager and Administrative Assistant
2. Travel and registration expenses for the FIT Program Manager and 2 CCPS staff members that work with HCY to attend the NAEHCY conference as well as the pre-conference in Louisiana.
3. Gas cards for transportation to and from the school of origin while district transportation is established.
4. Senior dues
5. Tutoring services after school in core content areas.

B. Proposed Use of Grant Funds for EHCY

☐ By checking this box, I hereby certify that the Activities for Year 3 has not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the activities for Year 3 have changed, please describe the changes below and complete an Activity Table for each new activity.

Activity 1 (Case Management for Academic Support) has been modified to include salary for additional hours for staff to provide case management to HCY students to ensure participation in summer school academic opportunities and year-round school programming.

Activity 3 (Professional Development for District and School Staff) has been modified. The Families in Transition Program Manager will be a year-round position. We will no longer need to pay for additional hours for the FIT Program Manager to provide training on the weekends or evenings. We are adding to this activity salary for additional hours for the registrars and data entry staff to attend ongoing professional development regarding the McKinney-Vento program. The initial training provided to the registrars at the end of the school year reached approximately 33% of the staff. Those that were unable to attend have requested the training be offered during the 23-24 school year. The online manual has been developed and introduced to staff. Added to this activity will be the development of a flyer regarding the FIT program including guidelines, HCY rights, and the referral process to distribute to new staff at the beginning of the year orientation.

Activity 4 (Staff Development) has been modified. The number of staff that will attend the conferences has been amended. Funding for 1 social worker to attend the NAEHCY conference in New Orleans, Louisiana is requested. There is no comparable conference in Florida. This conference is recognized as one of the leading professional development opportunities for school district liaisons and staff working with HCY and families across the nation and attendance is encouraged by the State Coordinator. Two social workers and the FIT Program Manager will attend the Florida Coalition to end Homelessness Conference. The coordinator of Social Work and Mental Health Services and the FIT Program Manager will be attending the FASFEPA conference.

Activity 5 (Collaborations with Community Partners) will be modified. The Families in Transition Program Manager will be a year-round position. We will no longer need to pay for additional hours to attend activities which may occur on the weekends or evenings. We are adding to this activity the development of a quarterly newsletter that will be distributed to our community partners and all staff at Charlotte County Public Schools. The newsletter will include updates on the FIT program and McKinney-Vento as well as resources to assist staff working with homeless students and their families.

Activity 6 (Trauma Informed Practices) will be modified. Cope Notes was not purchased because it did not meet the district's technology guidelines. We are adding to this activity funds for the social workers and mental health team staff to provide trauma-informed groups for students impacted by the trauma of homelessness. Funds will be needed to pay for additional hours for the staff if the groups are conducted before or after school as well as supplies needed to run the group and activities.

☐ By checking this box, I hereby certify that no amendments were submitted for Year 2.

If an amendment or amendments were submitted for Year 2, briefly summarize the changes below.

As mentioned, Cope Notes were not purchased. The Florida Coalition for the Homeless conference was cancelled and staff did not attend the FASFEPA conference. An amendment was submitted to provide gas cards for both transporting HCY students to and from their school of origin while district transportation is arranged and summer programming to ensure equal access for HCY students. In order to ensure participation in summer school academic opportunities, salary for additional hours for staff to provide case management services over the summer was included in the amendment request. Lastly, funding to provide training to registrars on the McKinney-Vento program and processes was requested.

A. LEA Program Operations Activities

Project Management

☐ By checking this box, I hereby certify that the McKinney-Vento (MV) Liaison has not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the McKinney-Vento Liaison has changed, please provide below the first and last names, email address, qualifications for the position, and percent of time devoted to the MV Program.

Lisa Bratton, lisa.bratton@yourcharlotteschools.net Ms. Bratton is a licensed clinical social worker that has worked as a school social worker for over 15 years. She is a certified professional educator in the field of school social work with both an ESE and Reading endorsement. 90% of her time is devoted to the MV program.

☐ By checking this box, I hereby certify that the Project Manager has not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the Project Manager has changed, please provide below the first and last names and position title.

