



SAMPLE BUDGET APPLICATION
 DEPARTMENT OF PUBLIC INSTRUCTION
 EDUCATIONAL EQUITY & SUPPORT
 SFN 52929 (09/2017)

| | | | |
|---|---|---|-------------------|
| Agency Name (Grantee) Your School High | Grantee Contact Person Mrs. Lee D. Ehr | Telephone Number XXX-XXX-XXXX | Cell Phone Number |
| Mailing Address 2018 Building Leaders Lane | City Anytown | State ND | ZIP Code 58XXX |
| | | Budget/Project Period (MM/DD/YYYY) From 09/01/2018 To 05/30/2019 | |

- Select A Program:
- | | | | |
|---|--|--|---|
| <input type="checkbox"/> 21 st Century | <input type="checkbox"/> Title I | <input type="checkbox"/> Refugee | <input type="checkbox"/> Title II A |
| <input type="checkbox"/> Adult Education | <input type="checkbox"/> Title I Program Improvement | <input type="checkbox"/> STEEP | <input type="checkbox"/> Title II B |
| <input type="checkbox"/> Neglected & Delinquent | <input type="checkbox"/> State Funding | <input type="checkbox"/> Title III – LEP | <input type="checkbox"/> Title VI |
| <input type="checkbox"/> Homeless | | <input type="checkbox"/> Title III – IMM | <input checked="" type="checkbox"/> Other: <u>State (Year 2 of 2)</u> |
| <input type="checkbox"/> Migrant | | <input type="checkbox"/> Title IV | |

| Object Code | Amounts of Funds Requested | Amounts Approved | Comments |
|--|----------------------------|------------------|--|
| 110 Professional Salary | | | |
| 120 Non-professional Salary | | | |
| 200 Employee Benefits | | | |
| 300 Purchased Professional & Technical Services | | | |
| 430 Maintenance | | | |
| 580 Travel | \$1,000 | | Mileage for extension agent and busing to the Capitol during legislative session |
| 600 Supplies & Materials | \$3,000 | | 100 students x \$30 – Real Colors books and other training supplies |
| 730 Equipment | | | |
| 800 Dues, Memberships, & Registrations Fees | | | |
| 900 Indirect Costs | | | |
| Unobligated | | | |
| Subtotal | | | |
| Administration (Not available with all grants) | | | |
| Grand Total | \$4,000 | | |

| Object/ID Code | Example | Object/ID Code | Example |
|----------------|--|----------------|---|
| 110 | Professional Salary – Salaries for certified personnel including teachers, substitute teachers, stipends to staff for attending workshops held after regular school hours. | 430 | Maintenance – Repair of Equipment |
| 120 | Non-professional Salary – Salaries for non-certified personnel including aides, paraprofessionals, bus drivers, secretaries. | 580 | Travel – Expenditures for staff travel, including mileage, airline tickets, taxi fares, meals, lodging |
| 200 | Employee Benefits – Payments that are not part of gross salary made on behalf of employees; i.e., insurance, Social Security, retirement, unemployment compensation, Workers Compensation, annual leave, sick leave. School districts paying stipends to staff must pay benefits for those stipends. | 600 | Materials/Supplies – Expendable items that are consumed, worn out, or deteriorated in use; freight, books, school supplies, periodicals/subscriptions, software, software applications |
| 300 | Purchased Professional & Technical Services – Purchased services for which the district has a contract on file including: speaker fees, professional development on site, auditors, consultants, etc. | 730 | Equipment – Includes items such as document cameras, iPods, iPads, computers, printers even if the cost is less than \$750. These items must be tagged as being purchased with Title I funds. |
| | | 800 | Dues, Memberships, Registration Fees (includes license fees) |

| | | | |
|--|-----------------------------------|-------------------------------------|---------------|
| Name of Local Authorized Representative Mrs. Lee D. Ehr | Title Principal/Superintendent | Signature <i>Mrs. Lee D. Ehr</i> | Date Today |
|--|-----------------------------------|-------------------------------------|---------------|

| FOR DEPARTMENT USE ONLY | | | |
|-------------------------|-----------------|--|---------------|
| Date Received | Amount Approved | Approved <input type="checkbox"/> Yes <input type="checkbox"/> No | Date Approved |
| Signature-Coordinator | | | Date |
| Signature-Director | | | Date |