

# 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 | d Field       | 2258    | 383)       |
|------------------------------------|----------|--------------------|------------|------------|---------------|---------|------------|
|                                    |          | Local Agenc        | y Informat | ion        |               |         |            |
| Funding Sc                         | ource:   | STATE RESERVE-AI   | TER SCH    | OOL        |               |         |            |
| Report Prepare                     | ed By:   | RICHARD LINDEN     |            |            |               | Receiv  | /ed        |
| Agency N                           | Name:    | GOSHEN C.S.D.      |            |            |               | DEC 1 7 | 2021       |
| Mailing Add                        | dress:   | 227 MAIN STREET    |            |            | Office        | of Acco | ountabilit |
|                                    |          |                    | St         | reet       | -             |         |            |
|                                    |          | GOSHEN             | NY         |            | 10924         |         |            |
|                                    | L        | City               | State      |            | Zip Code      |         |            |
| Telephone # of Report Preparer: 84 | 5-615-6  | 6744               | County:    | ORANGE     |               |         |            |
| E-mail Address: <u>ric</u>         | hard.lin | den@gcsny.org      |            |            |               |         |            |
| Project Funding D                  | Dates:   | 3/13/2020<br>Start |            |            | 0/2024<br>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 PROFESSION          | ONAL STAFF                |                |
|--------------------------------------|-------------------------|---------------------------|----------------|
|                                      |                         | Subtotal - Code 15        | \$101,106      |
| Specific Position Title              | Full-Time<br>Equivalent | Annualized Rate of<br>Pay | Project Salary |
| After School Program                 | 1.20                    | \$85,000                  | \$101,106      |
| \$56.17/ hour x 9 hours/ wk x 40 wks |                         |                           |                |
| x 5 teachers                         |                         |                           |                |

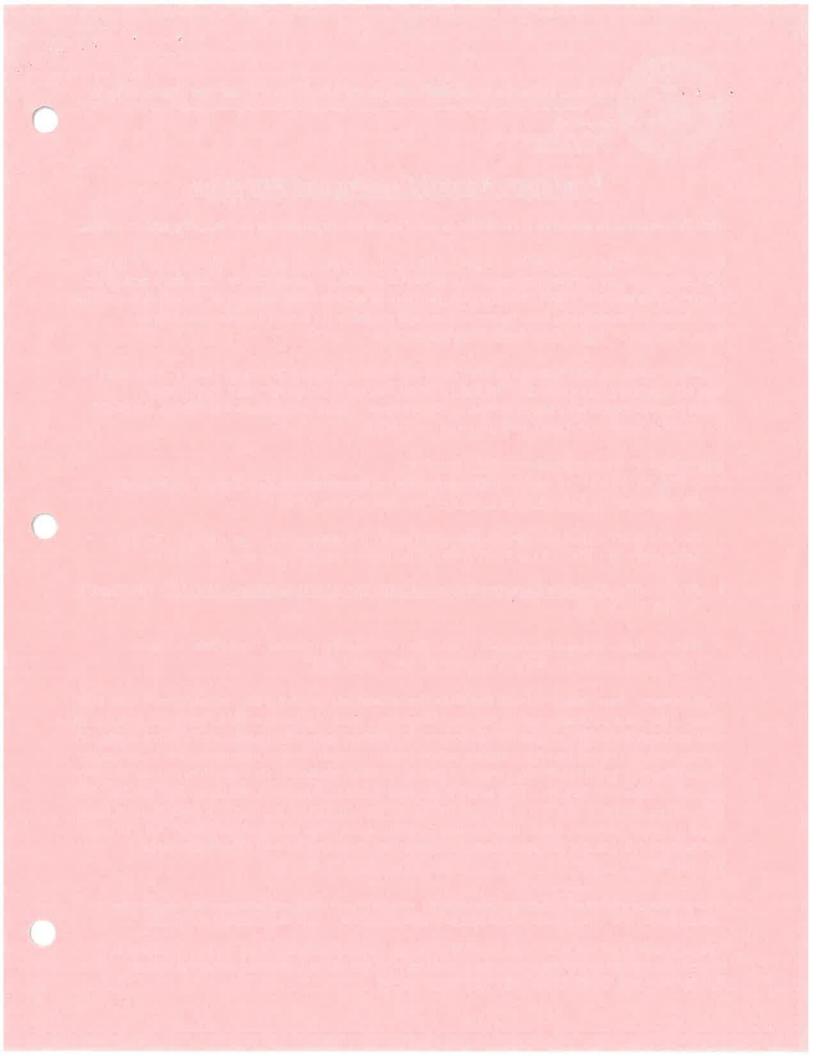
|                        | Subtotal - Code 80       | \$8,545                 |
|------------------------|--------------------------|-------------------------|
|                        | Benefit                  | Proposed<br>Expenditure |
| Social Security        |                          | \$4,300                 |
|                        | New York State Teachers  | \$4,245                 |
| Retirement             | New York State Employees |                         |
|                        | Other - Pension          |                         |
| Health Insurance       |                          |                         |
| Worker's Compensation  |                          |                         |
| Unemployment Insurance |                          |                         |
| Other(Identify)        |                          |                         |
|                        |                          |                         |
|                        |                          |                         |
|                        |                          |                         |
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|                        |                          |                         |