Susan Flores, Coordinator of Social Work and Mental Health Services

☐ By checking this box, I hereby certify that the additional MV staff have not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the MV staff have changed, please provide below the first and last names, position title, position FTE, and percent of time of the staff's time devoted to the MV Program.

Name (First, Last)	Position Title	Position FTE	Percent of Time - MVP
Brittany Baumhardt	School Social Worker for the Alternative High School. She Identifies and refers potential students in transition to the FIT Liaison and provides case management services to identified students to increase graduation outcomes.	0.15	15%
Alyssa Short	School Social Worker. She is assigned 1 day per week to identify and refer potential FIT students. She will provide case management services to identified students to remove barriers, improve academically, and grade promotion.	0.20	20%

Part 4: EVALUATION PLAN

☒ By checking this box, I hereby certify that the Evaluation Plan has not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the Evaluation Plan has changed, please describe the changes below.

Part 5: STRATEGIC IMPERATIVES, EXECUTIVE ORDER, GEPA

Support for Strategic Imperatives

☒ By checking this box, I hereby certify that the Strategic Imperatives have not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the Strategic Imperatives have changed, please describe the changes below.

Executive Order

Instructions: Read the statement on Executive Order 11-116 and then select the checkbox to continue.

-
- ☒ The employment of unauthorized aliens by any contractor is considered a violation of Section 274A (e) of the Immigration and Nationality Act. If the contractor knowingly employs unauthorized aliens, such violation shall be cause for unilateral cancellation of the contract. In addition, pursuant to Executive Order 11-116, for all contracts providing goods or services to the state in excess of nominal value; (a) the Contractor will utilize the E-Verify system established by the U.S. Department of Homeland Security to verify the employment eligibility of all new employees hired by the contractor during the Contract term, (b) require that Contractors include in such subcontracts the requirement that subcontractors performing work or providing services pursuant to the state contract utilize the E-Verify system to verify the employment eligibility of all new employees hired by the subcontractor during the contract term.

General Education Provisions Act (GEPA)

- ☒ By checking this box, I hereby certify that the GEPA statement has not changed from the TIXPA-EHCY Project Application-Years 1 or 2.

If the GEPA statement has changed, please describe the changes below.

**FLORIDA DEPARTMENT OF EDUCATION
BUDGET NARRATIVE FORM 101S**

Number:	Charlotte County School Board
Funded Project Number:	080-1274B-4CH01
FY Number:	24A006

(2)	(3)	(4)	(5)	(6)	(7)
FUNCTION	OBJECT	Account Title and Narrative	FTE POSITION	AMOUNT	% Allocated to This Project
5100	510	All identified HCY students will be assessed and provided the necessary basic school supplies to actively participate in their educational activities such as backpacks, notebook paper, pens, pencils, folders, and highlighters. 5 packs of 24 backpacks @ \$110.00 per pack = \$550.00. Supplies for 100 students @ \$20.00 per student = \$2,000.00. Provide school uniforms for 50 students @ \$90.00 = \$4,500.00		\$7,050.00	100%
7800	390	Gas cards for transporting HCY students to and from their school of origin while district transportation is being established. Gas cards will be issued upon verification of student attendance. 140 Gas only @ \$25.00 = \$3,500.00		\$3,500.00	100%
6100	730	Provide before or after school program for tutoring and homework assistance for HCY students who are at risk of failing to meet state standards for up to 142 weeks @ 75.00 per week. Academic support will be provided to individuals and small groups and may take place on campus, at shelters, or off-campus at a safe location.		\$10,650.00	100%
6100	730	Assist HCY students and parents with obtaining a copy of birth certificates for 10 students @ \$15.00 each.		\$150.00	100%
6110	130	Salary for additional hours for social workers and mental health team staff to provide trauma-informed groups for HCY students impacted by the trauma of homelessness. 120 hours @ \$40.00 per hour = \$4,800.00	0.08	\$4,800.00	8%
6110	210	Employee Benefits - Retirement (Florida Retirement System) for staff working additional salary hours calculated @13.57% of additional hours		\$ 651.36	8%
6110	220	Social Security - FICA for staff working additional hours calculated @6.2% of additional hours		\$ 297.60	8%
6110	220	Medicare for staff working additional hours calculated @1.45% of additional salary hours		\$ 69.60	8%
6110	240	Workers Compensation for staff working additional hours calculated @1.1% of additional salary hours		\$ 52.80	8%
5100	510	Supplies to support trauma informed groups for HCY students impacted by the trauma of homelessness including but not limited to art supplies, paper, folders		\$750.00	100%

