



Grants Finance, Room 510W, Education Building, Albany, NY 12234  
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<b>Grant Award Recipient</b>  SUPERINTENDENT WHITEHALL CSD 87 BUCKLEY RD WHITEHALL, NY 12887-3633	<b>Date</b> 12/19/23  <b>Project Number</b> 0147243540  <b>Agency Code</b> 641701060000
<b>Funding Source</b> TITLE IIA, TEACH/PRIN TRNG/RECRUITMT	<b>DUNS Number</b> 100057793 UEI- MNWFLNF93QM5
<b>CFDA Index Number</b> 84367A	<b>Law</b> NCLB-2001-TITLE II, PART A
<b>Federal Award Identification Number (FAIN)</b> S367A230031  THE PROJECT MAY BE PAID FROM OTHER AWARDS WITH DIFFERENT FAINS DEPENDING ON PERIOD OF AVAILABILITY OF FEDERAL FUNDS AND THE APPROVED PROJECT PERIOD.	<b>Regulations</b> 2 CFR 200, EDGAR AS APPLIC  <b>Commissioner's Regulations</b> NA
<b>Federal Award Date</b> 07/01/23  THIS FEDERAL AWARD IS NOT FOR RESEARCH AND DEVELOPMENT.	<b>Maximum Indirect Cost Rate</b> SUB-RECIPIENT HAS AN ANNUAL NEGOTIATED INDIRECT COST RATE W/NYSED (THE PASS THROUGH ENTITY)
<b>Federal Awarding Agency</b> US DEPT OF ED.	<b>Funding Dates/Period of Performance</b> 09/01/23-08/31/24
<b>Approved Budget Total*</b> \$30,276  *IF THE SUB-AWARD IS \$30,000 OR MORE, IT IS SUBJECT TO REPORTING REQUIREMENTS UNDER FEDERAL FUNDING AND TRANSPARENCY ACT (FFATA) OF 2006.	<b>First Payment</b> \$6,055  <b>Final Report (FS-10-F Long Form) Due</b> 11/29/24
<b>SED Fiscal Contact</b>  MARIA DOS SANTOS (518) 474-4815	<b>SED Program Contact</b>  KARI BENN EB 320 (518) 473-0295

**It is the sub-recipient's responsibility to conduct activities in accordance with applicable statutes, regulations, policies, terms, conditions and assurances. All grants are subject to further review, monitoring and audit to ensure compliance. The Department has the right to recoup funds if the approved activities are not performed and/or the funds are expended inappropriately.**

**In accordance with Section 41 of the State Finance Law, the State shall have no liability under this grant to the grantee or to anyone else beyond funds appropriated and available for this grant. The approved budget (FS-10) will be sent under separate cover. Please retain this document with your files.**

= Required Field

Local Agency Information		
<b>Funding Source:</b>	Title IIA Teach/Prin Trng	
<b>Report Prepared By:</b>	Lori Langevin	
<b>Agency Name:</b>	Whitehall Central School	
<b>Mailing Address:</b>	PO Box 29	
	Street	
	Whitehall	NY
	City	State
	12887	Zip Code
<b>Telephone # of Report Preparer:</b>	518-499-0346 ext. 2023	<b>County:</b> Washington
<b>E-mail Address:</b>	<a href="mailto:llangevin@railroaders.net">llangevin@railroaders.net</a>	
<b>Project Funding Dates:</b>	9/1/2023 Start	8/31/2024 End

INSTRUCTIONS
<ul style="list-style-type: none"> <li>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.</li> <li>The Chief Administrator's Certification on the Budget Summary worksheet must be signed by the agency's Chief Administrative Officer or properly authorized designee.</li> <li>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.</li> <li>For information on budgeting refer to the Fiscal Guidelines for Federal and State Aided Grants at <a href="http://www.oms.nysed.gov/cafe/guidance/">http://www.oms.nysed.gov/cafe/guidance/</a>.</li> </ul>

SALARIES FOR PROFESSIONAL STAFF			
Subtotal - Code 15			\$17,776
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
District Teachers- Per diem for all teachers attending professional development and curriculum trainings throughout the year	93 occurrences	150 per occurrence	\$14,026
Substitutues for teachers attending PD	30.00	\$125	\$3,750

PURCHASED SERVICES			
Subtotal - Code 40			\$12,500
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
PD for integration and support of rigorous academic content	WSWHE BOCES, CASDA, BER, iReady, Ready Math , Misc	104@\$120	\$12,500

**BUDGET SUMMARY**

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$17,776
Support Staff Salaries	16	
Purchased Services	40	\$12,500
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$30,276

Agency Code:	641701060000
Project #:	0147-24-3540
Contract #:	
Agency Name:	Whitehall Central School

<u>FOR DEPARTMENT USE ONLY</u>		
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).*

6/27/23

[Signature]

Date: \_\_\_\_\_ Signature: \_\_\_\_\_

[Signature]

Name and Title of Chief Administrative Officer

Finance: Logged \_\_\_\_\_

Approved \_\_\_\_\_

MIR \_\_\_\_\_