|    | CF121            |        | GR/        | ANTS FINANCE      |          |           |
|----|------------------|--------|------------|-------------------|----------|-----------|
|    | ENTRY DATE 02/24 | 4/22   | PROJECT    | STATUS REPORT     | RUN DATE | 02/24/22  |
|    |                  | 12245  |            | SLR COMPREHENSIVE |          |           |
|    | SED CODE 44060   |        |            | HEN CSD           | 1 4      | y         |
| `  | NYC DOC #        |        |            |                   |          |           |
|    |                  |        | BUDGET DET | TAIL INFORMATION  |          |           |
|    | PROF SALARY      | 15     | 101,106.00 | BEGIN DATE        | 03/13/20 |           |
|    | NON PROF SALARY  | 16     | 0.00       | END DATE          | 09/30/24 |           |
|    | PURCH SERVICES   | 40     | 0.00       | AMENDMENT #       |          |           |
|    | SUPP & MATERIAL  | 45     |            | CONTRACT #        |          |           |
|    | TRAVEL EXPENSE   | 46     | 0.00       | STOP DATE         |          |           |
|    | EMP BENEFITS     | 80     |            |                   |          |           |
|    | INDIRECT COST    | 90     | 0.00       | IND COST RATE     | 11.6     |           |
|    | BOCES SERVICES   |        | 0.00       | INT ELIG          | N        |           |
|    | REMODEL ING      | 30     | 0.00       |                   |          |           |
|    | EQU I PMENT      | 20     | 0.00       |                   |          |           |
|    |                  |        |            |                   |          |           |
|    |                  |        | BUDGET SUN | MARY INFORMATION  |          |           |
|    | FUNDYEAR         | BUDGET | SPLITS     | PAID TO DATE      | OUTSTAN  | IDING ENC |
|    | 588321           | 109,   | ,651.00    | 21,930.00         | 87       | 7,721.00  |
|    | 588320           |        | 0.00       | 0.00              |          | 0.00      |
|    | 588319           |        | 0.00       | 0.00              |          | 0.00      |
|    |                  |        | 0.00       | 0.00              |          | 0.00      |
|    |                  |        | 0.00       | 0.00              |          | 0.00      |
|    | TOTAL            | 109,   | ,651.00    | 21,930.00         | 87       | 7,721.00  |
|    |                  |        |            |                   |          |           |
|    |                  |        |            | CONTRACT DATES    |          |           |
|    | RECE             |        | ENTERED    |                   | APPROVED |           |
|    | BUDGET $02/11$   | L/22   | 02/22/22   | CONTRACT          |          |           |
| Š, | INTERIM          |        |            |                   |          |           |
|    | FINAL            |        |            |                   |          |           |
|    |                  |        |            |                   |          |           |

CASH DETAIL

ENTRY DOC # TRANS ENC RPT LINE AMOUNT FUNDYR MIR PD DT STAT 022422 564209F INIT 000 02/22 01 21,930.00 588321 022422 ENT

THIS BUDGET HAS BEEN PROCESSED BY THE NEW YORK STATE EDUCATION DEPARTMENT. THIS SUMMARY REPLACES THE SIGNED COPY.



## **BUDGET NARRATIVE**



| LEA: Goshen Central School District | FOR TITLE: ARP ESSER Reserve – Comprehensive After School Program |
|-------------------------------------|---|
| BEDSCODE: 440601040000              |   |

# \*\* MUST BE SUBMITTED WITH EACH BUDGET IN THE CONSOLIDATED APPLICATION

If using Transferability, please indicate on the Budget Narrative and FS-10 the amount of funds to be included under transferability in the budget categories where funds will be used. Example: In the Title IIA budget under Code 15 – Transferability - Title I Reading Teacher – FTE.35 - \$15,000.

| CODE/                                   | EXPLANATION OF EXPENDITURES IN THIS CATEGORY   |
|---|--|
| BUDGET CATEGORY                         | (as it relates to the program narrative for this title)  |
| <b>Code 15</b><br>Professional Salaries | \$56.17/hr x 9 hours/wk x 40 wks x 5 teachers<br>\$101,106   |
|   | This proposed expenditure is for the potential hiring of teachers to implement evidence-based activities and interventions that respond to students' social, emotional, mental health, and academic needs and address the disproportionate impact of COVID-19 on students from low-income families, students of color, English learners, children with disabilities, students experiencing homelessness, children and youth in foster care, and migratory students during the after school enrichment program. |
| Code 16 Support Staff Salaries          |  |
| Code 40<br>Purchased Services           |  |
| Code 45 Supplies and Materials          |  |

| CODE/<br>BUDGET CATEGORY   | EXPLANATION OF EXPENDITURES IN THIS CATEGORY (as it relates to the program narrative for this title) |
|----------------------------|--|
| Code 46<br>Travel Expenses |  |
| (6)                        |  |
|                            |  |

| CODE/<br>BUDGET CATEGORY            | EXPLANATION OF EXPENDITURES IN THIS CATEGORY (as it relates to the program narrative for this title)   |
|-------------------------------------|--|
| <b>Code 80</b><br>Employee Benefits | Social Security \$4,300 TRS \$4,245  This proposed expenditure is for the potential cost of employee benefits resulting from the hiring of teachers to implement evidence-based activities and interventions that respond to students' social, emotional, mental health, and academic needs and address the disproportionate impact of COVID-19 on students from low-income families, students of color, English learners, children with disabilities, students experiencing homelessness, children and youth in foster care, and migratory students during the after school enrichment program. |
| Code 90<br>Indirect Cost            |  |
| <b>Code 49</b><br>BOCES Services    |  |
| <b>Code 30</b><br>Minor Remodeling  |  |
| Code 20<br>Equipment                |  |