Florida Department of Education Project Award Notification

	Project A	A wa	rd Notification						
1	PROJECT RECIPIENT	2	PROJECT NUMBER						
	Brevard County School District		050-1211A-2C001						
3	PROJECT/PROGRAM TITLE	4							
	ARP ESSER III Formula Grants to LEAs		84.425U ARP ESSER						
			USDE or Appropriate Agen	cy					
	TAPS 22A175								
			FAIN #: S425U210052						
5	AMENDMENT INFORMATION	6	PROJECT PERIODS						
	Amendment Number: 2								
	Type of Amendment: Program/Budget		Budget Period: 12/02/2021 - 0						
	Effective Date: 09/02/2022		Program Period: 12/02/2021 -						
7	AUTHORIZED FUNDING	8	REIMBURSEMENT OPTION	ON					
	Current Approved Budget: \$115,460,231.00		Federal Cash Advance						
	Amendment Amount:								
	Estimated Roll Forward:								
	Certified Roll Amount:								
	Total Project Amount: \$115,460,231.00								
9	TIMELINES								
	Last date for incurring expenditures and issuing			09/30/2024					
			-						
		t date for receipt of proposed budget and program amendments: 11/20/2024 08/31/2024 11/20/2024 08/31/2024 11/20/2024 11/							
	•		•	Ξ ,					
	944 Turlington Building, Tallahassee, Florida 3	239	9-0400:						
	• Date(s) for program reports:								
	• Federal Award Date :			03/24/2021					
10	DOE CONTACTS		Comptroller Office	UEI#: M2CKC5FG3MD6					
	Program: Amanda Meeks		Phone : (850) 245-0401	FEIN# : F596000522003					
	Phone: (850) 245-0906								
	Email: Amanda.Meeks@fldoe.org								
11	Grants Management: Unit A (850) 245-0735								
11	TERMS AND SPECIAL CONDITIONS	1.							
•	This project and any amendments are subject to the profor Federal and State Programs (Green Book) and the G								
	the terms and requirements of the Request for Proposal								
•	For federal cash advance projects, expenditures must b administratively feasible to when actual disbursements								
	amounts needed and be timed with the actual, immedia								
	<u> </u>		ion requirements to complete the pu	apose of the approved project					
•	All provisions not in conflict with any amendment(s) as	re sti	ill 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 e	excuse compliance with any law.						
•	Other:								
	A PAPA CA WAR								
12	APPROVED:			FLORIDA DEPARTMENT OF					
	Margaret Aune	9	/26/2022	EDUCATION					
	Authorized Official on behalf of the	Date of Signing							
	Authorized Official on behalf of the Date of Signing								

Commissioner of Education

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 <u>Project Application and Amendment Procedures for Federal and State Programs</u> (Green Book), and effective date.
- 6 Project Periods: The periods for which the project budget and program are in effect.
- 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.

DOE-200 Revised 07/15

Florida Department of Education Project Award Notification

	1 Toject A	Awaru Nouncauon						
1	PROJECT RECIPIENT	2 PROJECT NUMBER						
	Brevard County School District	050-1211K-2C001						
3	PROJECT/PROGRAM TITLE	4 AUTHORITY						
	ARP ESSER III - Formula Grant to LEAs -	84.425U ARP ESSER						
	Learning Loss	USDE or Appropriate Agen	cy					
	T. D							
	TAPS 22A177	FAIN #: S425U210052						
5	AMENDMENT INFORMATION	6 PROJECT PERIODS						
	Amendment Number: 2							
	Type of Amendment: Program/Budget	Budget Period: 12/02/2021 -						
	Effective Date: 09/02/2022	Program Period: 12/02/2021 -						
7	AUTHORIZED FUNDING	8 REIMBURSEMENT OPTION	ON					
	Current Approved Budget: \$28,865,058.00	Federal Cash Advance						
	Amendment Amount:							
	Estimated Roll Forward:							
	Certified Roll Amount:							
_	Total Project Amount: \$28,865,058.00							
9	TIMELINES	1 1	00/20/2024					
	Last date for incurring expenditures and issuing		<u>09/30/2024</u>					
	Date that all obligations are to be liquidated and		<u></u>					
	Last date for receipt of proposed budget and pro	•	08/31/2024					
	Refund date of unexpended funds; mail to DOE	*	t,					
	944 Turlington Building, Tallahassee, Florida 3	2399-0400:						
	• Date(s) for program reports:							
- 10	• Federal Award Date :		03/24/2021					
10	DOE CONTACTS	Comptroller Office	UEI#: M2CKC5FG3MD6					
	Program: Amanda Meeks Phone: (850) 245-0906	Phone : (850) 245-0401	FEIN# : F596000522003					
	Email: Amanda.Meeks@fldoe.org							
	Grants Management: Unit A (850) 245-0735							
11	TERMS AND SPECIAL CONDITIONS							
•	This project and any amendments are subject to the pro	ocedures outlined in the Project Applica	ation and Amendment Procedures					
	for Federal and State Programs (Green Book) and the G							
	the terms and requirements of the Request for Proposal							
	For federal cash advance projects, expenditures must b	e recorded in the Florida Grants System	n (FLAGS) as close as is					
	administratively feasible to when actual disbursements							
	amounts needed and be timed with the actual, immedia	te cash requirements to carry out the pu	irpose of the approved project.					
•	All provisions not in conflict with any amendment(s) as	re 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:							
12	ALL NOVED.		FLORIDA DEPARTMENT OF					
	Margaret Aune	9/26/2022	EDUCATION fildoe org					
	Authorized Official on behalf of the	Date of Signing						
	Commissioner of Education	0 0						

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- 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.

