GRANTS REPORT 2013-2014

| Amount | \$75,000.00 |
|--------------------|--|
| Purpose/Priorities | The innovation school model aims to be a fiscally neutral and sustainable school redesign model. Approved applicants are expected to use these one-time funds strategically to support high-leverage, high impact, and capacity-building strategies. All grant funds must be used to support a continued high quality operation of an innovation school or academy and the continued high quality implementation of its approved innovation polan. |
| Grant | Innovation Schools Enhancement & Sustainability |
| Fund | 158 |

Use of Funds

- Stipends for educators for planning purposes
 Stipends for educators participation in professional development activities
 Substitutes
- Consultants

Funds may not be used for:

- Capital expenses
- Purchase of computer hardware
- Stipends or costs related to direct services to students Out-of-state travel expenses Purchase of food or beverages

These funds have been awarded to Goddard Scholars Academy, Elm Park and Worcester East Middle schools

Grants and Other Financial Assistance Programs: FY2015

Innovation Schools Enhancement & Sustainability Grant Fund Code: 158

The purpose of this one-time state funded Innovation Schools Enhancement and Sustainability Grant is to provide district and school support for the enhanced implementation of the autonomies and flexibilities identified in approved Innovation Plans. In a continued effort to support high quality enhancement and subsequent sustainability of approved autonomies, the focus of the FY15 cycle will be on innovation school measurable annual goals (MAGs).

Purpose:

Grant applicants must demonstrate how MAGs have been used to inform key organizational decision making processes in areas such as: curriculum and instruction, student achievement, school culture, professional development, staffing, fiscal planning, and operations. Additionally, applicants must identify the specific area of autonomy that has been selected for enhancement and describe how grant funded activities will improve the quality of implementation. Lastly, all grant applicants must address how activities will be sustained beyond the duration of the grant and how the effectiveness of funds will be determined.

Priorities for this competitive grant will be given to applicants that:

- 1. Operate an approved innovation school or academy in a Level 3 or 4 district.
- 2. Operate an approved innovation school designated as Level 3 or 4.

Priorities:

- 3. Clearly demonstrate how MAGs have been used to inform key organizational decision making processes in areas such as: curriculum and instruction, student achievement, school culture, professional development, staffing, fiscal planning,
- 4. Clearly describe how grant funded activities will be sustained beyond the duration of the grant.
- 5. Support the ongoing and thoughtful implementation of a distinctly innovative educational model.

In order to apply for an Innovation Schools Enhancement and Sustainability Grant, an applicant must have completed one full year of implementation of an approved innovation school or innovation academy. Awardees of the FY14 enhancement and sustainability grants are not eligible to apply for this RFP.

Eligibility:

A district may submit a grant application for multiple innovation schools or academies within the district.

Funding:

Award amounts will be up to \$15,000 per innovation academy and up to \$30,000 per approved innovation school.

The innovation school model aims to be a fiscally neutral and sustainable school redesign model. Approved applicants are expected to use these one-time funds strategically to support high-leverage, high impact, and capacity-building strategies. All grant funds must be used to support continued high quality operation of an innovation school or academy and the continued high quality implementation of its approved innovation plan.

Fund Use:

Examples of unallowable expenditures include, but are not limited to: 1) capital expenses, 2) the purchase of computer hardware, 3) stipends or costs related to direct service provision to students, 4) out-of-state travel expenses, and 5) purchase of food or beverages.

Project Duration: Upon approval- 06/30/2015

Program Unit:

Office Charter Schools and School Redesign

Contact:

Shay Edmond <u>sedmond@doe.mass.edu</u>

Required Prior to

Grant Submission: Interested applicants must submit an email to sedmond@doe.mass.edu indicating its intent to apply. The non-binding intent to apply email must include: 1) the name(s) of the approved innovation school(s) or innovation academy for which the applicant seeks enhancement and sustainability grant funding for; and 2) the contact information (name, title, email address, and phone number) for the applicant and district personnel who should be include on any communications regarding this grant program prior to the submission of a full application.

Intent to Apply Notification Due: Friday, October 10, 2014 by 5:00PM.

Date Due:

Full Proposals Due: Friday, October 24, 2014 by 5:00PM (see Required Forms section below). Proposals must be postmarked by the due date and received at the Department by 5:00PM on the above date.

Budget Workbook - Includes- Part I-General Program Signature Page (Cover Sheet)- and Part II- Project Expenditures-Detail Information

Required Forms:

Part III - Required Program Information

Part IV- Innovation Schools Assurances Form

Copy of final approved innovation school plan and subsequent addendums (if applicable)

Email all required documents, in their original Word or Excel formats (e.g., not converted to a PDF), to sedmond@doe.mass.edu. Note: Signatures are not required on the emailed versions.

And

Mail three (3) sets of all required documents which includes original signatures to:

Submission Instructions:

Shay Edmond

Office of Charter Schools and School Redesign Massachusetts Department of Elementary and Secondary Education

75 Pleasant Street

Malden, MA 02148-4906

All mailed documents must be received by the Department by 5:00PM on Friday, October 24, 2014.

