

= Required Field

Local Agency Information		
Funding Source:	ARP - State Reserve - Comprehensive After Scho	
Report Prepared By:	Natalie Brubaker	
Agency Name:	Susquehanna Valley CSD	
Mailing Address:	1040 Conklin Rd.	
	Street	
	Conklin	NY
	City	13748
	State	Zip Code
Telephone # of Report Preparer:	607-775-9146	County: Broome
E-mail Address:	nbrubake@svsabers.org	
Project Funding Dates:	3/13/21	9/30/24
	Start	End

INSTRUCTIONS
<ul style="list-style-type: none"> 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			\$84,500
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Grade 9 ELA Tutor	120 days	\$50/day	\$6,000
Algebra I Tutor	130 days	\$50/day	\$6,500
Earth Science Tutor	120 days	\$50/day	\$6,000
Grade 9 Social Studies Tutor	120 days	\$50/day	\$6,000
Grade 10 ELA Tutor	120 days	\$50/day	\$6,000
Geometry Tutor	120 days	\$50/day	\$6,000
Living Environment Tutor	120 days	\$50/day	\$6,000
Grade 10 Social Studies Tutor	120 days	\$50/day	\$6,000
Grade 11 ELA Tutor	120 days	\$50/day	\$6,000
Algebra II Tutor	120 days	\$50/day	\$6,000
Chemistry Tutor	120 days	\$50/day	\$6,000
US History Tutor	120 days	\$50/day	\$6,000
Calculus Tutor	120 days	\$50/day	\$6,000
Physics Tutor	120 days	\$50/day	\$6,000

Employee Benefits		
Subtotal - Code 80		\$15,502
Benefit		Proposed Expenditure
Social Security		\$6,464
Retirement	New York State Teachers	\$8,281
	New York State Employees	
	Other - Pension	
Health Insurance		
Worker's Compensation		\$757
Unemployment Insurance		
Other(Identify)		

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$84,500
Support Staff Salaries	16	
Purchased Services	40	
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	\$15,502
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$100,002

Agency Code: **030601060001**

Project #: **5883-21-0160**

Contract #: _____

Agency Name: **Susquehanna Valley CSD**

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, 5, 21 

Date Signature

Roland Doig, Superintendent of Schools
Name and Title of Chief Administrative Officer

Finance: Logged _____

Approved _____

MIR _____