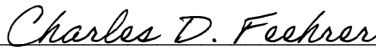


**Florida Department of Education
Project Award Notification**

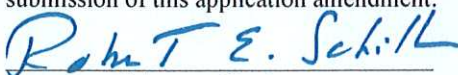
1 PROJECT RECIPIENT Brevard County School District	2 PROJECT NUMBER 050-1241V-2CR01	
3 PROJECT/PROGRAM TITLE Career Dual Enrollment Pathways Expansion (CTE Dual Enrollment) - CRRSA ESSER II <p align="right">TAPS 22B112</p>	4 AUTHORITY 84.425D CRSSA ESSER II USDE or Appropriate Agency FAIN#: S425D210052	
5 AMENDMENT INFORMATION Amendment Number: 5 Type of Amendment: Budgetary Effective Date: 03/28/2023	6 PROJECT PERIODS Budget Period: 01/01/2022 - 09/30/2023 Program Period: 01/01/2022 - 09/30/2023	
7 AUTHORIZED FUNDING Current Approved Budget: \$578,230.00 Amendment Amount: Estimated Roll Forward: Certified Roll Amount: Total Project Amount: \$578,230.00	8 REIMBURSEMENT OPTION Federal Cash Advance	
9 TIMELINES <ul style="list-style-type: none"> Last date for incurring expenditures and issuing purchase orders: <u>09/30/2023</u> Date that all obligations are to be liquidated and final disbursement reports submitted: <u>11/20/2023</u> Last date for receipt of proposed budget and program amendments: <u>08/31/2023</u> Refund date of unexpended funds; mail to DOE Comptroller, 325 W. Gaines Street, 944 Turlington Building, Tallahassee, Florida 32399-0400: Date(s) for program reports: Federal Award Date : <u>01/05/2021</u> 		
10 DOE CONTACTS Program: Lauren Wade Phone: (850) 245-0080 Email: Lauren.Wade@fldoe.org Grants Management: Unit B (850) 245-0735	Comptroller Office Phone: (850) 245-0401 UEI#: M2CKC5FG3MD6 FEIN#: F596000522003	
11 TERMS AND SPECIAL CONDITIONS <ul style="list-style-type: none"> This project and any amendments are subject to the procedures outlined in the <u>Project Application and Amendment Procedures for Federal and State Programs</u> (Green Book) and the General Assurances for Participation in Federal and State Programs and the terms and requirements of the Request for Proposal or Request for Application, RFP/RFA, hereby incorporated by reference. For federal cash advance projects, expenditures must be recorded in the Florida Grants System (FLAGS) as close as is administratively feasible to when actual disbursements are made for this project. Cash transaction requests must be limited to amounts needed and be timed with the actual, immediate cash requirements to carry out the purpose of the approved project. All provisions not in conflict with any amendment(s) are still in full force and effect and are to be performed at the level specified in the project award notification. The Department's approval of this contract/grant does not excuse compliance with any law. Other: 		
12 APPROVED: <div style="display: flex; justify-content: space-between; align-items: flex-end;"> <div style="text-align: center;">  Authorized Official on behalf of the Commissioner of Education </div> <div style="text-align: center;"> <u>4/07/2023</u> Date of Signing </div> <div style="text-align: right;">  <small>FLORIDA DEPARTMENT OF EDUCATION fldoe.org</small> </div> </div>		

**INSTRUCTIONS
PROJECT AWARD NOTIFICATION**

- 1** Project Recipient: Agency, Institution or Non-Governmental entity to which the project is awarded.
- 2** Project Number: This is the agency number, grant number, and project code that must be used in all communication. (Projects with multiple project numbers will have a separate DOE-200 for each project number).
- 3** Project Description: Title of program and/or project. TAPS #: Departmental tracking number.
- 4** Authority: Federal Grants - Public Law or authority and CFDA number. State Grants - Appropriation Line Item Number and/or applicable statute and state identifier number.
- 5** Amendment Information: Amendment number (consecutively numbered), type (programmatic, budgeting, time extension or others) in accordance with the Project Application and Amendment Procedures for Federal and State Programs (Green Book), and effective date.
- 6** Project Periods: The periods for which the project budget and program are in effect.
- 7** Authorized Funding: Current Approved Project (total dollars available prior to any amendments); Amendment Amount (total amount of increase or decrease in project funding); Estimated Roll Forward (roll forward funds which have been estimated into this project); and Total Project Amount (total dollars awarded for this project).
- 8** Reimbursement Options:
 - Federal Cash Advance –On-Line Reporting required monthly to record expenditures.
 - Advance Payment – Upon receipt of the Project Award Notification, up to 25% of the total award may be advanced for the first payment period. To receive subsequent payments, 90% of previous expenditures must be documented and approved by the Department.
 - Quarterly Advance to Public Entity – For quarterly advances of non-federal funding to state agencies and LEAs made in accordance within the authority of the General Appropriations Act. Expenditures must be documented and reported to DOE at the end of the project period. If audited, the recipient must have expenditure detail documentation supporting the requested advances.
 - Reimbursement with Performance - Payment made upon submission of documented allowable expenditures, plus documentation of completion of specified performance objectives.
- 9** Timelines: Date requirements for financial and program reporting/requests to the Department of Education.
- 10** DOE Contacts: Program contact for program issues, Grants Management Unit for processing issues, and Comptroller's Office number for payment information.
- 11** Terms and Special Conditions: Listed items apply to this project. (Additional space provided on Page 2 of 2 if needed.)
- 12** Approved: Approval signature from the Florida Department of Education and the date signature was affixed.