DOE-200 Revised 07/15

FLORIDA DEPARTMENT OF EDUCATION PROJECT AMENDMENT REQUEST

		_						
Please return to:	A)	Agency Name:	DOE USE ONLY					
		of Brevard County, Florida ran Jamieson Way 10	Date Received					
B) Program Name: ARP ESSER I	II		Project Number (DOE Assigned) 050-1211A-2C001					
TAPS Number: 22A175		L						
C) Amendment Type		D) Amendment Request Contact Information						
☐ Program ☐ Bu	udget	-						
	8	Contact Name: Frank Stockman	Telephone Numbers: 321-633-1000 ext. 11348					
Amendment Number: 20	22-002	Frank Stockman	321-033-1000 CAU 113-10					
		Mailing Address: 2700 Judge Fran Jamieson Way Viera, FL 32940	E-mail Addresses: Stockman.Frank@brevardschools.org					
	. E) Required Signature and Certification						
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. 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. Superintendent Superintendent Title Date								
F) Brevard Public Schools will be increasing funds for a new employee orientation program and ARP funds will be used to pay these employees for their time during the orientation process. We will be increasing funds to reimburse our previously approved Parent Liaisons for their travel to students' homes to connect with our families across the district. We will be decreasing funds previously approved for Music FF&E and increasing those funds for Music related curriculum for our elementary schools. We will be decreasing funds previously approved for CTE student paid internships and increasing those funds for funding CTE fees paid for teacher certifications. Decreases are based on unused funds from previously approved activities to support the increases stated above.								

Instructions for Completion of DOE 150 Project Amendment Request

- A. Enter Agency Name
- **B.** Enter Program Name and TAPS number as listed on the original Project Award Notification.
- **C.** Enter Amendment Type Refer to <u>Project Application and Amendment Procedures for Federal and State Programs</u> (Green Book) for definitions of Program and Budget amendments.
- **D.** Enter Amendment Request Contact Information for the person who is responsible for the project.
- **E.** Complete Required Signature. **Note:** Application amendments signed by officials other than the Superintendent, or President/Chairman of the Board, must have a letter of authorization to sign on the behalf of said official, attached to the DOE 150 when the application amendment is submitted.
- **F.** Provide sufficient narrative to describe and justify the type of amendment being requested. Narrative should include the purpose of the amendment and description of the amended services or budget changes i.e. changes in scope or objectives, changes in deliverables or work tasks and how these changes affect the original application. Any budget change will require details on the increase/decrease and how the change affects the original application.

Attach Budget Amendment Narrative Form (DOE 151) if this amendment requires budget changes.



FLORIDA DEPARTMENT OF EDUCATION BUDGET AMENDMENT NARRATIVE FORM

A) Brevard County School District				<u>istrict</u>	B) 050-1211A-2C001 / 22A175						
	District/Agency Name					Project Number/TAPS Number					
C)			2								
	Amendm	ent Numb	er								
D) Total Project Amount Currently Approved E) Total Project Amount resulting from this Budget Amendment											
	2 Amendment Number) Total Project Amount Currently Approved \$ 115,460,231.00) Line Item Description Function Object Funds			\$ 115,460,231.00							
F)	Line Item	Description	า								
F	unction	Object	Funds	Activity Number	Account Title and Narrative	FTE	Amount Increase	Amount Decrease			
	•				Specialized door hardware for ESE support -						

Function	Object	Use of Funds Number	Activity Number	Account Title and Narrative	FTE	Am	nount Increase		Amount Decrease	
7400	680	2(F).6	2(F)	Specialized door hardware for ESE support - Contracted Design and Construction Services (Activity 2(F).6				\$	38,566.72	
6300	130	2(A).6	2(A)	New Employee orientation - extra duty pay; 400 support staff for 4 hours each at \$15 per hour		\$	24,000.00			
6300	210	2(A).6	2(A)	retirement		\$	2,596.80			
6300	220	2(A).6	2(A)	fica		\$	1,836.00			
6300	240	2(A).6	2(A)	w/c		\$	133.92			
5100	640	2(M).6	2(M)	Music FF&E				\$	93,000.00	
5100	365	2(M).6	2(M)	Music curriculum		\$	93,000.00			
5300	160	2(M).3	2(M)	Student Paid CTE Internships				\$	1,500.00	
5300	730	2(M).10	2(M)	CTE fees paid for teacher certification \$75 per teacher		\$	1,500.00			
6150	330	2(N).3	2(N)	PL travel/mileage reimbursement needs		\$	10,000.00			
							133.066.72	Ś	133.066.72	

DOE 151 Revised January 2017

Richard Corcoran, Commissioner



Instructions

Budget Amendment Narrative Form DOE 151

- B) Enter Project Number of original project and corresponding TAPS number
- C) Enter chronological number of this Amendment Request
- D) Enter the Total Project Amount Currently Approved
- E) Enter the Total Project Amount resulting from this Amendment
- F) Provide a narrative description for each budget item by category to justify the requested Budget Amendment. List ONLY the budget lines that are being amended and/or new ones being created. For each budget line to be amended, indicate whether the amount will be increased or decreased in the appropriate column and record the adjusted amount being submitted for approval.

THIS FORM <u>MUST</u> BE ACCOMPANIED BY AN APPROPRIATELY COMPLETED PROJECT AMENDMENT REQUEST FORM, DOE 150