

Local Agency Information

Funding Source:	ESSER III Formula Funds		
Report Prepared By:	Ashley N. Benton		
Agency Name:	Brooklyn Dreams Charter School		
Mailing Address:	259 Parkville Avenue		
		Street	
	Brooklyn	NY	11230
	City	State	Zip Code
Telephone #:	616-464-2528	County:	Kings
E-Mail Address:	abenton@nhaschools.com		
Project Operation Dates:	3/13/2020		9/30/2024
	Start		End

INSTRUCTIONS

- ❖ **Submit the original 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 the Grants Finance.**
- ❖ Enter whole dollar amounts only.
- ❖ Prior approval by means of an approved budget (FS-10) or budget amendment (FS-10-A) is required for:
 - Personnel positions, number and type
 - Equipment items having a unit value of \$5,000 or more, number and type
 - Minor remodeling
 - Any increase in a budget subtotal (professional salaries, purchased services, travel, etc.) by more than 10 percent or \$1,000, whichever is greater
 - Any increase in the total budget amount.
- ❖ Certification on page 8 must be signed by Chief Administrative Officer or properly authorized designee.
- ❖ High quality computer generated reproductions of this form may be used.
- ❖ For further information on budgeting, please refer to the Fiscal Guidelines for Federal and State Aided Grants which may be accessed at www.oms.nysed.gov/cafe/ or call Grants Finance at (518) 474-4815.

SALARIES FOR PROFESSIONAL STAFF: Code 15

Include only staff that are employees of the agency. Do not include consultants or per diem staff. Do not include central administrative staff that are considered to be indirect costs, e.g., business office staff. One full-time equivalent (FTE) equals one person working an entire week each week of the project. Express partial FTE's in decimals, e.g., a teacher working one day per week equals .2 FTE.

Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Subtotal - Code 15			0

SALARIES FOR SUPPORT STAFF: Code 16

Include salaries for teacher aides, secretarial and clerical assistance, and for personnel in pupil transportation and building operation and maintenance. Do not include central administrative staff that are considered to be indirect costs, e.g., account clerks.

Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Educational technology coordinator (ETC): will support technology during remote and in-person learning.	.375 FTE	\$36,000 (at 1.0 FTE)	\$13,500 total

FS-10 Page 3

<p>Support Summer Learning Staff</p>	<p>11.1 FTE total for all summer staff.</p> <p>- \$50 per hour x 20 hours per week x 15 weeks x 1 office administrator = .5 FTE total = \$15,000</p> <p>- \$50 per hour x 20 hours per week x 15 weeks x 3 paraprofessionals = 1.5 FTE total = \$45,000</p> <p>-\$70 per hour x 24 hours per week x 1 summer learning coordinator x 6 weeks = .6 FTE total = \$10,080</p> <p>-\$70 per hour x 20 hours per week x 2 summer learning coordinators x 15 weeks = 1 FTE total = \$42,000</p> <p>-\$60 per hour x 20 hours per week x 15 teachers x 15 weeks = 7.5 FTE total = \$270,000</p>	<p>Summer learning staff will implement a summer learning program to combat the learning loss and impact of COVID-19. Staff includes coordinators, paraprofessionals, teachers, office administrators, and teachers.</p>	<p>\$382,080 total</p>
<p>Subtotal - Code 16</p>			<p>\$395,580</p>

PURCHASED SERVICES: Code 40

Include consultants (indicate per diem rate), rentals, tuition, and other contractual services. Copies of contracts may be requested by the State Education Department. Purchased Services from a BOCES, if other than applicant agency, should be budgeted under Purchased Services with BOCES, Code 49.

Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
HVAC filters to improve the air quality in the building and to reduce the spread of COVID-19. Cost is for the filter and the installation.	National Heritage Academies	\$877.192 per filter x 19 filters x 3 years	\$50,000 total
Sanitation work and supplies to prevent the spread of COVID-19.	National Heritage Academies	\$2,083.33 per month x 36 months	\$75,000 total
Contracted tutoring services to combat the learning loss and impact of COVID-19. Costs are for three years.	National Heritage Academies	\$333,333.33 per year x 3 year (\$442.67 per student x 753 students per year)	\$1,000,000 total
Digital subscriptions for online and remote learning as well as to be used in-person to combat the learning loss and impact of COVID-19.	National Heritage Academies	\$200,000 for digital subscription costs. Will be purchased over the course of the grant project period based on student need. Average cost per student on digital subscriptions will be \$265.60 per student x 753 students. Subscriptions will include DreamBox, Lexia, and Learning.com.	\$200,000 total for digital subscription costs

FS-10 Page 5

Hotspot devices for remote learning due to COVID-19.	283 Hotspot devices	\$300 per hotspot x 283 hotspot devices.	\$84,900 total
Subtotal - Code 40			\$1,409,900

SUPPLIES AND MATERIALS: Code 45

Beginning with the 2005-06 year include computer software, library books and equipment items under \$5,000 per unit.

For earlier years include computer software, library books and equipment items under 1,000 per unit.

