

Local Agency Information

Funding Source: ARP-ESSER Part 2

Report Prepared By: John McKeown

Agency Name: Remsen Central School District

Mailing Address: PO Box 406

Street		
Remsen	NY	13438
City	State	Zip Code

Telephone #: 315-205-4300 ext. 4222 County: Oneida

E-Mail Address: jmcKeown@remsenncsd.org

Project Operation Dates: 03 / 13 / 2020 09 / 30 / 2024
Start End

INSTRUCTIONS

- ❖ **Submit the original 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 the Grants Finance.**
- ❖ Enter whole dollar amounts only.
- ❖ Prior approval by means of an approved budget (FS-10) or budget amendment (FS-10-A) is required for:
 - Personnel positions, number and type
 - Equipment items having a unit value of \$5,000 or more, number and type
 - Minor remodeling
 - Any increase in a budget subtotal (professional salaries, purchased services, travel, etc.) by more than 10 percent or \$1,000, whichever is greater
 - Any increase in the total budget amount.
- ❖ Certification on page 8 must be signed by Chief Administrative Officer or properly authorized designee.
- ❖ High quality computer generated reproductions of this form may be used.
- ❖ For further information on budgeting, please refer to the Fiscal Guidelines for Federal and State Aided Grants which may be accessed at www.oms.nysed.gov/cafe/ or call Grants Finance at (518) 474-4815.

SALARIES FOR PROFESSIONAL STAFF: Code 15

Include only staff that are employees of the agency. Do not include consultants or per diem staff. Do not include central administrative staff that are considered to be indirect costs, e.g., business office staff. One full-time equivalent (FTE) equals one person working an entire week each week of the project. Express partial FTE's in decimals, e.g., a teacher working one day per week equals .2 FTE.

Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Math/Reading Teacher	1	60,000	60,000
Math/Reading Teacher	1	62,000	62,000
Teachers (10 positions at .254766 FTE x 60,000)	2.54766	60,000	152,860
UPK TA	1	28,243	28,243
Subtotal - Code 15			303,103

SALARIES FOR SUPPORT STAFF: Code 16

Include salaries for teacher aides, secretarial and clerical assistance, and for personnel in pupil transportation and building operation and maintenance. Do not include central administrative staff that are considered to be indirect costs, e.g., account clerks.

Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Teacher Aide (6 positions at .4532 FTE x \$20,000)	2.7192	20,000	54,384
Bus Drivers	4	20,286	81,144
Subtotal - Code 16			135,528

PURCHASED SERVICES: Code 40

Include consultants (indicate per diem rate), rentals, tuition, and other contractual services. Copies of contracts may be requested by the State Education Department. Purchased Services from a BOCES, if other than applicant agency, should be budgeted under Purchased Services with BOCES, Code 49.

Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Professional Dev	Super Kids	10 sessions @ \$626.30	6,263
Student Speakers	Sweathearts and Heros / Tom Verrano (Motivational Speakers/Bullying/Personal Health and Wellness)	10 sessions @ \$1,500	15,000
Subtotal - Code 40			21,263

SUPPLIES AND MATERIALS: Code 45

Beginning with the 2005-06 year include computer software, library books and equipment items under \$5,000 per unit.

For earlier years include computer software, library books and equipment items under 1,000 per unit.

Description of Item	Quantity	Unit Cost	Proposed Expenditure
Disinfecting Hand Sanitizer (cases)	260	76.92	20,000
Student Furniture (Desk/chair units)	682	550	375,100
Promethean Boards (includes some accessory items)	45	3,418.11	153,815
Teacher Computers	40	1,500	60,000
Bus Radio System	10	3,990	39,900
Subtotal - Code 45			648,815

TRAVEL EXPENSES: Code 46

Include pupil transportation, conference costs and travel of staff between instructional sites. Specify agency approved mileage rate for travel by personal car or school-owned vehicle.

Position of Traveler	Destination and Purpose	Calculation of Cost	Proposed Expenditures
Subtotal - Code 46			

EMPLOYEE BENEFITS: Code 80

Rates used for project personnel must be the same as those used for other agency personnel.