6100	330	In County Mileage: Mileage reimbursement for the FIT Program Manager, FIT high school social worker, and FIT Administrative Assistant for community presentations, events, meetings, shelter visits, home visits and various locations to drop off FIT materials and reimbursement for travel to schools and district departments. (2,000 miles x .655 = \$1,310.00)		\$1,310.00	100%
6100	330	Out of County Travel: mileage, meals, hotels, and conference registration for the Families in Transition Program Manager and 2 social workers to attend the Florida Coalition for the Homeless conference. Registration for 3 people @ \$400.00 each = \$1,200.00, hotel rooms for 3 people @ \$150.00 per day for 3 days = \$1,350.00, per diem is \$46.00 per day for 3 days for 3 people = \$414.00, and round trip mileage for 3 = \$516.00 for a total of \$3,480.00. Mileage, meals, hotels, and conference registration for the Families in Transition Program Manager and The Coordinator of Social Work and Mental Health Services to attend FASFEPA. Registration for 2 people @ \$300.00 each = \$600.00, hotel rooms for 2 people @ \$150.00 per day for 3 days = \$900.00, meal per diem = \$46.00/day for 3 days for 2 people = \$276.00, and round trip mileage for 2 = \$342.00 for a total of \$2,118.00. Out of County Travel: mileage, meals, hotels, and conference registration for 1 designated social worker to attend the NAEHCY conference. NAEHCY is offering its annual conference in New Orleans, Louisiana, in 2023. There is no comparable conference in Florida. This conference is recognized as one of the leading professional development opportunities for school district liaisons and staff working with HCY and families across the nation and attendance is encouraged by the State Coordinator. The sessions cover topics relevant to the duties of the homeless liaison and staff working with students in transition. Registration fee = \$948.00, hotel room = \$1,000.00 for 5 days, meal per diem = \$230 at \$46.00/day for 5 days, airfare and baggage = \$500.00, and transportation/mileage \$150.00 for a total of \$2,828.00		\$8,426.00	100%
6400	150	Training stipends for registrars and data entry staff to staff to attend 3 one hour presentations on McKinney-Vento identification and processes. 19 staff for 3 hours @ \$22.00 per hour = \$1,254.00		\$1,254.00	100%
6400	210	Employee Benefits - Retirement (Florida Retirement System) for staff working additional salary hours calculated @ 13.57% of additional hours		\$ 170.17	100%
6400	220	Social Security - FICA for staff working additional hours calculated @6.2% of additional hours		\$ 77.75	100%
6400	220	Medicare for staff working additional hours calculated @1.45% of additional salary hours		\$ 18.18	100%
6400	240	Workers Compensation for staff working additional hours calculated @1.1% of additional salary hours		\$ 13.79	100%