Massachusetts Department of Elementary & Secondary Education

ANNEX A gb #5-24 Page 3

Massachusetts Department of Elementary and Secondary Education STANDARD CONTRACT FORM AND APPLICATION FOR PROGRAM GRANTS



| A. APPLICANT District Name | 1 AAOLGEZIEL | ~ | District Code: | 03480000 |
|--|--|--|---|--|
| Contact Name: | Gregory Bares | | | |
| Address: | 20 Irving Street 0 | | | |
| | Worcester | <u>0</u> | <u>1609</u> | |
| Contact Telephone #: | 508 799 3108 | | | |
| Contact Email Address: | BaresG @worc.k12.ma.us_ | | | |
| B. APPLICATION FOR P | ROGRAM FUNDING | | | |
| Fund Code | Program Name | PROJECT | DURATION | TOTAL AMOUNT |
| | | FROM | то | REQUESTED: |
| Fund Code 158 | FY15 Innovation Schools Enhancement and Sustainability Grant | Upon Approval | 6/30/2015 | \$75,000 |
| AUTHORIZED ME, AS ITS REPRESE THIS APPLICATION THE AGENCY A | ON CONTAINED IN THIS APPLICATION IS CORRE NTATIVE, TO FILE THIS APPLICATION; AND THAT GREES TO COMPLY WITH ALL APPLICATION STA ADMINISTRATION OF GRANT FUNDS | LUNDERSTAN | D THAT FOR ANY | FUNDS RECEIVED THROUGH |
| AUTHORIZED ME, AS ITS REPRESE THIS APPLICATION THE AGENCY A | NTATIVE, TO FILE THIS APPLICATION; AND THAT GREES TO COMPLY WITH ALL APPLICATION STA | LUNDERSTAN | D THAT FOR ANY | FUNDS RECEIVED THROUGH |
| AUTHORIZED ME, AS ITS REPRESE THIS APPLICATION THE AGENCY A THE PROGRAMMATIC AND FISCAL | NTATIVE, TO FILE THIS APPLICATION: AND THAT GREES TO COMPLY WITH ALL APPLICATION STA ADMINISTRATION OF GRANT FUNDS | I UNDERSTANI TE AND FEDER | D THAT FOR ANY | FUNDS RECEIVED THROUGH UIREMENTS COVERING BOTH Superintendent |
| AUTHORIZED ME, AS ITS REPRESE THIS APPLICATION THE AGENCY AFTHE PROGRAMMATIC AND FISCAL AUTHORIZED SIGNATORY: TYPED NAME: Reminder: Fund Code 156 documents are due by 5PM 6 | NTATIVE, TO FILE THIS APPLICATION: AND THAT GREES TO COMPLY WITH ALL APPLICATION STA ADMINISTRATION OF GRANT FUNDS MULLILLY FORCE | er 10, 2014. F (or hand del I signature p ols and Second ot 1906 | TITLE: DATE: // FULL PROPOSiver) three (3) age to: ol Redesign ary Education | Superintendent Superintendent Als with all required sets of all required form |
| AUTHORIZED ME, AS ITS REPRESE THIS APPLICATION THE AGENCY AFTHE PROGRAMMATIC AND FISCAL AUTHORIZED SIGNATORY: TYPED NAME: Reminder: Fund Code 156 documents are due by 5PM 6 | Melinda J. Boone, Ed.D. Melinda J. Boone, Ed.D. Melinda J. Spylia Malination of Which has an origina at least one of which has an origina Sheika Edmond, Office of Charter Schoolssachusetts Department of Elementary 75 Pleasant Street Malden, MA 02148-4 | er 10, 2014. If (or hand del I signature pols and Second of 1906 and at sedmon | TITLE: DATE: // FULL PROPOSiver) three (3) age to: of Redesign ary Education and@doe.mass | Superintendent Superintendent Al. (4 BALS with all required sets of all required forms |
| AUTHORIZED ME, AS ITS REPRESE THIS APPLICATION THE AGENCY AT THE PROGRAMMATIC AND FISCAL AUTHORIZED SIGNATORY: TYPED NAME: Reminder: Fund Code 153 documents are due by 5PM of Email | Melinda J. Boone, Ed.D. Melinda J. Boone, Ed. | er 10, 2014. F (or hand del I signature p sis and Scho and Second at 1906 and at sedmon | TITLE: DATE: // FULL PROPOSiver) three (3) age to: ol Redesign ary Education and@doe.mass NE | Superintendent Superintendent C() () SALS with all required sets of all required forms |
| AUTHORIZED ME, AS ITS REPRESE THIS APPLICATION THE AGENCY AT THE PROGRAMMATIC AND FISCAL AUTHORIZED SIGNATORY: TYPED NAME: Reminder: Fund Code 153 documents are due by 5PM of Email | Melinda J. Boone, Ed.D. Melinda J. Boone, Ed. | er 10, 2014. If (or hand del l signature pols and Second at 1906 and at sedmont V THIS LI | TITLE: DATE: // FULL PROPOSiver) three (3) age to: ol Redesign ary Education and@doe.mass NE | Superintendent Superintendent C() () SALS with all required sets of all required form sedu |

