Attachment 6

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**Budget Justification - EXAMPLE** (Please follow this format)

Insert Applicant/Lead Local Educational Agency

Insert County/District/School Code

2019–2022 Cohort 3 Grant Application

## Year 1

**1000 – Certificated Salaries $ TOTAL AMOUNT**

Insert Title, Insert Name

Insert a brief description of the individual's role/responsibilities.

$ Annual Salary / 12 Months = $ Monthly Salary

Monthly Salary x FTE Number of Months = $ Budgeted Salary Amount

Insert Title, Insert Name

Insert a brief description of the individual's role/responsibilities.

$ Annual Salary / 12 Months = $ Monthly Salary

Monthly Salary x FTE Number of Months = $ Budgeted Salary Amount

**2000 – Classified Salaries (IF APPLICABLE) $ TOTAL AMOUNT**

Insert Title, Insert Name

Insert a brief description of the individual's role/responsibilities.

$ Annual Salary / 12 Months = $ Monthly Salary

Monthly Salary x FTE Number of Months = $ Budgeted Salary Amount

-OR-

$ Hourly Rate x Number of Hours = $ Budgeted Salary Amount

**3000 – Benefits $ TOTAL AMOUNT**

Insert Title, Insert Name

Insert a brief description of the benefits covered by this contract.

Certificated Salaries

$ Budgeted Salary Amount x Benefit % = $ Budgeted Benefit Amount

Classified Salaries

$ Budgeted Salary Amount x Benefit % = $ Budgeted Benefit Amount

**4200 – Books and Other Reference Material $ TOTAL AMOUNT**

Insert a brief description of the, books and other reference material to be purchased.

**4300 – Materials and Supplies $ TOTAL AMOUNT**

Insert a brief description of the, materials and supplies to be purchased.

**4400 – Noncapitalized Equipment $ TOTAL AMOUNT**

Insert a brief description of the, Noncapitalized Equipment to be purchased.

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**5100 – Subagreements for Services $ TOTAL AMOUNT**

Insert a brief description of the, Subagreements for Services (Amounts over $25,000 per subagreement) to purchased.

**5200 – Travel and Conferences $ TOTAL AMOUNT**

Insert a brief description of the, Travel and Conferences to purchased.

Insert a brief description of the including travel and conferences to be purchased, including lodging, mileage, and per diem. All travel to be paid at state rates.

Insert travel calculations for each travel instance-

# of Staff x # of Nights x $ Amount / Night = $ Travel Total

**5600 – Rentals, Leases, Repairs, and Noncapitalized Improvements**

 **$ TOTAL AMOUNT**

Insert a brief description of the rentals, leases, repairs, and noncapitalized improvements to be purchased.

**5700 – Interprogram Services $ TOTAL AMOUNT**

Insert a brief description of the Interprogram Services related to contract activities.

**5800-0000 – Noninstructional Consultant Services $ TOTAL AMOUNT**

Insert a brief description of the Noninstructional Consultant Services related to contract activities.

**5800-1000 – Instructional Consultant Services $ TOTAL AMOUNT**

Insert a brief description of the instructional Consultant Services related to contract activities.

**7000 – Total Direct Costs $ TOTAL AMOUNT**

**7000 – Year 1 Indirect Cost at \_\_\_\_\_ % $ TOTAL AMOUNT**

**5100 – Subagreements for Services $ TOTAL AMOUNT**

Insert a brief description of the Subagreements for Services related to contract activities.

**Total Budget – Year 1 $ TOTAL AMOUNT**

**In-Kind Funds or Services $ TOTAL AMOUNT**

Insert a clear description of the Local Educational Agency’s minimum 20 percent match requirement (RFA, p. 28).

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## Year 2

**1000 – Certificated Salaries $ TOTAL AMOUNT**

Insert Title, Insert Name

Insert a brief description of the individual's role/responsibilities.

$ Annual Salary / 12 Months = $ Monthly Salary

Monthly Salary x FTE Number of Months = $ Budgeted Salary Amount

Insert Title, Insert Name

Insert a brief description of the individual's role/responsibilities.

