

## Specialized Secondary Programs (SSP) Grant Budget (Form C)

### General Information

Local Educational Agency (LEA) Name

14-digit County-District-School (CDS) Code

School Name

Principal's Name

Specialized Secondary Programs (SSPs) Name

SSP Lead Teacher's Name

Grant Amount Requested

LEA Fiscal Contact's Name

### Budget

Budget Category	SSP Grant Funds	LEA/Site Funds (cash or in-kind)	Private/Public Funds (cash or in-kind)	Budget Item Totals
1000 Certificated Salaries				
2000 Classified Salaries				
3000 Employee Benefits				
4000 Books and Supplies ( <b>\$3,500 maximum</b> )				
5000 Services and Other Operating Expenses (other than Travel)				
5200 Travel and Conferences				
6000 Capital Outlay				
7000 Indirect Costs (California Department of Education approved rates apply)				
<b>Totals</b>				

The site principal, SSP lead teacher, and LEA fiscal contact are required to sign and date this form in the spaces provided below. Signees are also required to review the Budget Narrative Form D.

**Signature of Principal**

**Date**

**Signature of SSP Lead Teacher**

**Date**

**Signature of LEA Fiscal Contact**

**Date**