| B. APPLICANT AGENCY | Worcester | | strict Code: | 03480000 | | 2015 | |
|---|---------------------------------------|--|---|--------------------------------|--|---------------------|--|
| | regory Bares 08) 799-3108 | Address: Email addres Submission | | 01609 Baresg@worc.k12.ma.us | | | |
| PLEASE PROVIDE ALL OF THE INFORM not roll up automatically from the school | | | AGES OF THE BUI | OGET DETAIL. Som | e of the information in t | he first column may | |
| C. ASSIGNMENT THROUGH SO | HEDULE A | | | | | | |
| Check this box ONLY if this proje | ct will be using funds | assigned by more th | an one agency. | A completed Se | chedule A, with signa | atures and the | |
| amount of funds assigned by eac | h participating agency | | | | | | |
| D. STAFFING C | ATEGORIES | E. # OF STAFF | F. FTE | G. MTRS * | H. AMOUNT | I. TOTAL | |
| 1. ADMINISTRATORS: | | | | | Do not use decimals | | |
| Supervisor/Director | | | <u>"-</u> | | | | |
| Project Coordinator | | | | | | | |
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| Stipends | <u>-</u> | | | | <u> </u> | | |
| <u> </u> | | | | | \$1,275 | | |
| _ | | | | | \$1,575 | | |
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| | | | | | | | |
| | | | | | | | |
| SUB-TOTAL | | No. 1 | 21.44 | | | \$2,85 | |
| INSTRUCTIONAL/ 2. PROFESSIONAL STAFF: | | | | | Do not use decimals | | |
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| | ·· ······ | | | | | | |
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| | | | - | | \$8,963 | - | |
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| | | | <u> </u> | | _ | | |
| SUB-TOTAL | | | | 1 2 | | \$48,39 | |

| PART II - PROJECT EXPENDITURES - DETAIL INFO | RMATION | | | Α. | Fund Code 158 |
|---|-----------------------------|---------------------|--|---|---|
| B. APPLICANT AGENCY Worcester | Di | strict Code: | 03480000 | FY | 2015 |
| D. STAFFING CATEGORIES | E. # OF STAFF | F. FTE | G. MTRS* | H. AMOUNT | I. TOTAL |
| 3. SUPPORT STAFF | | | | Do not use decimals | |
| Aides/Paraprofessionals | | | | | |
| | | | | | |
| | | | | · | |
| Secretary/Bookkeeper | | | | | |
| Other | | | | | |
| | | | | | |
| Stipends | | | | 1 | |
| SUB-TOTAL | | | | | |
| * Check the MTRS box if the identified employee(s) is/as | re a member of the M | A Teachers' Ret | irement System. | <u></u> | |
| This requirement only applies to federally-funded grant | programs. | | | , | |
| 4. FRINGE BENEFITS: | | | | AMOUNT | LINE ITEM SUB-TOTAL |
| 4-a MA TEACHERS' RETIREMENT SYSTEM (Federa | lly-funded grants only | y) | | | |
| 4-b OTHER FRINGE BENEFITS (Other retirement systems | s, health insurance, FICA) | Medicaid | | · | |
| | | | | | |
| SUB-TOTAL | | | | | |
| 5. CONTRACTUAL SERVICES: Indicate the services t whichever is applicable. | to be provided and the rate | e to be paid per ho | ur 01 per day, | H, AMOUNT | I. LINE ITEM |
| White is appreciate. | | Rate(\$) | Hour/Day | AWIOUNI | SUB-TOTAL |
| CONSULTANTS - | | | | | |
| | | | | \$4,000 | |
| | | | | \$3,000 | |
| | | | | \$3,000 | |
| SPECIALISTS - | | | | | |
| | | | | | |
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| INSTRUCTORS - | | | | | |
| | | | <u> </u> | | |
| | | | | <u> </u> | |
| | | <u> </u> | | | |
| SPEAKERS - | | | | | |
| SUBSTITUTES - | | | | | |
| SUBSTITUTES - | | | | \$1,400 | |
| | | - | | \$1,400 | 1 |
| | | | _ | | |
| | | <u> </u> | | | |
| OTHER - | | | | | |
| SUB-TOTAL | | | | | \$11,40 |

