FLORIDA DEPARTMENT OF EDUCATION PROJECT APPLICATION

TAPS:

1. 13A027

Please return to:

A) Name and Address of Eligible Applicant:

DOE USE ONLY

Florida Department of Education Office of Grants Management Room 332, Turlington Building 325 West Gaines Street Tallahassee, Florida 32399-0400

Santa Rosa County District School Board 6751 Berryhill Street

Date Received

MILTON, FL 32570

Telephone: (850) 245-0496

B) Applicant Contact Information

Contact Name: Joyce McCorvey

Telephone Number: 850-983-5065 Ext:

Mailing Address: 6751 Berryhill Street Milton, FL

Fax Number: 850-981-7861

E-mail Address: McCorvJ@mail.santarosa.k12.fl.us

Programs

C) Program Name:

Project Number: (DOE Assigned): D) Total Funds Requested:

Total Approved Funds (DOE USE ONLY):

1. Title I, Part D: Subpart II, Local

Programs for Neglected and Delinquent 2012-2013

570-2233A-3CD01

\$34,583.00

CERTIFICATION

I, do hereby certify that all facts, figures, and representations made in this application are true, correct, and consistent with the statement of general assurances and specific programmatic assurances for this project. 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.

E)		
·	Signature of Agency Head	_

DOE 100



Gerard Robinson, Commissioner

FLORIDA DEPARTMENT OF EDUCATION **BUDGET DESCRIPTION FORM -**Title I, Part D: Subpart II, Local Programs for Neglected and Delinquent 2012 -2013

A) NAME OF ELIGIBLE RECIPIENT: Santa Rosa County District School Board B) Project Number (DOE USE ONLY): 570-2233A-3CD01

E) TAPS Number 13A027

COUNT	Activity	Function	Object	Account Title and Description	FIE	Amount
1	Transition/ESE Specialist	5200	130	Other Centified Instructional	1.000	\$22,000.00
		# :	· ·	Personnel Classicom Teachers Transiti	•	
2	Benefits	5200	210	<u>Refirement</u> Refirement Refirement	0.000	\$1,000.00
3 :	Benefits	5200		Social Security Social Security Social Security	0.550	\$1,700.00
4	Senefits	5200	230	Stone pranauce Clock pranauce	0.000	\$3,000.00
5	Benefits	5200	240	Workers Compensation Workers Compensation Workers Compensation	0.000	\$300.00
	Travel for staff to meetings and inservices	5200	331	Travel in County Travel	0.000	\$1,000.00
:	Travel for statilo technical assistance, meetings and workshops	5200	332	 Travel Out of County Travel	0.000	\$2,000.00
	Chestoom supplies for core academic courses	5200	510	Supplies Supplies	0.000	\$1,000.00
	Textbooks for core academics at DJU Bcilly	5200	520	<u>Fexibuoks</u> Textbooks.	0.000	\$1,000.00
	Classicom fumiliare and equipmentfor DIU Facility	5200	٠.	Furniture, Fixtures and Equipment Non-Capitalized Furniture, Notice	0.000	\$1,083.00
e	Software to supplement and critisance student learning at DAU actity	5200		Computer Software Non- Capitalized Computer Software	0.000	\$500.00
otals	•			•	4 000	\$34,583.00