Florida Department of Education Project Award Notification						
1	PROJECT RECIPIENT 2 PROJECT NUMBER					
1	Brevard County School District	4	050-1241E-1CR01			
3	PROJECT/PROGRAM TITLE	4	AUTHORITY			
5	CRRSA ESSER II - Lump Sum	-	84.425D CRSSA ESSER II			
	CKKSA ESSEK II - Lump Sum					
	TAPS 22A170	USDE or Appropriate Agency				
	IAI 5 22A1/0					
-		(FAIN#: \$425D210052			
5	AMENDMENT INFORMATION	6	PROJECT PERIODS			
	Amendment Number: 2					
	Type of Amendment: Budgetary		Budget Period: 07/01/2021 - 09/30/2023			
_	Effective Date: 04/07/2022		Program Period: 07/01/2021 - 09/30/2023			
7	AUTHORIZED FUNDING	8	REIMBURSEMENT OPTION			
	Current Approved Budget: \$45,579,663.00		Federal Cash Advance			
	Amendment Amount:					
	Estimated Roll Forward:					
	Certified Roll Amount:					
L	Total Project Amount:\$45,579,663.00					
9	TIMELINES					
	Last date for incurring expenditures and issuing	-		09/30/2023		
	• Date that all obligations are to be liquidated and	l fin	al disbursement reports submitte	ed: <u>11/20/2023</u>		
	• Last date for receipt of proposed budget and pro	ogra	m amendments:	08/31/2023		
	• Refund date of unexpended funds; mail to DOE	Co	mptroller, 325 W. Gaines Street	,		
	944 Turlington Building, Tallahassee, Florida 3	239	9-0400:			
	• Date(s) for program reports:					
	• Federal Award Date :			01/05/2021		
10	DOE CONTACTS		Comptroller Office	Duns #: 364622886		
	Program: Mari Presley		Phone : (850) 245-0401	FEIN#: F596000522003		
	Phone: (850) 245-9426					
	· ·			12 1(<i>n</i> : 15)0000522005		
	Phone: (850) 245-9426			121 (<i>n</i> : 15)000022005		
11	Phone:(850) 245-9426Email:Mari.Presley@fldoe.org					
11	Phone:(850) 245-9426Email:Mari.Presley@fldoe.orgGrants Management:Unit A (850) 245-0496TERMS AND SPECIAL CONDITIONS	ocedi	ares outlined in the Project Applica			
11 •	Phone:(850) 245-9426Email:Mari.Presley@fldoe.orgGrants Management:Unit A (850) 245-0496			tion and Amendment Procedures		
11 •	Phone: (850) 245-9426 Email: Mari.Presley@fldoe.org Grants Management: Unit A (850) 245-0496 TERMS AND SPECIAL CONDITIONS This project and any amendments are subject to the pro-	Gene	ral Assurances for Participation in	tion and Amendment Procedures Federal and State Programs and		
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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.
- 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.

DOE-200 Revised 07/15

Page 2 of 2

FLORIDA DEPARTMENT OF EDUCATION PROJECT AMENDMENT REQUEST

Please return to: A)		Agency Name:	DOE USE ONLY				
Florida Department of Education School Board of		of Brevard County, Florida an Jamieson Way 0	Date Received				
B) Program Name: CRRSA ESSE	R II – Lump S	um	Project Number (DOE Assigned)				
	Lump 5		050-1241E-1CR01				
TAPS Number: 22A170			FAIN#				
			S425D210052				
C) Amendment Type		D)	51252210052				
		Amendment Request Contact Information					
🗌 Program 🛛 B	udget	Contract Norman	T-laubana Nambana				
_		Contact Name:	Telephone Numbers: 321-633-1000 ext. 11348				
Amendment Number: 20	22-002	Frank Stockman	521-055-1000 ext. 11548				
		Mailing Address:	E-mail Addresses:				
		2700 Judge Fran Jamieson Way Viera, FL 32940	Stockman.Frank@brevardschools.org				
E) Required Signature and Certification							
certify to the best of my knowle true, complete and accurate, for general assurances and specific information or the omission of a claims or otherwise. Furthermore	dge and belief the purposes, c programmati ny material fac e, all applicable	that all the information and attachments su and objectives, set forth in the RFA or RF ic assurances for this project. I am awar ct may subject me to criminal, or administra e statutes, regulations, and procedures; admi	ly bind the agency/organization, do hereby ibmitted in this application amendment are iP and are consistent with the statement of e that any false, fictitious, or fraudulent ative penalties for the false statement, false inistrative and programmatic requirements; re 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.

Signature of Agency Head

<u>Superintendent</u> Title _<u>4/7/2022</u>_ Date

F) In order to better prioritize ESSER II funds that were over budgeted and are now in excess of the intent of their activities, we will have to adjust some of our funds to be better expended to cover some of our other expenses incurred due to the COVID-19 pandemic and the ongoing academic, behavioral, and mental health supports that have been put in place to support our students. First, we will increase the funds available for instructional materials to address learning loss. We will be increasing the TOA - Community Partnerships funding through SY 23. We will be increasing the admin costs by adding an Accounting Specialist to the ESSER management team through SY 23 to better manage the increased demand from ARP ESSER III. We will also be increasing the expenditures to cover costs to onboard volunteers to increase parent involvement in schools for the additional benefit of students whose parents might find cost and logistics a barrier to volunteering. This program was very successful in increasing engagement of our community in our schools and we would like to increase the funding to extend through the end of the school year.