| ART II - PROJECT EXPENDITURES - DETAIL INFORMATION B. APPLICANT AGENCY Worcester | District Code: 03480000 | A. | Fund Code 158 2015 |
|---|---|---|------------------------|
| 6. SUPPLIES AND MATERIALS: Items costing less than | Didition Codes, Collector | Н. | I. |
| \$5,000 per unit or having a useful life of less than one year. | | AMOUNT | LINE ITEM SUB-TOTAL |
| TEXTBOOKS AND INSTRUCTIONAL MATERIALS - | | | |
| | | \$6,206 | |
| | | | |
| | | | |
| INSTRUCTIONAL TECHNOLOGY INCLUDING SOFTWARE - | | | |
| | | \$1,300 | |
| | | _ | |
| NON-INSTRUCTIONAL SUPPLIES - | | | |
| NON-INSTRUCTIONAL SULT LIES- | | \$1,320 | |
| | | \$2,780 | |
| SUB-TOTAL | | | \$11,60 |
| 7. TRAVEL: Mileage, conference registration, hotel, and meals | | | N 1880 1860 A.S. |
| SUPERVISORY STAFF - Best Practices Summit | | | |
| | | | \$1.50 mm |
| INSTRUCTIONAL STAFF - | | | |
| OTTO TO THE PARTY OF THE PARTY | | | |
| OTHER - SUB-TOTAL | | | |
| | | | |
| 8. OTHER COSTS: Please indicate the amount requested in each category | | | |
| | | Do not use decimals | |
| Fransportation of Students - | | | |
| Memberships/Subscriptions - | | | |
| Advertising- | | | |
| Printing/Reproduction - | | | |
| Maintenance/Repairs - | | | |
| Rental of Space - | | | |
| Rental of Equipment - | | | |
| Telephone/Utilities - | | | |
| | | | |
| SUB-TOTAL | | | |
| 9. INDIRECT COSTS: First, click on the 'Indirect Cost Calculator' link to access the workshee calculate maximum amount that can be used for indirect costs. Then en approved rate and the amount from the 'Indirect Cost Calculator' works (cell D13 or D22) in the green cell to the right: | ter Approved 1.00% | Click here Indirect Cost Calculator | \$7: |
| 9. INDIRECT COSTS: First, click on the 'Indirect Cost Calculator' link to access the worksheer calculate maximum amount that can be used for indirect costs. Then en approved rate and the amount from the 'Indirect Cost Calculator' works | heet Approved 1.00% Rate: 1.00% lotes Page. | Indirect Cost | I. LINE ITEM SUB-TOTAL |
| INDIRECT COSTS: First, click on the 'Indirect Cost Calculator' link to access the workshee calculate maximum amount that can be used for indirect costs. Then en approved rate and the amount from the 'Indirect Cost Calculator' works (cell D13 or D22) in the green cell to the right: EQUIPMENT: Provide a statement of need and cost of each item in the N | heet Approved 1.00% Rate: 1.00% lotes Page. | Indirect Cost Calculator H. | I. LINE ITEM |
| INDIRECT COSTS: First, click on the 'Indirect Cost Calculator' link to access the workshee calculate maximum amount that can be used for indirect costs. Then en approved rate and the amount from the 'Indirect Cost Calculator' works (cell D13 or D22) in the green cell to the right: EQUIPMENT: Provide a statement of need and cost of each item in the N Items costing \$5,000 or more per unit and having a useful life of more than on | heet Approved 1.00% Rate: 1.00% lotes Page. | Indirect Cost Calculator H. | I. LINE ITEM |
| 9. INDIRECT COSTS: First, click on the 'Indirect Cost Calculator' link to access the worksheer calculate maximum amount that can be used for indirect costs. Then en approved rate and the amount from the 'Indirect Cost Calculator' works (cell D13 or D22) in the green cell to the right: 10. EQUIPMENT: Provide a statement of need and cost of each item in the N Items costing \$5,000 or more per unit and having a useful life of more than on INSTRUCTIONAL EQUIPMENT | heet Approved 1.00% Rate: 1.00% lotes Page. | Indirect Cost Calculator H. | I. LINE ITEM |

| FY15 | Innovation | Schools | Enhancement and | d Sustainahility | Grant |
|-------------|------------|---------|-----------------|------------------|-------|
| | | | | | |

Goddard School of Science and Technology

Instructions: In the text box below, provide an overview of the budget expenditures that are necessary to support the implementation of the approved Innovation Plan. In the specific budget categories that follow, provide detailed information for each proposed expenditure and how it will support the implementation of the Innovation Plan. Please be mindful of those items listed in the unallowable expenditures section of the RFP. All expenditures should be broken down as much as possible, i.e. teacher stipends - 10 teachers@\$x/hr@xhrs.

| sho | elementation of the Innovation Plan. Please budl be broken down as much as possible, i.e. | teacher stipends - 10 teacher | rs@\$x/hr@x | thrs. | |
|------------|--|--|---------------|---|--|
| con | nt funds will support school wide professional des sultants, school wide grade level meetings to deve hers attending consultant workshops. | relopment based on developing lop and implement curriculum | modules, the | curriculum. Funds w purchase of non inst | viii support 2 workshops from outside ructional supplies, and substitute coverage for |
| | | | | · | |
| AL | LOCATION OF FUNDS | POLYTHINA MILLER HILLER HILLER MILLER MI | | | |
| 1 | ADMINISTRATORS: | # of staff FTE | MTRS | FY14 Amount | Expenditure Justification |
| | Supervisor/Director | | | | |
| | Project Coordinator | | | | ** |
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| | APATON | | | | |
| | Stipends | · | | | |
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| | | | | | Annana Anna |
| | NILAMA | | | | **** |
| | | | | | Company |
| | A CONTRACTOR OF THE CONTRACTOR | | | | And and an artist and a state of the state o |
| SU | B-TOTAL | 0 0.00 |). | \$ - | |
| _ | | # of staff FTE | ; | Amount | Expenditure Justification |
| 2 | INSTRUCTIONAL/PROFESSIONAL STAFF: | Comment of the Commen | | Γ | Instructional Staff Stipends |
| | | | | | Academic Teachers - Curriculum Work |
| | | | | | Grade level teams will be working to develop curriculum modules |
| | Stipends | | | | 5 facilitators and 10 teachers @ \$32.50 per hour |
| | Grade level teams develop curriculum; 32.50 | | | \$ 9,019 | 18.5 hours = \$9,019 |
| | One Administrator to plan grade level meeti | | | \$ 675 | Administrator/Planner |
| | One reministrates to plan grade lever meets | | | - | One administrator will work with grade level teams to plan curriculum module work |
| | | | | | 1 administrator @ \$37.50 per hour x 18 hours = |
| | | | | | \$675 |
| - | D. MODINE | | | | <u> </u> |
| <u>30.</u> | B-TOTAL | 0 0.00 |) | \$ 9,694 | |
| 3 | SUPPORT STAFF | # of staff FTE | | Amount | Expenditure Justification |
| | Aides/Paraprofessionals | | | | |
| | | ······································ | | | |
| | Secretary/Bookkeeper | | | | THE ADMINISTRATION OF THE PROPERTY OF THE PROP |
| | Other | | | | |
| | | | | | |
| | Stipends | | | | |
| SU | B-TOTAL | 0 0,00 |) | s - | to the state of th |
| 4 | FRINGE BENEFITS: | | | | |
| | 4-a MTRS Automatically calculates if MTRS box is checked for ar | v staff listed above. | | \$0 | |
| | 4-b OTHER FRINGE BENEFITS (Other retirement systems, healt | • | | | |
| | | | | | |
| _ | B-TOTAL | | | \$ - | |
| SII | | | | | |

