

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

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

= Required Field

Local Agency Information			
Funding Source:	ESSER (American Rescue Plan) <i>-AIRP</i>		
Report Prepared By:	Francis Rielly		
Agency Name:	New Lebanon Central School District		
Mailing Address:	14665 Route 22		
	Street		
	New Lebanon	NY	12125
	City	State	Zip Code
Telephone # of Report Preparer:	5187941301	County: columbia	
E-mail Address:	frielly@newlebanoncsd.org		
Project Funding Dates:	3/13/2020 Start	9/30/2024 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			\$441,479
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
School Psychologist 3 years	3.00	\$52,082	\$156,246
Elementary RTI teacher 3 years	3.00	\$26,513	\$79,539
Inclusivity & Equity Coordinator 3 years	stipend	\$1,000	\$3,000
7-12 English RTI teacher 3 years	3.00	\$26,928	\$80,784
Covid-19 Testing Coordinator(2021-2023)		\$2,500	\$5,000
Annual Building Sub Elementary (180day)3 years	3.00	\$19,485	\$58,455
Annual Building Sub 7-12 3 yrs.	3.00	\$19,485	\$58,455

✓
 ✓
 ✓
 * RECLASS?
 ✓
 ✓

SALARIES FOR SUPPORT STAFF			
Subtotal - Code 16			\$69,890
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
High School credit rescue 2023-24		\$3,500.00	\$3,500
High school Creidt rescue 23-24		\$3,500.00	\$3,500
Elementary intervention 23-24		\$3,500.00	\$3,500
Elementary intervention 23-24		\$3,500.00	\$3,500
3 Summer school teachers for 3 years \$6450 6 week program 4 hours per day		\$18,630.00	\$55,890

PURCHASED SERVICES			
Subtotal - Code 40			\$30,000
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Learning Loss Professional Development	CASDA	\$30,000.00	\$30,000

SUPPLIES AND MATERIALS			
Subtotal - Code 45			\$66,140
Description of Item	Quantity	Unit Cost	Proposed Expenditure
I-Ready Software	3 year subscription	\$17,000.00	\$51,000
Learning loss Materials(Boom Learning,Emath Instruction licenses,Tinspire,Positive Action Kits)			\$15,140

J. Cupp benefits

Employee Benefits	
Subtotal - Code 80	
\$12,018	
Benefit	Proposed Expenditure
Social Security	\$4,000
Retirement	New York State Teachers
	New York State Employees
	Other - Pension
Health Insurance	
Worker's Compensation	
Unemployment Insurance	
Other(Identify)	

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$441,479
Support Staff Salaries	16	\$69,890
Purchased Services	40	\$30,000
Supplies and Materials	45	\$66,140
Travel Expenses	46	
Employee Benefits	80	\$12,018
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$619,527

Agency Code:

Project #:

Contract #:

Agency Name:

FOR DEPARTMENT USE ONLY

Funding Dates: _____ From _____ To _____

Program Approval: _____ Date: _____

<u>Fiscal Year</u>	<u>First Payment</u>	<u>Line #</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Voucher # _____ First Payment _____

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).

12/21/21 
 Date Signature

Andrew Kurt Superintendent
 Name and Title of Chief Administrative Officer