# The University of the State of New York THE STATE EDUCATION DEPARTMENT

## PROPOSED BUDGET FOR A FEDERAL OR STATE PROJECT FS-10 (03/15)

	= Requir	ed Field
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	Local Agend	cy Informati	on	
Funding Source:	ARP ESSER Part 2			
Report Prepared By:	James Brennan			
Agency Name:	West Irondequoit C	entral Schoo	ol District	
Mailing Address:	321 List Avenue			
			eet	
	Rochester City	NY State	14617 Zip Code	
Telephone # of Report Preparer: 585-336-	2993	County:	Monroe	
E-mail Address: james brennan@westiron.monroe.edu				
Project Funding Dates: 3/13/2020 9/30/2024				
	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	\$988,534	
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary	
Teacher for Remote Learners (ACTIVITY #20)	3.0	\$45,000	\$135,000	
Teachers for K-12 Intensive Before- and After-School Tutoring Program (Learning Loss - ACTIVITY #16)	Stipends	\$37.50/hour x 8,800 hours	\$330,000	
3 Summer School Counselors - Dake Junior High School (ACTIVITY #7)	Stipends	2 days at summer curriculum rate of \$281 per day	\$1,686	
15 Staff to Develop Social Emotional Leaarning Re-Entry Plan (PD and Training) (ACTIVITY #14)	Stipends	15 staff at summer curriculum rate of \$281 per day	\$4,215	
2 Teachers to address Learning Loss for two years (Learning Loss - ACTIVITY #16)	2.00	\$45,000 per teacher per year for two years	\$180,000	
LETRS Curriculum Work - Summer or After School Work Days for 48 general education teachers and 10 special education teachers (Learning Loss - ACTIVITY #16)	Stipends	Summer Curriculum rate for 10 days @ \$2800 per person	\$162,400	
K-12 Literacy Coach (Learning Loss - ACTIVITY #16)	3.00	\$58,411	\$175,233	

SALARIES FOR SUPPORT STAFF				
	Subtotal - Code 16			
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary	
			American America Company	

PURCHASED SERVICES			
		Subtotal - Code 40	\$1,460,500
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
HVAC upgrades (ACTIVITY #18)	Crosby Brownlie	2 x 120 ton RTU at \$450,000 each. 1 x 70 ton RTU at \$350,000. 10% contingency on subtotal = \$125,000	\$1,375,000 _
COVID 19 Testing (ACTIVITY #19). The Medical Techs contracted from Workfit will be engages in mandated weekly antigen testing of all staff members who have not provided proof of vaccination.	Workfit	2 MedTechs x 10 hours/week @ \$40/hour x 20 weeks.	\$16,000
FEV Tutor (ACTIVITY #12)	FEV Electronic Tutoring Service	\$23/hour x 500 hour/year for 3 years	\$34,500
Instructional Video Coaching (Learning Loss - ACTIVITY #16) Three 1- hour afterschool sessions to utilize video coaching to improve instructional feedback and alignment.	Jim Knight	\$2,000/session x 3 sessions	\$6,000
Instructional Video Coaching (Learning Loss - ACTIVITY #16) Six, 2-hour sessions to build an undertanding of instructional coaching, benefits of video coaching and develop alignment of instructional coaching practices.	Jim Knight	\$2,500/session x 6 sessions	\$15,000

Instructional Video Coaching (Learning Loss - ACTIVITY #16) Provide ongoing support to teachers (8 in total) as needed to implement video coaching projects and receive feedback	Jim Knight	\$50/hour x 10 hours x 8 teachers	\$4,000
Turnkey Training for K-12 Director of Humanities (Learning Loss - ACTIVITY #16)	LETRS	\$10,000.00	\$10,000

SUPPLIES AND MATERIALS			
Subtotal - Code 45 \$50			\$50,000
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Materials for STEAM Education in Grades 4-12 (ACTIVITY #20):			
Maker Space Cart for STEAM block	24.00	\$800.00	\$19,200
Electromagnetic Arm for STEAM block	24.00	\$60.00	\$1,440
Contraption Set Up for STEAM block	24.00	\$190.00	\$4,560
Ping Pong Projectile Launcher for STEAM block	24.00	\$9.00	\$216
Wiggle Bots for STEAM block	24.00	\$90.00	\$2,160
Makerspace Kit for STEAM block	24.00	\$165.00	\$3,960
STEAM Student Set Classroom Bundles (including pipe cleaners, straws, toothpicks, etc. to support STEAM based learning activities)	6.00	\$3,000.00	\$18,000
Additional STEAM Education Materials (pipe cleaners, straws, toothpicks, etc. to support STEAM based learning activities)	16	\$29.00	\$464

	TRAVEL EXPENSES	3	
		Subtotal - Code 46	
sition of Traveler	Destination and Purpose Calculation of Expendent		

	Employee Benefits	
	Subtotal - Code 80	\$218,146
Benefit		Proposed Expenditure
Social Security	7.65%	\$37,503
	New York State Teachers	\$39,219
Retirement	New York State Employees	
	Other - Pension	•
Health Insurance		\$134,807
Worker's Compensation		\$6,617
Unemployment Insurance		
Other(Identify)		
Teacher for Remote Learners (AC1	TIVITY #20) \$67,950	
2 Teachers for Learning Loss ((Lea	rning Loss - ACTIVITY #16 ) \$90,600	
K-12 Literacy Coach ((Learning Lo	ss - ACTIVITY #16) \$74,789	

	INDIRECT COST	
	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) **Manual Entry	
B.	Approved Restricted Indirect Cost Rate	
C.	Subtotal - Code 90	

For your information, maximum direct cost base =

\$2,717,180.00

To calculate Modified Direct Cost Base, reduce maximum direct cost base by the portion of each subcontract exceeding \$25,000 and any flow through funds.

PUR	RCHASED SERVICES V	VITH BOCES	
		Subtotal - Code 49	\$217,352
Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure
TASC Tuition (Learning Loss - ACTIVITY #16)	BOCES 1	8 students x \$14,119	\$112,952
LETRS Training (Learning Loss - ACTIVITY #16)	BOCES 1	48 general education teachers x \$1800/person; 10 special education teachers X \$1800/person	

MINOR REMO	DDELING		
	Subtotal - Code 30		
Description of Work to be Performed	Calculation of Cost	Proposed Expenditure	

	EQUIPMENT		
		Subtotal - Code 20	
Description of Item	Quantity	Unit Cost	Proposed Expenditure

### **BUDGET SUMMARY**

SUBTOTAL	CODE	PROJECT COSTS			
Professional Salaries	15	\$988,534	Agency Code:	260803060000	
Support Staff Salaries	16				
Purchased Services	40	\$1,460,500	Project #:	5880-21-1350	
Supplies and Materials	45	\$50,000			
Travel Expenses	46		Contract #:		
Employee Benefits	80	\$218,146			
Indirect Cost	90				
BOCES Services	49	\$217,352	Agency Name:	West Irondequoit Central School District	
Minor Remodeling	30				
Equipment	20				
Grand Total \$2,934,532		FOR	FOR DEPARTMENT USE ONLY		

## 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).

Date Signature

Dr. Aaron Johnson, Superintendent of Schools

Name and Title of Chief Administrative Officer

FOR DEPARTMENT USE ONLY								
Funding Dates:	From	То						
Program Approval:		_Date:						
Fiscal Year	First Payment		Line#					
	-							
		-	<del></del> -					
Voucher#		First Payr	nent					

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Finance: Logged \_\_\_\_\_ Approved \_\_\_\_\_ MIR \_\_\_\_\_