FY15 Innovation Schools Enhancement and Sustainability Grant Goddard School of Science and Technology 5 CONTRACTUAL SERVICES Rate (\$) Expenditure Justification Hour/Day Contractual Services Responsive Classroom consultant to work with One Consultant: Responsive Classroom 2000 2 4,000 One Consultant: area of writing 1500 2 \$ 3,000 2 days x \$2,000 per day = \$4,000 One Consultant: Shared Inquiry 1500 3,000 Specialists Consultant to work with teachers in grades K-6 in the area of writing 2 days @ \$1,500 per day = \$3,000 Consultant to work with teachers in grades 4-6 on Shared Inquiry and questioning 2 days @ \$1,500 Instructors = \$3,000 Substitutes Substitutes needed for 1/2 day coverage of classrooms during 4 training sessions that will be Speakers held in the spring of 2014. 12 substitutes for grades K-3 x 2 days @ \$35.00 = Substitutes 8 substitutes for grades 4-6 x 2 days @\$35.00 = Half day substitutes: 4 training sessions 35 40 1,400 \$560 Other SUB-TOTAL 11,400 6 SUPPLIES AND MATERIALS Expenditure Justification Amount Textbooks and Instructional Materials Supplies Test Sets for 2 units per Grade Level Non Instructional supplies in support of \$ 6,206 professional development: Intentional Talk . 30 @ \$20.00 = \$600 Instructional Technology including Software Responsive Classroom Resource Library -1 @ \$500.00= \$500 Projector for PD and Grade 1 Implementation 1.300 Instructional supplies to support Curriculum modules: Text sets for 2 units per grade level = \$6,206 Non-instructional Supplies ELMO/projector for professional development Intentional Talk supplies and grade 1 module implementation: 1 bundle @ Responsive Classroom Resource Library 500 SUB-TOTAL 8,606 7 TRAVEL: Mileage, conference registration, hotel and meals Expenditure Justification Amount Supervisory Staff Instructional Staff Other SUB-TOTAL 8 OTHER COSTS: **Expenditure Justification** Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities SUB-TOTAL 9 INDIRECT COSTS - Must be entered directly on Budget Worksheet 10 EQUIPMENT: Only list items costing \$5,000 or more per unit and having a useful life of more than one year. Expenditure Justification Instructional Equipment Non-instructional Equipment SUB-TOTAL TOTAL FY14 FUNDS REQUESTED \$ 29,700

ANNEX A gb #5-24 Page 10

| FV15 Innovation Sc | hools Enhancement and | Sustainability Crant |
|---------------------------|-----------------------|----------------------|
| T. I IN THURSAMINED | MOOIS EMHANCEMENT AUG | Sustamadility Grant |

University Park Campus School

Instructions: In the text box below, provide an overview of the budget expenditures that are necessary to support the implementation of the approved Innovation Plan. In the specific budget categories that follow, provide detailed information for each proposed expenditure and how it will support the implementation of the Innovation Plan. Please be mindful of those items listed in the unallowable expenditures section of the RFP. All expenditures should be broken down as much as possible, i.e. teacher stipends - 10 teachers@\$x/hr@xhrs.

University Park would like to use our Professional Development autonomy to enhance our curriculum, instruction, and assessment. Specifically, we are requesting the \$30,000 grant to provide up to 42 hours of professional development for the entire faculty. The PD activities will be spread over 6 full days (Saturdays and school vacation days). Funds will also support school based planning for the PD activities