FLORIDA DEPARTMENT OF EDUCATION

PROJECT AMENDMENT REQUEST

Please return to: Florida Department of Education Office of Grants Management Room 332 Turlington Building 325 West Gaines Street Tallahassee, Florida 32399-0400 Telephone: (850) 245-0735	A) Agency Name: Brevard County School Board	DOE USE ONLY Date Received <p style="text-align: center; font-size: 1.2em;">3/28/2023</p>
B) Program Name: <u>Career Dual Enrollment Expansion Grant</u> TAPS Number: <u>22B112</u>		Project Number (DOE Assigned) *050-1241V-2CR01 050-1241V-2CR01
C) Amendment Type <input type="checkbox"/> Program <input checked="" type="checkbox"/> Budget Amendment Number: 5	D) Amendment Request Contact Information	
	Contact Name: Rachel Rutledge, CTE Director	Telephone Numbers: 321-633-1000 x 11380
	Mailing Address: 2700 Judge Fran Jamieson Way Viera Fl. 32940	E-mail Addresses: Rutledge.Rachel@brevardschools.org
E) Required Signature and Certification		
<p>I, <u>Robert E. Schiller, Ed.D.</u>, (<i>Please Type Name</i>) as the official who is authorized to legally bind the agency/organization, do hereby certify to the best of my knowledge and belief that all the information and attachments submitted in this application amendment are true, complete and accurate, for the purposes, and objectives, set forth in the RFA or RFP and are consistent with the statement of general assurances and specific programmatic assurances for this project. I am aware that any false, fictitious or fraudulent information or the omission of any material fact may subject me to criminal, or administrative penalties for the false statement, false claims or otherwise. Furthermore, all applicable statutes, regulations, and procedures; administrative and programmatic requirements; and procedures for fiscal control and maintenance of records will be implemented to ensure proper accountability for the expenditure of funds on this project. All records necessary to substantiate these requirements will be available for review by appropriate state and federal staff. I further certify that all expenditures will be obligated on or after the effective date and prior to the termination date of the project. Disbursements will be reported only as appropriate to this project, and will not be used for matching funds on this or any special project, where prohibited.</p> <p>Further, I understand that it is the responsibility of the agency head to obtain from its governing body the authorization for the submission of this application amendment.</p>		
 Signature of Agency Head	<u>Interim Superintendent</u> Title	<u>3/28/23</u> Date
F) Narrative		
Brevard Public Schools' allocation for the Career Dual Enrollment Expansion Grant is \$578,230. This amendment will increase instructional materials, contracted services, and student transportation, decrease mileage, dues and fees, substitutes and fringe, fingerprinting costs, and FF&E. The amendment will also address charter school changes in needs and address an incorrect object code.		

FLORIDA DEPARTMENT OF EDUCATION BUDGET AMENDMENT NARRATIVE FORM

A) Brevard
District/Agency Name

B) ~~050-1241V-2CR01~~ 050-1241V-2CR01
Project Number/TAPS Number

C) 5
Amendment Number

D) Total Project Amount Currently Approved

E) Total Project Amount resulting from this Budget Amendment

\$ **578,230.00**

\$ **578,230.00**

F) Line Item Description

Function	Object	Account Title and Narrative	FTE	Amount Increase	Amount Decrease
5300	520	Instructional materials for dual enrollment courses and CTE courses that lead to career dual enrollment opportunities. NOTE: Add \$13,346 from instructional materials.		\$ 13,346.00	
5300	360	Technology subscription for CTE courses leading to career dual enrollment opportunities.		\$ 900.00	
5300	310	Contracted services for professional development to train teachers on technology that leads to career dual enrollment opportunities.		\$ 1,620.00	
5300	330	Mileage for instructors to visit students at their clinical/internship sites throughout the district. Mileage shall be reimbursed according to the District's travel procedures. Mileage estimate based on .585 cents per mile, average miles to placement site: 15 miles, expected number of students: 90. (.585 x 15 miles)= \$8.40 (x 2 for round trip)= \$17.55. \$17.55 x 90 students= \$1579.50 x 20 visits/year = \$31,590 NOTE: Remove \$5,700.00 out of mileage.			\$ 5,700.00
5100	730	Dues and Fees for students for Career Dual Enrollment. <u>Remove: tuition for FIT and EFSC. Paid out of another funding stream. Add fees for healthcare students.</u>			\$ 12,600.00
5300	140	Substitutes for CTE educators to attend CTE career dual enrollment activities with students such as clinical experiences and field trips (30 subs @ \$125/day)			\$ 2,800.00
5300	220	Social Security (7.65%) for Substitutes			\$ 250.00
9100	310	Private transportation/ride share services for students to clinical experiences or postsecondary experiences.		\$ 15,000.00	
5300	790	Required fingerprinting costs for students in career dual enrollment programs			\$ 7,500.00
5300	730	Required fingerprinting costs for students in career dual enrollment programs. NOTE: wrong object code per district guidelines		\$ 7,500.00	
5300	730	Required fingerprinting costs for students in career dual enrollment programs. NOTE: overbudgeted			\$ 5,000.00

5300	640	FF&E developing, implementing, and or improving sequential CTE programs and enhancing existing career and technical education programs that link high school with postsecondary career and technical education. Note: Remove \$4,516 due to overbudgeting			\$ 4,516.00
Total \$ 38,366.00					\$ 38,366.00

DOE 151
 Revised July 2022