6100	390	Printing: Newsletters 750 @ \$0.54 = \$405.00. Student Residency Questionnaire for each student 16,700 @ \$0.08 = \$1,336.00. Other outreach services including but not limited to brochures, posters, FIT staff business cards and training materials totaling approximately \$1,100.80		\$2,841.80	100%
9100	730	Dues & Fees: school fees and activities for 50 students @ 100.00 per student = \$5,000.00; testing fees for 5 students @ 50.00 = \$250.00.		\$5,250.00	100%
6130	730	Medical/Dental Fees: 50 students @ \$60.00 for physicals = \$3,000.00		\$3,000.00	100%
6110	130	Salary for additional hours for staff to provide case management to HCY students to ensure participation in summer school academic opportunities and year round school programming 288 hours @ 40.00 per hour = \$11,520.00	0.2	\$11,520.00	20%
6110	210	Employee Benefits - Retirement (Florida Retirement System) for staff working additional salary hours calculated @13.57% of additional hours		\$ 1,563.26	20%
6110	220	Social Security - FICA for staff working additional hours calculated @6.2% of additional hours		\$ 714.24	20%
6110	220	Medicare for staff working additional hours calculated @1.45% of additional salary hours		\$ 167.04	20%
6110	240	Workers Compensation for staff working additional hours calculated @1.1% of additional salary hours		\$ 126.72	20%
6110	130	Salaries for social workers assigned to assist with the FIT program, including 2 @ 20% of total salary (\$26,141.60), and 1 @ 15% of total salary (\$9,820.20)	0.55	\$ 35,962.40	55%
6110	210	Retirement-FRS (Florida Retirement System) for 3 social workers calculated at 13.57% of salary applied to this grant		\$ 4,880.10	55%
6110	220	Social Security - FICA for 3 social workers calculated at 6.2% of salary applied to this grant		\$ 2,229.67	55%
6110	220	Medicare/FICA: for 3 social workers calculated at 1.45% of salary applied to this grant		\$ 521.45	55%
6110	230	Cafeteria Plan - Fringe Benefits for 3 social workers based on \$37 per day		\$ 4,181.00	55%
6110	240	Workers Compensation for 3 social workers calculated at 1.1% of salary applied to this grant		\$ 395.59	55%
6100	376	Cell Phone charges for 1 cell phone to be used by the FIT Program Manager for communication with FIT families and students. Calculated at the district approved rate of \$28.24 per month for 12 months = \$338.88 (339.00)		\$339.00	100%
7200	792	Indirect Costs: at the approved rate of 5.3 %		\$ 5,985.48	100%
D) TOTAL				\$118,919.00	

DOE ATTESTATION (Program and Grants Management)

The cost for each line item budget category has been evaluated and determined to be allowable, reasonable and necessary as required by Section 216.3475, Florida Statutes. Documentation is on file evidencing the methodology used



and the conclusions reached.

April 2022

DOE 101S

Budget Narrative Form Instructions

- A) Enter Name of Eligible Recipient/Fiscal Agent
- B) Enter DOE Assigned Project Number
- C) Enter TAPS Number
- D) Enter the Total Amount for column (5)

(1) Function Code – *For School Districts Only* – Enter the Function Code, as required in the *Financial and Program Cost Accounting and Reporting for Florida Schools Manual*, which best classifies the overall purpose or objective of the goods or services budgeted.

(2) Object Code – Enter the Object Code which best classifies the goods or services budgeted. *School Districts* - Use the three-digit Object Code as required in the *Financial and Program Cost Accounting and Reporting for Florida Schools Manual*; *Colleges and Universities* - Use the first three digits of the Object Codes listed in the *Florida Accounting Information Resource Manual*; *Non-public entities* – Use the Object Codes that are used in the respective entity's/agency's chart of accounts.

description of each good or service budgeted and its purpose or use. For example:

Salaries – Describe the type(s) of position(s) requested and the major responsibilities/duties of each position(s). Use a separate line to describe each type of position.

Other Personal Services – Describe the type of service(s), its purpose or use, and an estimated number of hours for each type of position. OPS is defined as compensation paid to persons, including substitute teachers not under contract, who are employed to provide temporary services to the program.

Professional/Technical Services – Describe the services rendered by personnel, other than agency personnel employees, who provide specialized skills and knowledge.

Contractual Services and/or Inter-agency agreements – Describe the services to be rendered and the type of entity or agency (name, if available).

Travel – Describe each type of travel to be supported with project funds, such as conference(s), local travel, in- or out-of-district, and out-of-state. Do not list

individual names. List individual position(s) when travel funds are being requested to perform necessary activities.

Materials and Supplies - Describe the type of item to be purchased and its purpose or use.

Capital Outlay - Describe the type of item/equipment to be purchased and its purpose or use.

Indirect Cost - Refer to the DOE *Project Application and Amendment Procedures for Federal and State Programs (Green Book)* for additional guidance

regarding indirect cost.

- *School Districts Only* - Provide the percentage rate from the district's Approved Indirect Cost Plan.