| ΔT. | LOCATION OF FUNDS | | | | | |
|-----|---|--------------------------------|--------------|----------|---------------------------------------|--|
| | ADMINISTRATORS: | # of staff | FTE | MTRS | FY14 Amount | Expenditure Justification |
| | | # Of staff | | | T T T T T T T T T T T T T T T T T T T | Administrator Stipends: |
| | Supervisor/Director | | | | | One administrator to plan, lead, and participate in |
| | Project Coordinator | | | | | professional development workshops for |
| | | | | | | curriculum innovation and alignment, numeracy |
| | | | | | | across the curriculum, and restorative justice. |
| | | | | | | 1 administrator x \$37.50/hr x 7 hours per day x 6 |
| | | | | | | PD days= \$1,575 |
| | | | | <u> </u> | | 1 Administrator x 4 hours for PD planning x |
| | | | | | | 37.50/hr= \$150 |
| | | | | | | |
| | Stipends | | | | | |
| | One Administrator: Planning: 37.50/Hr | | | | \$ 150 | - |
| | One Administrator: Implementation: 37.50/I | | | | \$ 1,575 | |
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| , | WAA | | | | | |
| SUI | B-TOTAL | 0 | 0.00 | 11 11 1 | S 1,725 | |
| 2 | INSTRUCTIONAL/PROFESSIONAL STAFF: | # of staff | FTE | | Amount | Expenditure Justification |
| - | | | I | | | Instructional Staff Stipends |
| | | | | | | 20 Instructional/Professional Staff x 32.50/hr- |
| | | | <u> </u> | | | 37.50/hr x 6-7 hours per day x 6 PD days= |
| | | L | | _ | | \$27,000 5 Instructional/Professional Staff x 6 hours for PD |
| | Stipends | | | | | planning x 32.50/hr= \$975 |
| | 20 Instructional Staff: Implementation: 32.5 | | | | \$ 27,000 | |
| | 5 Instructional Staff: Planning: 32.50/Hr | | | | \$ 975 | |
| | | | | | | |
| | VALUE AND THE PROPERTY OF THE | | | | | |
| | | | | | | |
| | | | | | | I L |
| SUI | B-TOTAL | 0 | 0.00 | | \$ 27,97 <u>5</u> | <u> </u> |
| 3 | SUPPORT STAFF | # of staff | FTE | | Amount | Expenditure Justification |
| | Aides/Paraprofessionals | | | | | |
| | · | | <u> </u> | 1 🗆 | | |
| | | | | 1 - | | |
| | Secretary/Bookkeeper | | | | | |
| | Other | | <u> </u> | | | |
| | Other | | J | , I | | |
| | Stipends | | | | | |
| | | | | | | |
| | B-TOTAL PRINCE PENDENCE | 00 | 0.00 | | <u> </u> | |
| 4 | FRINGE BENEFITS: | | | | | 1 |
| | 4-a MTRS Automatically calculates if MTRS box is checked for any staff | flisted above. | | | \$0 | |
| | 4-b OTHER FRINGE BENEFITS (Other retirement systems, health insurate | | | | \ | |
| | | turel turner - mesculae below) | | | | |
| | | | | | | |
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ANNEX A gb #5-24 Page 11

