

The University of the State of New York
THE STATE EDUCATION DEPARTMENT

PROPOSED BUDGET FOR A
FEDERAL OR STATE PROJECT
FS-10 (03/15)

☐ = Required Field

Local Agency Information

Funding Source:	ARP - ESSER 3	
Report Prepared By:	Shawn Jawn	
Agency Name:	Brighter Choice CS - Girls	
Mailing Address:	250 Central Ave	
	Street	
	Albany	NY 12206
	City	State Zip Code
Telephone # of Report Preparer:	518-694-8200	County: Albany
E-mail Address:	sjahn@brighterchoice.org	
Project Funding Dates:	3/13/20	9/30/24
	Start	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			\$860,082
Specific Position Title	Full-Time Equivalent	Annualized Rate of Pay	Project Salary
Dean of Students (2021-22)	0.50	\$73,160	\$36,580
Counselor (2021-22)	0.50	\$50,000	\$25,000
Teacher Assistant (2021-22)	0.50	\$29,870	\$14,935
Teaching Fellow 1 (2021-22)	0.50	\$36,050	\$18,025
Teaching Fellow 2 (2021-22)	0.50	\$36,000	\$18,000
Teaching Fellow 3 (2021-22)	0.50	\$36,000	\$18,000
Special Education Teacher 1 (2021-22)	0.50	\$70,000	\$35,000
Special Education Teacher 2 (2021-22)	0.50	\$44,290	\$22,145
Parent Coordinator (2021-22)	0.61	\$60,000	\$36,447
FY 23 Begins			
Dean of Students (2022-23)	0.50	\$73,160	\$36,580
Counselor (2022-23)	0.50	\$50,000	\$25,000
Teacher Assistant (2022-23)	0.50	\$29,870	\$14,935
Teaching Fellow 1 (2022-23)	0.50	\$36,050	\$18,025
Teaching Fellow 2 (2022-23)	0.50	\$36,000	\$18,000
Teaching Fellow 3 (2022-23)	0.50	\$36,000	\$18,000
Special Education Teacher 1 (2022-23)	0.50	\$70,000	\$35,000
Special Education Teacher 2 (2022-23)	0.50	\$44,290	\$22,145
Parent Coordinator (2022-2023)	0.61	\$60,000	\$36,447
FY 24 Begins			
Dean of Students (2023-24)	1.00	\$73,160	\$73,160
Counselor (2023-24)	1.00	\$50,000	\$50,000
Teacher Assistant (2023-24)	1.00	\$29,870	\$29,870
Teaching Fellow 1 (2023-24)	1.00	\$36,050	\$36,050
Teaching Fellow 2 (2023-24)	1.00	\$36,000	\$36,000
Teaching Fellow 3 (2023-24)	1.00	\$36,000	\$36,000
Special Education Teacher 1 (2023-24)	1.00	\$70,000	\$70,000
Special Education Teacher 2 (2023-24)	1.00	\$44,290	\$44,290
Parent Coordinator (2023-2024)	0.61	\$60,000	\$36,448

BUDGET SUMMARY

SUBTOTAL	CODE	PROJECT COSTS
Professional Salaries	15	\$860,082
Support Staff Salaries	16	
Purchased Services	40	
Supplies and Materials	45	
Travel Expenses	46	
Employee Benefits	80	
Indirect Cost	90	
BOCES Services	49	
Minor Remodeling	30	
Equipment	20	
Grand Total		\$860,082

Agency Code: **010100860830**Project #: **5880-21-4015**

Contract #:

Agency Name: **Brighter Choice Charter School for Girls****FOR DEPARTMENT USE ONLY**

Funding Dates: _____ From _____ To _____

Program Approval: _____ Date: _____

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).

9/27/21 

Date

Signature

Krishna Ford Principal

Name and Title of Chief Administrative Officer

Fiscal YearFirst PaymentLine #

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Voucher #

First Payment

Finance: Logged _____

Approved _____

MIR _____