

= Required Field

Local Agency Information		
Funding Source:	ARP - Learning Loss	
Report Prepared By:	Erin Ostrander	
Agency Name:	Genesee Valley Central School District	
Mailing Address:	1 Jaguar Drive	
	Street	
	Belmont	NY
	City	State
	14813	
	Zip Code	
Telephone # of Report Preparer:	(585) 268-7902	County: Allegany
E-mail Address:	eostrander@genvalley.org	
Project Funding Dates:	<u>3/13/2020</u>	<u>9/30/2024</u>
	Start	End

- INSTRUCTIONS**
- Submit the original FS-10 Budget and the required number of copies along with the completed application directly to the appropriate State Education Department office as indicated in the application instructions for the grant program for which you are applying. DO NOT submit this form to Grants Finance.
 - The Chief Administrator's Certification on the Budget Summary worksheet must be signed by the agency's Chief Administrative Officer or properly authorized designee.
 - An approved copy of the FS-10 Budget will be returned to the contact person noted above. A window envelope will be used; please make sure that the contact information is accurate and confined to the address field without altering the formatting.
 - For information on budgeting refer to the Fiscal Guidelines for Federal and State Aided Grants at <http://www.oms.nysed.gov/cafe/guidance/>.

SALARIES FOR PROFESSIONAL STAFF			
Subtotal - Code 15			\$65,000
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
4 Summer Academic Clinic Teachers (6 Weeks)	20 Hours Per Week	4 Teachers x 20 Hours x 6 Weeks x \$41.67/hour x 3 Years	\$60,000
Summer Athletic Camps	5-8 Coaches	8 Coaches x \$30/Hour x 10.42 Hours/Summer x 2 Years	\$5,000

SALARIES FOR SUPPORT STAFF			
Subtotal - Code 16			\$18,595
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Summer Program Facilitators	5 Employees	5 x \$743.80/Week x 5 Weeks	\$18,595

Employee Benefits		
Subtotal - Code 80	\$15,907	
Benefit	Proposed Expenditure	
Social Security .0765	\$6,395	
Retirement	New York State Teachers .098	\$6,500
	New York State Employees .162	\$3,012
	Other - Pension	
Health Insurance Family \$20,000 Single \$8,000		
Worker's Compensation .006		
Unemployment Insurance		
Other(Identify)		

Finance: Logged _____

Approved _____

MIR _____