| L_ | VII. | - , - , - , - , - , - , - , - , - , - , | rark Camp | | |
|---------------------|--|---|--|---------------------|--|
| 5 | CONTRACTUAL SERVICES | Rate (\$) | Hour/Day | Amount | Expenditure Justification |
| - | | Trace (3) | 11001723 | Amount 1 | |
| | Consultants | ļ | | | |
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| | | | | | |
| | Specialists | | | | |
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| | Instructors | * | | | |
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| | W-117/A-17/A-17/A-17/A-17/A-17/A-17/A-17/ | ļ | | | |
| | | | | | |
| | | | | | |
| | Speakers | | | | |
| | | | | | |
| | | <u> </u> | | | |
| | Substitutes | | <u> </u> | | |
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| | Other | | | | |
| | Other Company | L | | | TO VALUE STATE A PROGRAMMENT AND A PROGRAMMENT A |
| CYT | B-TOTAL | | | | <u> </u> |
| <u> </u> | B-TOTAL | | | <u> </u> | |
| 6 | SUPPLIES AND MATERIALS | | | | Expenditure Justification |
| U | | | | Amount | |
| | Textbooks and Instructional Materials | | | | |
| | • | | | | |
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| | Instructional Technology including Software | | | | |
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| | Non-instructional Supplies | | | | |
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| SU | B-TOTAL | 74 <u>1</u> 4 2 4 1 | | s - | |
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| | TRAVEL: Mileage, conference registration, hotel and | | | \$ | Expenditure Justification |
| | · · · · · · · · · · · · · · · · · · · | | | | |
| | TRAVEL: Mileage, conference registration, hotel and | | | | |
| | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff | | | | |
| | TRAVEL: Mileage, conference registration, hotel and | | | | |
| | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff | | | | |
| | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff | | | | |
| | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff | | | | |
| 7 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other | | : | Amount | |
| 7 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff | | | | |
| 7 SU | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other | | | Amount | Expenditure Justification |
| 7 SU | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: | | | Amount | |
| 7 SU | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students | | | Amount | Expenditure Justification |
| 7 SU | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: | | | Amount | Expenditure Justification |
| 7 SU | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students | | | Amount | Expenditure Justification |
| 7 SU | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising | | | Amount | Expenditure Justification |
| 7 SU | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction | | | Amount | Expenditure Justification |
| 7 SU | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs | | | Amount | Expenditure Justification |
| 7 SU | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction | | | Amount | Expenditure Justification |
| 7 SU | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space | | | Amount | Expenditure Justification |
| 7 SU | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment | | | Amount | Expenditure Justification |
| 7 SU | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space | | | Amount | Expenditure Justification |
| 7 <u>SU</u> 8 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities | | | Amount S Amount | Expenditure Justification Expenditure Justification |
| 7 <u>SU</u> 8 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment | | | Amount | Expenditure Justification |
| 7 SU 8 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities B-TOTAL | meals | | Amount S - Amount | Expenditure Justification Expenditure Justification |
| 7 SU 8 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities | meals | iect | Amount S Amount | Expenditure Justification Expenditure Justification |
| 7 SU 8 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities B-TOTAL INDIRECT COSTS - Must be entered directly on Bar | meals | ecef | Amount S - Amount | Expenditure Justification Expenditure Justification |
| 7 SU 8 SU 9 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities B-TOTAL | meals | | Amount S - Amount | Expenditure Justification Expenditure Justification |
| 7 SU 8 SU 9 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities B-TOTAL INDIRECT COSTS - Must be entered directly on But EQUIPMENT: Only list items costing \$5,000 or more per unit and having a useful Describe below. | meals | | Amount S - Amount | Expenditure Justification Expenditure Justification |
| 7 SU 8 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities B-TOTAL INDIRECT COSTS - Must be entered directly on Bate EQUIPMENT: Only list items costing \$5,000 or more per unit and having a useful Describe below. Instructional Equipment | meals | | Amount S - Amount | Expenditure Justification Expenditure Justification |
| 7 SU 8 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities B-TOTAL INDIRECT COSTS - Must be entered directly on But EQUIPMENT: Only list items costing \$5,000 or more per unit and having a useful Describe below. | meals | | Amount S - Amount | Expenditure Justification Expenditure Justification |
| 7 SU 8 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities B-TOTAL INDIRECT COSTS - Must be entered directly on But EQUIPMENT: Only list items costing \$5,000 or more per unit and having a useful Describe below. Instructional Equipment Non-instructional Equipment | meals | | Amount S - Amount | Expenditure Justification Expenditure Justification |
| 7 SU 8 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities B-TOTAL INDIRECT COSTS - Must be entered directly on Bate EQUIPMENT: Only list items costing \$5,000 or more per unit and having a useful Describe below. Instructional Equipment | meals | | Amount S - Amount | Expenditure Justification Expenditure Justification |
| 7 SU 8 SU 9 10 | TRAVEL: Mileage, conference registration, hotel and Supervisory Staff Instructional Staff Other B-TOTAL OTHER COSTS: Transportation of Students Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities B-TOTAL INDIRECT COSTS - Must be entered directly on But EQUIPMENT: Only list items costing \$5,000 or more per unit and having a useful Describe below. Instructional Equipment Non-instructional Equipment | meals | | Amount | Expenditure Justification Expenditure Justification |

FY15 Innovation Schools Enhancement and Sustainability Grant

| | | | | stainability Gra | nt |
|--|---|--|--|---|---|
| Ac | ademy of Se | cience a | ind Te | chnology | |
| structions: In the text box below, provide an ov proved Innovation Plan. In the specific budget c pport the implementation of the Innovation Plan penditures shoudl be broken down as much as p | ategories that foll . Please be mind | ow, provid ful of those | e detailed items lis | information for e ted in the unallow | each proposed expenditure and how it will vable expenditures section of the RFP. All |
| off members of the Academy of Health, Science and Towerful affect on our students and would like to increat all of our staff members need to advance to Level II dennected, heard, empowered and safe and academic MAGs. We seek to use funding from this grant fin the Origins Developmental Designs. This program | ase our knowledge training. We feel the cengagement increat opportunity to pro | of this progr e inclusion on ases. This ca vide profess | am. We ha of Advisor in be evide ional deve | we several new staft ies have contributed nced in student atte lopment opportuniti | f members who need training in this program I to creating a school culture in which students ndance, rates of promotion and all of our les that will focus on trainings for Academy |
| LLOCATION OF FUNDS ADMINISTRATORS: | # of staff | FTE | MTRS | FY14 Amount | Expenditure Justification |
| Supervisor/Director | | | | | Administrator Stipends |
| Project Coordinator | | | | | One administrator to plan, lead and participate in professional development workshops for |
| | | | | | advisories. |
| | | | | | 1 administrator @ \$37.50 per hour x 30 hours = \$1,125 |
| THE RESIDENCE OF THE PROPERTY | | | | | |
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| The state of the s | | | ō | | |
| | | | | | |
| Stipends | | | | | |
| One Administrator Planning/Implementation | | | | \$ 1,125 | |
| | | | | | |
| 1887-196-197-1988-197-1988-197-1988-197-1988-197-1988-197-1988-197-1988-197-1988-197-1988-197-1988-197-1988-19 | | | | | |
| | | | | | |
| | | | | | |
| N. W. | | | | | |
| B-TOTAL | 0 | 0.00 | | \$ 1,125 | |
| INSTRUCTIONAL/PROFESSIONAL STAFF: | # of staff | FTE | | Amount | Expenditure Justification |
| | | | | | Seven instructional/professional staff to |
| | | | | | participate in professional development for Level I Origins program: |
| | | | | | 7 staff @ \$32.50 per hour x 15 hours = \$3,412.50 |
| Stipends | | | | | Fifteen instructional/professional staff to participant in professional development for Level |
| 7 Staff, Level I origins: 32.50/Hr | | | | \$ 3,412 | II Origins program 15 staff @ \$32,50 per hour x 15 hours = |
| 15 Staff, Level II origins: 32.50/Hr | | | | \$ 7,313 | \$7,312.50 per nour x 15 nours = |
| | | | | | |
| | | | | | |
| AN AUGUST 184-8-8-4 | | | | | |
| | | | | | |