Benefit		Proposed Expenditure
Social Security		
Retirement	New York State Teachers	
	New York State Employees	
	Other	
Health Insurance		
Worker's Compensation		
Unemployment Insurance		
Other (Identify)		
Subtotal – Code 80		

INDIRECT COST: Code 90

A. Modified Direct Cost Base – Sum of all preceding subtotals (codes 15, 16, 40, 45, 46, and 80 and excludes the portion of each subcontract exceeding \$25,000 and any flow through funds)	\$	(A)
B. Approved Restricted Indirect Cost Rate	%	(B)
C. (A) x (B) = Total Indirect Cost	\$	(C)

Subtotal – Code 90

PURCHASED SERVICES WITH BOCES: Code 49

Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure
Professional Dev	OHM BOCES	10@\$626.40	6,264
Subtotal – Code 49			6,264

MINOR REMODELING: Code 30

Allowable costs include salaries, associated employee benefits, purchased services, and supplies and materials related to alterations to existing sites.

Description of Work To be Performed	Calculation of Cost	Proposed Expenditure
Subtotal – Code 30		

EQUIPMENT: Code 20

Beginning with the 2005-06 year all equipment to be purchased in support of this project with a unit cost of \$5,000 or more should be itemized in this category. Equipment items under \$5,000 should be budgeted under Supplies and Materials, Code 45. Repairs of equipment should be budgeted under Purchased Services, Code 40.

For earlier years the threshold for reporting equipment purchases was \$1,000 or more. Equipment items under \$1,000 should be budgeted under Supplies and Materials.

Description of Item	Quantity	Unit Cost	Proposed Expenditure
		Subtotal – Code 20	

HELPFUL REMINDERS

- ❖ Check for the required number of copies to be submitted, including the number of original signature copies. The number of copies may vary from program to program. If unsure, contact the State Education Department office responsible for the program for which you are applying.
- ❖ An approved copy of the FS-10 will be returned to the contact person at the address completed on page 1. A window envelope will be used for the return mailing; please make sure that the contact information is accurate, legible, and confined to the address field.
- ❖ Be sure to check your math and carry all subtotals forward to the Summary on Page 8. Simple mathematical errors often require Grants Finance to contact both the local agency and other State Education Department offices, resulting in unnecessary delays in program approval. And remember, use whole dollars only.
- ❖ School districts and BOCES should use the restricted indirect cost rate that has been approved for the school year in which the grant will operate. Most other agencies are subject to a fixed maximum rate depending on the grant program and type of agency. Contact Grants Finance at (518) 474-4815 if you have any questions regarding indirect costs.
- ❖ The modified direct cost used in the calculation of indirect cost must exclude equipment, minor remodeling, the portion of each subcontract exceeding \$25,000 and any flow through funds.
- ❖ Be sure to complete the Agency Code on Page 8 as well as the Project #, if pre-assigned.
- ❖ For Special Legislative projects and Grant Contracts, please enter the Contract #.
- ❖ For ease of data entry at the State Education Department, please make sure that Page 8 faces out.
- ❖ Submit forms to the State Education Department as follows:

Application, FS-10, FS-10-A – Program Office

FS-25, FS-10-F for **Special Legislative Projects** –
Special Legislative Projects Coordinating Team
New York State Education Department
Room 132 Education Building
Albany, New York 12234

FS-25, FS-10-F for other projects –
Grants Finance
New York State Education Department
Room 510W Education Building
Albany, New York 12234

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	303,103
Support Staff Salaries	16	135,528
Purchased Services	40	21,263
Supplies and Materials	45	648,815
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	6,264
Minor Remodeling	30	
Equipment	20	
Grand Total		1,114,973

Agency Code:

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Project #: (If pre-assigned)

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Contract #:

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Federal Employer ID #: (New non-municipal agencies only)

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Agency Name: Remsen Central School

FOR DEPARTMENT USE ONLY

Funding Dates: 03 / 13 / 2020 From 09 / 30 / 2024 To

Program Approval: _____ Date: _____

	<u>Fiscal Year</u>	<u>Amount Budgeted</u>	<u>First Payment</u>			
_____	_____	_____	_____			
_____	_____	_____	_____			
_____	_____	_____	_____			
_____	_____	_____	_____			
_____	_____	_____	_____			
	_____ Voucher #	_____ First Payment				
Finance:	<table border="1" style="width: 80px; height: 40px;"><tr><td></td></tr></table> Log		<table border="1" style="width: 80px; height: 40px;"><tr><td></td></tr></table> Approved		<table border="1" style="width: 80px; height: 40px;"><tr><td></td></tr></table> MIR	

CHIEF ADMINISTRATOR'S CERTIFICATION

By signing this report, I certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements, and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal (or State) award. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil, or administrative penalties for fraud, false statements, false claims, or otherwise. (U.S. Code Title 18, Section 1001 and Title 31, Sections 3729-3730 and 3801-3812).

08 / 23 / 2021 _____
Date Signature

Timothy Jenny - Superintendent
Name and Title of Chief Administrative Officer