Description of Item	Quantity	Unit Cost	Proposed Expenditure
Chromebooks including headphones and protective cases were needed to meet a 1:1 device for students to participate in remote learning. Charging stations, charging cords, calculators, adapters, and extension cords may also be purchased when in-person instruction resumes to reduce the sharing of items to prevent the spread of COVID-19.	Chromebooks x 600 Calculators x 100 Headphones x 494 Device cases x 500 Charging cords x 500	\$350.10 per Chromebook x 600 =\$210,060 \$95 per calculator x 100 = \$9,500 \$10 per headphone x 494 = \$4,940 \$26 per case x 500 =\$13,000 \$25 per charging cord x 500 = \$12,500 Quantities may change based on need.	\$250,000 total
Hotspot monthly connectivity for remote learning due to COVID-19.	283 Hotspot monthly connectivity	\$100.462 annually for hotspot connectivity per device x 283 devices. Connectivity costs vary based on usage.	\$28,431 total

FS-10 Page 6

Summer learning supplies and materials will be used in the summer learning program to combat the learning loss of COVID-19.	\$16,666.67 per summer learning program x 3 summers (\$22.13 per student x 753 students per summer)	Student workbook x \$22.13 x 753 workbooks per summer learning program x 3 summers	\$50,000 total
COVID-19 signage, PPE, COVID tests, masks, sanitizer, disinfecting wipes, sneeze guards, thermometers, gloves, and social distance markers.	PPE costs for 753 students and 100 staff	\$351.69 per staff x 100 = \$35,169 \$351.70 per student x 753 = \$264,831	\$300,000 total
Subtotal - Code 45			\$628,431

TRAVEL EXPENSES: Code 46

Include pupil transportation, conference costs and travel of staff between instructional sites. Specify agency approved mileage rate for travel by personal car or school-owned vehicle.

Position of Traveler	Destination and Purpose	Calculation of Cost	Proposed Expenditures
Subtotal - Code 46			

EMPLOYEE BENEFITS: Code 80

Rates used for project personnel must be the same as those used for other agency personnel.

Benefit		Proposed Expenditure
Social Security/FICA		\$11,867
Retirement	New York State Teachers	\$0
	New York State Employees	\$0
	Other	\$0
Health Insurance		\$3,746
Worker's Compensation		\$1,701
Unemployment Insurance		\$0
Other (Identify)		\$0
401k/Retirement		\$30,262
Life & Disability		\$2,492
Medicare		\$0
FUTA/SUTA		\$14,899
Dental Insurance		\$278
NY Transfer Tax		\$0
Subtotal – Code 80		\$65,245

INDIRECT COST: Code 90

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)

\$	25,000	(A)
	2.6 %	(B)
\$	650	(C)

B. Approved Restricted Indirect Cost Rate

C. (A) x (B) = Total Indirect Cost

Subtotal – Code 90

PURCHASED SERVICES WITH BOCES: Code 49

Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure
Subtotal – Code 49			

MINOR REMODELING: Code 30

Allowable costs include salaries, associated employee benefits, purchased services, and supplies and materials related to alterations to existing sites.

Description of Work To be Performed	Calculation of Cost	Proposed Expenditure
Subtotal – Code 30		

EQUIPMENT: Code 20

Beginning with the 2005-06 year all equipment to be purchased in support of this project with a unit cost of \$5,000 or more should be itemized in this category. Equipment items under \$5,000 should be budgeted under Supplies and Materials, Code 45. Repairs of equipment should be budgeted under Purchased Services, Code 40.

For earlier years the threshold for reporting equipment purchases was \$1,000 or more. Equipment items under \$1,000 should be budgeted under Supplies and Materials.

Description of Item	Quantity	Unit Cost	Proposed Expenditure
Subtotal – Code 20			

HELPFUL REMINDERS

- ❖ Check for the required number of copies to be submitted, including the number of original signature copies. The number of copies may vary from program to program. If unsure, contact the State Education Department office responsible for the program for which you are applying.
- ❖ An approved copy of the FS-10 will be returned to the contact person at the address completed on page 1. A window envelope will be used for the return mailing; please make sure that the contact information is accurate, legible, and confined to the address field.
- ❖ Be sure to check your math and carry all subtotals forward to the Summary on Page 8. Simple mathematical errors often require Grants Finance to contact both the local agency and other State Education Department offices, resulting in unnecessary delays in program approval. And remember, use whole dollars only.
- ❖ School districts and BOCES should use the restricted indirect cost rate that has been approved for the school year in which the grant will operate. Most other agencies are subject to a fixed maximum rate depending on the grant program and type of agency. Contact Grants Finance at (518) 474-4815 if you have any questions regarding indirect costs.
- ❖ The modified direct cost used in the calculation of indirect cost must exclude equipment, minor remodeling, the portion of each subcontract exceeding \$25,000 and any flow through funds.
- ❖ Be sure to complete the Agency Code on Page 8 as well as the Project #, if pre-assigned.
- ❖ For Special Legislative projects and Grant Contracts, please enter the Contract #.
- ❖ For ease of data entry at the State Education Department, please make sure that Page 8 faces out.
- ❖ Submit forms to the State Education Department as follows:

Application, FS-10, FS-10-A – Program Office

FS-25, FS-10-F for **Special Legislative Projects** –
Special Legislative Projects Coordinating Team
New York State Education Department
Room 132 Education Building
Albany, New York 12234

FS-25, FS-10-F for other projects –
Grants Finance
New York State Education Department
Room 510W Education Building
Albany, New York 12234

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$0
Support Staff Salaries	16	\$395,580
Purchased Services	40	\$1,409,900
Supplies and Materials	45	\$628,431
Travel Expenses	46	\$0
Employee Benefits	80	\$65,245
Indirect Cost	90	\$650
BOCES Services	49	\$0
Minor Remodeling	30	\$0
Equipment	20	\$0
Grand Total		\$2,499,806

Agency Code:

Project #: (If pre-assigned)

Contract #:

Federal Employer ID #: (New non-municipal agencies only)

Agency Name: Brooklyn Dreams Charter School

FOR DEPARTMENT USE ONLY

Funding Dates: _____ / _____ / _____ From _____ / _____ To _____

Program Approval: _____ Date: _____

<u>Fiscal Year</u>	<u>Amount Budgeted</u>	<u>First Payment</u>
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Voucher #
First Payment

Finance:

Log
Approved
MIR

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**