$ Annual Salary / 12 Months = $ Monthly Salary

Monthly Salary x FTE Number of Months = $ Budgeted Salary Amount

**2000 – Classified Salaries (IF APPLICABLE) $ TOTAL AMOUNT**

Insert Title, Insert Name

Insert a brief description of the individual's role/responsibilities.

$ Annual Salary / 12 Months = $ Monthly Salary

Monthly Salary x FTE Number of Months = $ Budgeted Salary Amount

-OR-

$ Hourly Rate x Number of Hours = $ Budgeted Salary Amount

**3000 – Benefits $ TOTAL AMOUNT**

Insert Title, Insert Name

Insert a brief description of the benefits covered by this contract.

Certificated Salaries

$ Budgeted Salary Amount x Benefit % = $ Budgeted Benefit Amount

Classified Salaries

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**4300 – Materials and Supplies $ TOTAL AMOUNT**

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**4400 – Noncapitalized Equipment $ TOTAL AMOUNT**

Insert a brief description of the, Noncapitalized Equipment to be purchased.

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**5100 – Subagreements for Services $ TOTAL AMOUNT**

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**5200 – Travel and Conferences $ TOTAL AMOUNT**

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**5800-0000 – Noninstructional Consultant Services $ TOTAL AMOUNT**

Insert a brief description of the Noninstructional Consultant Services related to contract activities.

**5800-1000 – Instructional Consultant Services $ TOTAL AMOUNT**

Insert a brief description of the instructional Consultant Services related to contract activities.

**7000 – Total Direct Costs $ TOTAL AMOUNT**

**7000 – Year 2 Indirect Cost at \_\_\_\_\_ % $ TOTAL AMOUNT**

**5100 – Subagreements for Services $ TOTAL AMOUNT**

Insert a brief description of the Subagreements for Services related to contract activities.

**Total Budget – Year 2 $ TOTAL AMOUNT**

**In-Kind Funds or Services $ TOTAL AMOUNT**

Insert a clear description of the Local Educational Agency’s minimum 20 percent match requirement (RFA, p. 28).

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## Year 3

**1000 – Certificated Salaries $ TOTAL AMOUNT**

Insert Title, Insert Name

Insert a brief description of the individual's role/responsibilities.

$ Annual Salary / 12 Months = $ Monthly Salary

Monthly Salary x FTE Number of Months = $ Budgeted Salary Amount

Insert Title, Insert Name

Insert a brief description of the individual's role/responsibilities.

$ Annual Salary / 12 Months = $ Monthly Salary

Monthly Salary x FTE Number of Months = $ Budgeted Salary Amount

**2000 – Classified Salaries (IF APPLICABLE) $ TOTAL AMOUNT**

Insert Title, Insert Name

Insert a brief description of the individual's role/responsibilities.

$ Annual Salary / 12 Months = $ Monthly Salary

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$ Hourly Rate x Number of Hours = $ Budgeted Salary Amount

**3000 – Benefits $ TOTAL AMOUNT**

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Insert a brief description of the Interprogram Services related to contract activities.

**5800-0000 – Noninstructional Consultant Services $ TOTAL AMOUNT**

Insert a brief description of the Noninstructional Consultant Services related to contract activities.

**5800-1000 – Instructional Consultant Services $ TOTAL AMOUNT**

Insert a brief description of the instructional Consultant Services related to contract activities.

**7000 – Total Direct Costs $ TOTAL AMOUNT**

**7000 – Year 3 Indirect Cost at \_\_\_\_\_ % $ TOTAL AMOUNT**

**5100 – Subagreements for Services $ TOTAL AMOUNT**

Insert a brief description of the Subagreements for Services related to contract activities.

**Total Budget – Year 3 $ TOTAL AMOUNT**

**In-Kind Funds or Services $ TOTAL AMOUNT**

Insert a clear description of the Local Educational Agency’s minimum 20 percent match requirement (RFA, p. 28).

California Department of Education 1/17/19