

= Required Field

| Local Agency Information | | | |
|--|--|-----------------------|----------|
| Funding Source: | ARP-ESSER Application: 5% State-Level Reserve- Addressing the Impact of Lost Instructional Time | | |
| Report Prepared By: | Allen Olsen | | |
| Agency Name: | Kingston City School District | | |
| Mailing Address: | 21 Wynkoop Place | | |
| | Street | | |
| | Kingston | NY | 12401 |
| | City | State | Zip Code |
| Telephone # of Report Preparer: | 845-943-3040 | County: Ulster | |
| E-mail Address: | aolsen@kingstoncityschools.org | | |
| Project Funding Dates: | 3/13/2020 Start | 9/30/2024 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 | | | \$346,374 |
| Specific Position Title | Full-Time Equivalent | Annualized Rate of Pay | Project Salary |
| Summer School Principal- High School Grade Level, 7/6/21-8/10/21 | 1.00 | \$12,896 | \$12,896 |
| Summer School Nurse - High School Grade Level, 7/6/21-8/10/21 | 1.00 | \$5,295 | \$5,295 |
| Summer School Teachers - High School Grade Level, 7/6/21-8/10/21 | 19.00 | \$4,280 | \$81,320 |
| Summer School Substitute Teachers - High School Grade Level, 7/6/21-8/10/21 | 2.00 | \$3,764 | \$7,528 |
| Summer School Teacher Assistants - High School Grade Level, 7/6/21-8/10/21 | 5.00 | \$3,494 | \$17,470 |
| Summer School Principal- Elementary Grade Level, 7/6/21-8/13/21 | 1.00 | \$4,346 | \$4,346 |
| Summer School Nurse - Elementary School Grade Level, 7/6/21-8/13/21 | 1.00 | \$2,726 | \$2,726 |
| Summer School Teachers - Elementary School Grade Level, 7/6/21-8/13/21 | 21.00 | \$2,261 | \$47,481 |
| Summer School Substitute Teachers - Elementary School Grade Level, 7/6/21-8/13/21 | 4.00 | \$1,640 | \$6,560 |
| Summer School Teacher Assistants - Elementary School Grade Level, 7/6/21-8/13/21 | 7.00 | \$1,456 | \$10,192 |
| Extended Day Program - JW Bailey & MC Miller Middle Schools 2021-2022 School Year | 1.00 | 238.1 Days x \$336/Day | \$80,000 |
| Extended Day Program - JW Bailey & MC Miller Middle Schools 2022-2023 School Year | 1.00 | 210 Days x \$336/Day | \$70,560 |
| | | | |

| SALARIES FOR SUPPORT STAFF | | | |
|--|----------------------|------------------------|----------------|
| Subtotal - Code 16 | | | \$8,647 |
| Specific Position Title | Full-Time Equivalent | Annualized Rate of Pay | Project Salary |
| Summer School Family Worker- High School Grade Level, 7/6/21-8/10/21 | 1.00 | \$4,354.00 | \$4,354 |
| Summer School Secretary- High School Grade Level, 7/6/21-8/10/21 | 1.00 | \$2,475.00 | \$2,475 |
| Summer School Monitor- High School Grade Level, 7/6/21-8/10/21 | 1.00 | \$1,818.00 | \$1,818 |
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| PURCHASED SERVICES | | | |
|--|----------------------------------|-----------------------------------|----------------------|
| Subtotal - Code 40 | | | \$90,445 |
| Description of Item | Provider of Services | Calculation of Cost | Proposed Expenditure |
| GBG Build Your Brand Project Targeting Students Grades 9-12 7/6/21 - 8/10/21 | Go Beyond Greatness | 30 Sessions x \$333.33/Session | \$10,000 |
| Summer Program- Mindfulness & Movement - Students Grades 9-12 7/6/21 - 8/10/21 | Well Being Hudson Valley | 63 Hours x \$100/Hour | \$6,300 |
| Summer Performing Arts Institute- Students Grades 9-12 7/6/21 - 8/10/21 | Youth Ensemble Theater | 21 Days x \$819/Day | \$17,200 |
| Summer Program- Teaching Artists - Students Grades 9-12 7/6/21 - 8/10/21 | Center for Creative Education | 6 Weeks x \$3,850/Week | \$23,100 |
| Summer School Mentor Program- Elementary Level - 7/6/21 - 8/13/21 | YMCA | 29 Days x \$1,083.66/Day | \$31,426 |
| Transportation - Summer Field Trip 8/11/2021 | Tonche Transit | \$475/Trip | \$475 |
| Summer Field Trip - 5th Grade Students - 8/11/21 | Hudson River Maritime | 13 Students x \$24/Student | \$312 |
| Summer Driver's Education Program 8/4/21-8/26/21 | D. Beams | 51 Hours x \$32/Hour | \$1,632 |

| Employee Benefits | | | |
|--|--------------------------|----------------------|----------|
| | | Subtotal - Code 80 | \$54,530 |
| Benefit | | Proposed Expenditure | |
| Social Security | | | \$21,762 |
| Retirement | New York State Teachers | | \$27,030 |
| | New York State Employees | | \$1,471 |
| | Other - Pension | | |
| Health Insurance | | | |
| Worker's Compensation/Unemployment Insurance | | | \$4,267 |
| Other(Identify) | | | |
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BUDGET SUMMARY

| SUBTOTAL | CODE | PROJECT COSTS |
|------------------------|------|---------------|
| Professional Salaries | 15 | \$346,374 |
| Support Staff Salaries | 16 | \$8,647 |
| Purchased Services | 40 | \$90,445 |
| Supplies and Materials | 45 | |
| Travel Expenses | 46 | |
| Employee Benefits | 80 | \$54,530 |
| Indirect Cost | 90 | |
| BOCES Services | 49 | |
| Minor Remodeling | 30 | |
| Equipment | 20 | |
| Grand Total | | \$499,996 |

Agency Code: **620600010000**

Project #: **5884-21-3400**

Contract #: _____

Agency Name: **Kingston City School District**

FOR DEPARTMENT USE ONLY

Funding Dates: _____ From _____ To _____

Program Approval: _____ Date: _____

| <u>Fiscal Year</u> | <u>First Payment</u> | <u>Line #</u> |
|--------------------|----------------------|---------------|
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| _____ | _____ | _____ |
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| _____ | _____ | _____ |
| Voucher # | First Payment | |

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).

12/15/21 _____
 Date Signature

Dr. Paul Padolina, Superintendent
Name and Title of Chief Administrative Officer

Finance: Logged _____

Approved _____

MIR _____