We will be decreasing the expenditures by removing an excess of funding for 2nd/3rd grade supplies. We will also be decreasing an excess of funding for teachers in summer recovery by reducing it to funding that will better represent the teachers needed. Lastly, we will be decreasing an excess of funding for 7 Parent Liaisons as those positions were not filled and stand vacant.



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 Project Application and Amendment Procedures for Federal and State Programs (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

District/Agency Name

050-1240C-1C001 / 21A157

Project Number/TAPS Number

C) 2 Amendment Number

\$45,579,663.00 D)

> **Total Project Amount Currently Approved**

\$45,579,663.00 Total Project Amount resulting from this **Budget Amendment**

F) Line Item	Description					
Function	Object	Account Title and Narrative	FTE	Amount Increase	Amount Decrease	
5100	510	Rising 2nd/3rd Grade supplies			\$ 300,000.0	
5100	120	Summer Recovery (250 teachers extra duty pay)	250		\$ 472,771.31	
5100	210	Summer Recovery (250 teachers extra duty pay) Retirement			\$ 51,153.86	
5100	220	Summer Recovery (250 teachers extra duty pay) FICA MEDICARE			\$ 36,167.01	
5100	231	Summer Recovery (250 teachers extra duty pay) Life Ins			\$ 388.47	
5100	241	Summer Recovery (250 teachers extra duty pay) Work comp			\$ 2,638.07	
6150	131	Salary & Benefits: 7 Parent Liaisons to work on Recovery and Retention of Students to be placed with individual schools with high student recovery needs and chronic absenteeism	7		\$ 192,541.5	
6150	210	Parent Liaisons to work on Recovery and Retention Retirement			\$ 20,833.0	
6150	220	Parent Liaisons to work on Recovery and Retention FICA/Medicare			\$ 14,729.4	
6150	231	Parent Liaisons to work on Recovery and Retention Life Insurance			\$ 159.8	
6150	241	Parent Liaisons to work on Recovery and Retention Health Insurance			\$ 59,761.8	
6150	232	Parent Liaisons to work on Recovery and Retention Workers Comp Ins			\$ 1,074.3	
6150	330	Travel: 7 Parent Liaisons to work on Recovery and Retention of Students to be placed with individual schools with high student recovery needs and chronic absenteeism			\$ 10,500.0	
6150	510	Supplies: 7 Parent Liaisons to work on Recovery and Retention of Students to be placed with individual schools with high student recovery needs and chronic absenteeism			\$ 1,400.0	
6150	640	Technology Equipment: 7 Parent Liaisons to work on Recovery and Retention of Students to be placed with individual schools with high student recovery needs and			\$ 7,000.0	
6150	510	chronic absenteeism Training Materials/Printing: 7 Parent Liaisons to work on Recovery and Retention of Students to be placed with individual schools with high student recovery needs and chronic absenteeism			\$ 200.0	
6300	130	Teacher on Assignment - Community Partnerships (1 FTE/12 mo.) SY23	1	\$ 55,798.88		
6300	210	Teacher on Assignment - Community Partnerships (1 FTE/12 mo.) Retirement		\$ 6,037.44		
6300	220	Teacher on Assignment - Community Partnerships (1 FTE/12 mo.) FICA MEDICARE		\$ 4,268.62		
6300	231	Teacher on Assignment - Community Partnerships (1 FTE/12 mo.) Life Ins		\$ 46.31		

E)

B)

6300	241	Teacher on Assignment - Community Partnerships (1 FTE/12 mo.) Work comp		\$ 311.36	
6300	232	Teacher on Assignment - Community Partnerships (1 FTE/12 mo.) Health		\$ 8,537.40	
7500	160	Administrative direct costs (1 FTE - Accounting Specialist) SY 23	1	\$ 41,661.00	
7500	210	Administrative direct costs (1 FTE - Accounting Specialist) Retirement		\$ 4,507.72	
7500	220	Administrative direct costs (1 FTE - Accounting Specialist) FICA MEDICARE		\$ 3,187.07	
7500	231	Administrative direct costs (1 FTE - Accounting Specialist) Life Ins		\$ 35.00	
7500	241	Administrative direct costs (1 FTE - Accounting Specialist) Work comp		\$ 10,007.15	
7500	232	Administrative direct costs (1 FTE - Accounting Specialist) Health Ins		\$ 232.47	
5100	520	EBOOKS: Tier 2/3 reading support (NMH/Read180/System 44/Eureka/Ready MAFS)		\$ 1,011,688.32	
6150	730	Dues and Fees: Volunteer onboarding - background checks		\$ 25,000.00	
			Total	\$ 1,171,318.72	\$ 1,171,318.72