

The University of the State of New York
THE STATE EDUCATION DEPARTMENT

**PROPOSED BUDGET FOR A
FEDERAL OR STATE PROJECT
FS-10 (03/15)**

= Required Field

Local Agency Information

Funding Source:	ARP-ESSER		
Report Prepared By:	Ron Clamser, Jr.		
Agency Name:	Dobbs Ferry Union Free School District		
Mailing Address:	505 Broadway		
	Street		
	Dobbs Ferry	NY	10522
	City	State	Zip Code
Telephone # of Report Preparer:	(914) 693-1500	County:	Westchester
E-mail Address:	clamser@dfsd.org		
Project Funding Dates:	3/13/2020	9/30/2024	
	Start	End	

INSTRUCTIONS

- Submit the original FS-10 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 Grants Finance.
- The Chief Administrator's Certification on the Budget Summary worksheet must be signed by the agency's Chief Administrative Officer or properly authorized designee.
- An approved copy of the FS-10 Budget will be returned to the contact person noted above. A window envelope will be used; please make sure that the contact information is accurate and confined to the address field without altering the formatting.
- For information on budgeting refer to the Fiscal Guidelines for Federal and State Aided Grants at <http://www.oms.nysed.gov/cafe/guidance/>.

SALARIES FOR PROFESSIONAL STAFF			
Subtotal - Code 15			\$397,983
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
School Psychologist (SY 21-22)	1.00	\$82,656	\$82,656
School Psychologist (SY 22-23)	1.00	\$86,000	\$86,000
School Psychologist (SY 23-24)	1.00	\$89,346	\$89,346
Summer Academic Enrichment (2021)	0.10	\$85,786	\$8,579
Summer Academic Enrichment (2022)	0.10	\$87,502	\$8,750
Summer Academic Enrichment (2023)	0.10	\$89,252	\$8,925
Summer Academic Enrichment (2024)	0.10	\$91,037	\$9,104
ELA and Math Academies (SY 21-22)	0.30	\$85,786	\$25,736
ELA and Math Academies (SY 22-23)	0.30	\$87,502	\$26,251
ELA and Math Academies (SY 22-23)	0.30	\$89,252	\$26,776
Teaching Assistant (SY 21-22)	1.00	\$25,861	\$25,861

PURCHASED SERVICES			
Subtotal - Code 40			\$38,360
Description of Item	Provider of Services	Calculation of Cost	Proposed Expenditure
Behavior Intervention Monitoring Assessment System (SY 21-22)	EduMetrisis, LLC	\$4.00/student	\$6,120
Behavior Intervention Monitoring Assessment System (SY 22-23)	EduMetrisis, LLC	\$4.00/student	\$6,120
Behavior Intervention Monitoring Assessment System (SY 23-24)	EduMetrisis, LLC	\$4.00/student	\$6,120
Research-based SPACE framework for students including strategies to promote well-being and engagement	Challenge Success	annual	\$20,000

Employee Benefits		
Subtotal - Code 80		\$116,436
Benefit		Proposed Expenditure
Social Security		\$30,869
Retirement	New York State Teachers	\$47,805
	New York State Employees	
	Other - Pension	
Health Insurance		\$37,762
Worker's Compensation		
Unemployment Insurance		
Other(Identify)		

PURCHASED SERVICES WITH BOCES			
Subtotal - Code 49			\$22,500
Description of Services	Name of BOCES	Calculation of Cost	Proposed Expenditure
Panorama Student/parent/staff survey instrument for SEL measures (SY 21-22)	PNW BOCES	annual	\$7,500
Panorama Student/parent/staff survey instrument for SEL measures (SY 22-23)	PNW BOCES	annual	\$7,500
Panorama Student/parent/staff survey instrument for SEL measures (SY 23-24)	PNW BOCES	annual	\$7,500

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$397,983
Support Staff Salaries	16	
Purchased Services	40	\$38,360
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	\$116,436
Indirect Cost	90	
BOCES Services	49	\$22,500
Minor Remodeling	30	
Equipment	20	
Grand Total		\$575,279

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).

9/21/21

Date



Signature

LISA BRACK SUPERINTENDENT

Name and Title of Chief Administrative Officer

Agency Code:

660403030000

Project #:

5880-21-3645

Contract #:

Agency Name:

Dobbs Ferry Union Free School District

FOR DEPARTMENT USE ONLY

Funding Dates:

From

To

Program Approval:

Date:

Fiscal YearFirst PaymentLine #

Voucher #

First Payment

Finance: Logged _____

Approved _____

MIR _____