Attachment 4B

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# **Budget Justification – Template**

(Please follow this format)

Insert Applicant/Lead Local Educational Agency

Insert County/District/School Code

2021–24 Cohort 5 Grant Application

## Year 1

**1000 – Certificated Salaries $ [Enter/Insert Total amount] I**nsert Title, Insert Name

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

$ Annual Salary / 12 Months = $ Monthly Salary

Monthly Salary x Full Time Equivalent (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 $ [Enter/Insert 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 $ [Enter/Insert 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 $ [Enter/Insert Total amount]**

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

**4300 – Materials and Supplies $ [Enter/Insert Total amount]**

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

**4400 – Noncapitalized Equipment $ [Enter/Insert Total amount]**

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

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**5100 – Subagreements for Services $ [Enter/Insert Total amount]**

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

**5200 – Travel and Conferences $ [Enter/Insert Total amount]**

Insert a brief description of the 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**

 **$ [Enter/Insert Total amount]**

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

**5700 – Interprogram Services $ [Enter/Insert Total amount]**

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

**5800-0000 – Noninstructional Consultant Services $ [Enter/Insert Total amount]**

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

**5800-1000 – Instructional Consultant Services $ [Enter/Insert Total amount]**

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

**7000 – Total Direct Costs $ [Enter/Insert Total amount]**

**7000 – Year 1 Indirect Cost % [Enter Percentage] $ [Enter/Insert Total amount]**

**5100 – Subagreements for Services $ [Enter/Insert Total amount]**

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

**Total Budget – Year 1 $ [Enter/Insert Total amount]**

**In-Kind Funds or Services $ [Enter/Insert Total amount]**

Insert a clear description and value of the Local Educational Agency’s minimum 20 percent match requirement.

Attachment 4B

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## Year 2

**1000 – Certificated Salaries $ [Enter/Insert 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 $ [Enter/Insert 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 $ [Enter/Insert 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 $ [Enter/Insert Total amount]**

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

**4300 – Materials and Supplies $ [Enter/Insert Total amount]**

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

**4400 – Noncapitalized Equipment $ [Enter/Insert Total amount]**

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

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**5100 – Subagreements for Services $ [Enter/Insert Total amount]**

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

**5200 – Travel and Conferences $ [Enter/Insert Total amount]**

Insert a brief description of the 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**

 **$ [Enter/Insert Total amount]**

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

**5700 – Interprogram Services $ [Enter/Insert Total amount]**

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

**5800-0000 – Noninstructional Consultant Services $ [Enter/Insert Total amount]**

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

**5800-1000 – Instructional Consultant Services $ [Enter/Insert Total amount]**

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

**7000 – Total Direct Costs $ [Enter/Insert Total amount]**

**7000 – Year 2 Indirect Cost % [Enter Percentage] $ [Enter/Insert Total amount]**

**5100 – Subagreements for Services $ [Enter/Insert Total amount]**

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

**Total Budget – Year 2 $ [Enter/Insert Total amount]**

**In-Kind Funds or Services $ [Enter/Insert Total amount]**

Insert a clear description and value of the Local Educational Agency’s minimum 20 percent match requirement.

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## Year 3

**1000 – Certificated Salaries $ [Enter/Insert 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 $ [Enter/Insert 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 $ [Enter/Insert 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 $ [Enter/Insert Total amount]**

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

**4300 – Materials and Supplies $ [Enter/Insert Total amount]**

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

**4400 – Noncapitalized Equipment $ [Enter/Insert Total amount]**

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

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**5100 – Subagreements for Services $ [Enter/Insert Total amount]**

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

**5200 – Travel and Conferences $ [Enter/Insert Total amount]**

Insert a brief description of the 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**

 **$ [Enter/Insert Total amount]**

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

**5700 – Interprogram Services $ [Enter/Insert Total mount]**

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

**5800-0000 – Noninstructional Consultant Services $ [Enter/Insert Total amount]**

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

**5800-1000 – Instructional Consultant Services $ [Enter/Insert Total amount]**

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

**7000 – Total Direct Costs $ [Enter/Insert Total amount]**

**7000 – Year 3 Indirect Cost % [Enter Percentage] $ [Enter/Insert Total amount]**

**5100 – Subagreements for Services $ [Enter/Insert Total amount]**

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

**Total Budget – Year 3 $ [Enter/Insert Total amount]**

**In-Kind Funds or Services $ [Enter/Insert Total amount]**

Insert a clear description and value of the Local Educational Agency’s minimum 20 percent match requirement.

California Department of Education December 2020