Expenditure Justification 3 SUPPORT STAFF FTE # of staff Aides/Paraprofessionals Secretary/Bookkeeper Other Stipends SUB-TOTAL
4 FRINGE BENEFITS: 0.00

- 4-a MTRS
 Automatically calculates if MTRS box is checked for any staff listed above.
- 4-b OTHER FRINGE BENEFITS (Other retirement systems, health insurance, FICA Describe below)

| | ٠ | |
|---|------|-----|
| • | | \$0 |
| | | |

SUB-TOTAL

| FY15 Innovation | | | | | ANN |
|--|--------------------|--|--|--|--|
| Academy of Science and Technology | | | | | gb #5 |
| CONTRACTUAL SERVICES | Rate (\$) | Hour/Day | Amount | Expenditure Justification | Page |
| Consultants | | | | E and a second a second and a second a second and a second a second and a second and a second a second a second a second a second and a second a second a second a second and a second a se | |
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| \$40 m - 1 | | | | | |
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| Specialists | | | | | |
| And the state of t | | | | | |
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| To As a As a second | | | | ţ. | |
| Instructors | | | | | |
| A STATE OF THE STA | | | | | |
| | | | | · | |
| Ou alone | | | | | |
| Speakers | | | | | |
| O. d. office | | | | | |
| Substitutes | | + | | | |
| - III. III. III. III. III. III. III. II | | + | | | |
| | | | | | |
| Other | | | | | |
| B-TOTAL | | · · · | \$ - | | |
| | | <u></u> | | Expenditure Justification | |
| SUPPLIES AND MATERIALS | | | Amount | Supplies | |
| Textbooks and Instructional Materials | | | | Non Instructional supplies in support of | |
| | | | | professional development | |
| | | | | Level I; 6 coaching guides x \$25 per unit = \$150; 6 units x \$95 per unit (includes Advisory book set | |
| MANAGEMENT AND ASSESSMENT OF THE PROPERTY OF T | | | | with DVD and study guides) = \$570; for a total of | |
| Instructional Technology including Software | | | | \$720 in Level I materials. | |
| The state of the s | | | | Level II; 15 Advisory book sets with DVD x \$79 | |
| | | | | = \$1,185; 15 Classroom discipline sets with DVD x \$73 = \$1,095 for a total of \$2,280 | |
| HINE THE REAL PLANTAGE IN A REAL PLANTAGE AND A STATE OF THE PARTY OF | | | | , | |
| Non-instructional Supplies | | | | | |
| Level I origin materials | | | \$ 720 | | |
| Level II origin materials | | | \$ 2,280 | | |
| JB-TOTAL | 19 (1. Table) | | \$ 3,000 | | · : |
| TRAVEL: Mileage, conference registration, hotel a | nd meals | | Amount | Expenditure Justification | |
| Supervisory Staff | | | | | |
| Cuper 1001) Cum | | | | | |
| Instructional Staff | | | | | |
| modustional Contr | | | | | |
| Other | | | | | <u> </u> |
| | | | | | • |
| JB-TOTAL | | | <u> </u> | | = |
| OTHER COSTS: | | | Amount | Expenditure Justification | 1 |
| Transportation of Students | | | | | |
| • | | | | | |
| Memberships/Subscriptions | | | | | |
| • | | | | | |
| Memberships/Subscriptions | | | | | |
| Memberships/Subscriptions Advertising | | | | | |
| Memberships/Subscriptions Advertising Printing/Reproduction | | | | | |
| Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs | | | | | |
| Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space | | | | | |
| Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities | | | | | |
| Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities | <u> 178 (1782)</u> | <u> </u> | \$ - | | And the second s |
| Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment | n Budget Work | sheet | S - | | And the state of t |
| Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities SUB-TOTAL 9 INDIRECT COSTS - Must be entered directly on | n Budget Work | sheet | tacca contraction (0010001000000000000000000000000000000 | | And the second s |
| Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities | | | tacca contraction (0010001000000000000000000000000000000 | Expenditure Justification | |
| Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities UB-TOTAL 9 INDIRECT COSTS - Must be entered directly on 10 EQUIPMENT: | | | tacca contraction (0010001000000000000000000000000000000 | Expenditure Justification | |
| Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities UB-TOTAL 9 INDIRECT COSTS - Must be entered directly on the EQUIPMENT: Only list items costing \$5,000 or more per unit and having a use | | | | Expenditure Justification | |
| Memberships/Subscriptions Advertising Printing/Reproduction Maintenance/Repairs Rental of Space Rental of Equipment Telephone/Utilities UB-TOTAL DINDIRECT COSTS - Must be entered directly on 0 EQUIPMENT: Only list items costing \$5,000 or more per unit and having a use Describe below. | | | | Expenditure Justification | |

TOTAL FYI4 FUNDS REQUESTED

14,850

\$