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

End

	Local Agend	y Informati	on	
Funding Source	ARP			
Report Prepared By	Susan Swartz			
Agency Name	Scotia-Glenville Cen	tral Schools		
Mailing Address	900 Preddice Parkw			
		Street		
	Scotia	NY	12302	
	City	State	Zip Code	
Telephone # of 518-347	-3600	County:	Schenectady	
E-mail Address: sswartz	@sgcsd.net			
Project Funding Dates	9/1/2021		30-Sep-24	

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.

Start

- 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			
	\$808,712		
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
K-12 Tutors (15)	per hour	\$30 an hour	\$210,537
Elementary Reading Glen-Worden (16)	1.00	54720 per year/ two years	\$109,440
Elementary Summer School Teachers (15)	per hour	\$31.35 an hour	\$106,008
MS/HS Summer School Teachers (15)	per hour	\$44 an hour	\$217,133
Kindergarten Teacher Glendaal (16)	1.00	49206 per year/ two years	\$98,412
MS Reading Teacher (16)	1.00	67182/per year	\$67,182

RIES FOR SUPPO		
	Subtotal - Code 16	\$96,654
Full-Time Equivalent	Annualized Rate of Pay	Project Salary
per hour	47.55 per hour	\$91,000
per hour	47.55 per hour	\$5,654
	per hour	Pay per hour 47.55 per hour

PURCHASED SERVICES			
		Subtotal - Code 40	\$593,381
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
School Resource Office(7)	Town Of Glenville	\$80000 per year/ two years	\$160,000
Athletic Trainer(20)	Ortho NY	54000 per year/two years	\$108,000
Mental Health Services(14)	Saratoga Center for the Family	90000 per year/one and half years	\$135,000
Secreterial Support for attendance and COVID testing(16)	HW Staffing	56000 per year	\$56,000
Elementary SEL and classroom management profiessional development for staff (14)	Responsive Classroom	20140 per year	\$20,14
IT Consultant(12)	Alabu	16405 per year/two	\$32,81
Security Camera Server install (13)	Acture	\$4,000.00	\$4,00
Storage Array install (13)	Acture	\$11,860.0	0 \$11,86
Virtual Machine server install (13)	Acture	\$4,938.0	0 \$4,93
Streaming presentation installation (13)	Acture	\$4,700.0	\$4,70
Employee Assistance Program (14)	Anthem, Inc	\$10,260 per year for one and a half years	\$15,3
ACES Training for HS staff (14)	La Salle Institute	37.7 days/\$2000 per day	\$40,5

SUPF	PLIES AND MATE	RIALS	
		Subtotal - Code 45	\$14,150
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Chromebook bags (20)	2250.00	\$6.22	\$14,150

TRAVEL EXPENSES			
		Subtotal - Code 46	\$1,490
Position of Traveler	Destination and Purpose	Calculation of Cost	Proposed Expenditures
Fuel for Buses- late runs (15)	Fuel for Buses- late runs	599 gallons at 2.39 a gallon	\$1,432
Fuel for buses - elementary summer program (15)	Fuel for buses - elementary summer program	24 gallons at 2.39 a gallon	\$58

	Employee Benefits		
	Subtotal - Code 80	\$79,753	
Benefit		Proposed Expenditure	
Social Security			
	New York State Teachers (16)	\$27,503	
Retirement	New York State Employees		
	Other - Pension		
Health Insurance (16)		\$22,369	
Worker's Compensation (16)		\$8,252	
Unemployment Insurance			
Other(Identify)			
FICA (16)		\$21,041	
Dental (16)		\$588	

W	INDIRECT COST	
A.	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 =

\$1,594,140.00

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.

E TOTAL PROPERTY E	QUIPMENT		
Subtotal - Code 20 \$93			\$935,524
Description of Item	Quantity	Unit Cost	Proposed Expenditure
Dell Chromebook 11 3100 2in1 touch (13)	2000.00	\$377.51	\$755,022
Security Camera Servers HPE ProLiant DL380 Gen10 4214 2.2GHz 12- core 1P 16GB-R P816i-a 12LFF 800W PS Server (13)	8.00	\$9,575.43	\$76,603
File Storage array (13) 1-HPE MSA 2062 10GbE iSCSI SFF Strg 1-HPE MSA 2060 2U 12d LFF Drv Enclosure 2-HPE MSA 1.92TB SAS RI SFF M2 SSD 8-HPE MSA 10TB SAS 7.2K LFF M2 HDD 10-HPE MSA 1.8TB SAS 10K SFF M2 HDD 8-Aruba 10G SFP+ to SFP+ 1m DAC Cable	1.00	\$60,040.00	\$60,040
Virtual Machine Server Upgrade (Vmware HPE ProLiant DL380 Gen10 5218R 1P 32GB- R S100i NC 8SFF 800W PS Server (13)	1.00	\$24,559.00	\$24,55
Streaming Presentation system (13) 1-Digital encoder 1-Ditital Touch Controls 1-LCD display 1-Mixer AMP 1-Media Switcher 4-Ditital reciever 2-PTZ camerasMicrophones, media, cabling, etc.	1.00	\$19,300.0	0 \$19,30

BUDGET SUMMARY

CODE	PROJECT COSTS
15	\$808,712
16	\$96,654
40	\$593,381
45	\$14,150
46	\$1,490
80	\$79,753
90	
49	
30	
20	\$935,524
l Total	\$2,529,664
	15 16 40 45 46 80 90 49 30 20

Agency Code:	530202060000
Project #:	5880-21-5302
Contract #:	
Agency Name:	Scotia Glenville Central School District

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

Name and Title of Chief Administrative Officer

FOR DEPARTMENT USE ONLY				
Funding Dates: _	From	То		
Program Approval:)ate:		
<u>Fiscal Year</u>	First Payment	Line #		
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1		_		
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Voucher #	— <u> </u>	rst Payment		

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Finance: Logged _____ Approved ____ MIR ____