- *Colleges and Universities Only* – Provide the percentage rate (maximum of 5%) approved by the DOE.

(4) FTE - (Only applicable for items classified as *Salaries* and *Other Personal Services* (Refer to (2) Object Code.) Enter the total number of positions (as FTEs*) that will be supported with these funds. *Full-Time Equivalent (FTE based on the standard workweek for the type of position) is the number of positions to be funded. Determine FTE by dividing the standard number of weekly hours (e.g., 35 hours) for the type of position (e.g., teacher aide) into the actual work hours to be funded by the project.

(5) Amount - Enter the total amount budgeted for each line item.

(6) Percent Allocated – For each line item, enter the appropriate percentage that is allocated or applicable to this project (see pages 3-4 for examples).

(6) PERCENT ALLOCATED If the cost entered in (5) for each service/commodity listed in (3) is not the total cost of this service/commodity, enter the appropriate percentage in (6) that is applicable to this project. If the cost entered in (5) for each service/commodity listed in (3) is the total cost for this service/commodity and is applicable to this project, enter 100% in (6).

Example A

(1)	(2)	(3)	(4)	(5)	(6)	EXPLANATION
FUNCTION	OBJECT	ACCOUNT TITLE & NARRATIVE	FTE POSITION	AMOUNT	% ALLOCATED to this PROJECT	
6200	110	Salaries - Provides for supervision of all project activities; specific areas for supervision/ coordination are listed by position below. Supervisor /Grant Administration/National Instructional Materials Accessibility Standards Coordinator /Professional Development and Training	2	\$120,000	100%	The total cost for the two positions listed in (5), a Supervisor and a Coordinator (2.0 FTE), are charged to this project. Therefore, the percent of the cost for Salaries and Benefits allocated to this project is 100%.
6200	210	Retirement (9.85%)		\$11,820	100%	
6200	220	FICA (6.20%)		\$7,440	100%	
6200	223	Medicare (1.45%)		\$1,740	100%	
6200	231 / 232	Health / Life (11.90%)		\$14,280	100%	
6200	240	Worker's Comp. (1.26%)		\$1,512	100%	
TOTAL				\$156,792		

Example B

(1)	(2)	(3)	(4)	(5)	(6)	EXPLANATION
FUNCTION	OBJECT	ACCOUNT TITLE & NARRATIVE	FTE POSITION	AMOUNT	% ALLOCATED to this PROJECT	
7900	430	Utilities - Electricity, water and sewage charges for the facility where this project is housed.		\$10,000	50%	The total cost for utilities for the facility where this project is housed is \$20,000 annually. However, this project only occupies 50% of the facility. Therefore, the percent of the cost for Utilities allocated to this project is 50%.
TOTAL				\$10,000		

(6) PERCENT ALLOCATED (continued)

Example C

(1)	(2)	(3)	(4)	(5)	(6)	EXPLANATION
FUNCTION	OBJECT	ACCOUNT TITLE & NARRATIVE	FTE POSITION	AMOUNT	% ALLOCATED to this PROJECT	
6300	331	In County Travel - Travel cost for staff to and from agency headquarters to designated program sites for the purpose of performing activities related to the administration and supervision of project.		\$1,980	100%	The mileage estimated for travel for district staff to and from the county office to the program sites was estimated to be 4,500 miles annually @ \$0.44/mile. Therefore, the percent of the cost for In County Travel allocated to this project is 100%.
TOTAL				\$1,980		

Example D

(1)	(2)	(3)	(4)	(5)	(6)	EXPLANATION
FUNCTION	OBJECT	ACCOUNT TITLE & NARRATIVE	FTE POSITION	AMOUNT	% ALLOCATED to this PROJECT	
NA for Private Entities	350	Purchased Services - Contract with ABC Company for the repair/ maintenance of the office equipment; one laser printer and copier.		\$1,250	25%	The total cost for the maintenance contract for this equipment is \$5,000. It has been determined that this project only uses this equipment 25% of the time. Therefore, the percent of the cost for Purchased Services allocated to this project is 25%.
TOTAL				\$1,250		