

**Project Budget Summary Table**

**Local School System:** Cecil County Public Schools  
**Project Name:** Professional Development for Core Standards  
**Associated with Criteria:** B3  
**Project Number:** 1

| <b>Budget Categories</b>      | <b>Project Year 1 (a)</b> | <b>Project Year 2 (b)</b> | <b>Project Year 3 (c)</b> | <b>Project Year 4 (d)</b> | <b>Total (e)</b> |
|-------------------------------|---------------------------|---------------------------|---------------------------|---------------------------|------------------|
| 1. Salaries and Wages         | 42,000                    | 40,000                    | 40,000                    | 40,000                    | 162,000          |
| 2. Contract Services          | -                         | -                         | -                         | -                         | -                |
| 3. Supplies and Materials     | -                         | -                         | -                         | -                         | -                |
| 4. Other Charges              | 3,360                     | 3,200                     | 3,200                     | 3,200                     | 12,960           |
| 5. Property                   | -                         | -                         | -                         | -                         | -                |
| 6. Transfers (Indirect Costs) | 1,447                     | 1,378                     | 1,378                     | 1,378                     | 5,581            |
| 7. Total Costs (lines 1-6)    | 46,807                    | 44,578                    | 44,578                    | 44,578                    | 180,541          |

Columns (a) through (d): For each project year for which funding is requested, show the total amount requested for each applicable budget object.

Column (e): Show the total amount requested for all project years.

Local School System: Cecil County Public Schools  
**Project Title: Professional Development for Core Standards**  
**Criteria:** (associated reform criteria) **B3**  
 Project Number: 1

### Project Budget Narrative

#### Project Description:

**Funds from Section B3 will support efforts by Cecil County Public Schools to fully implement the Common Core Standards. These efforts will augment current processes designed to bring consistency in classrooms across the county as it relates to curricular delivery.**

#### Funding:

This expenditure will support the county's efforts to train teachers and administrators in the implementation of the common core standards. It will specifically support costs associated with substitute teachers ( 466 x \$90 ) or summer workshop stipends ( 328 x \$135 ). Years two through four will realize comparable costs ( 444 sub days / 296 workshop days )

#### Year by Year Description:

Years 1-4: Teacher stipends will be provided each year for work on workshop or substitute release days proportionate to the spending allocations on project detail page.

|                 |  |
|-----------------|--|
| Project Name:   | <b>Professional Development for Core Standards</b> |
| LEA:            | <b>Cecil County Public Schools</b>                 |
| Project Number: | <b>1</b>   |

**Project Details by Object**

**Salaries and Wages:** provide a brief description of the salaries and wages included with this project. Please provide information by employee classification. If necessary, repeat the FTE table for each classification. Include the number of FTE multiplied by the annual salary for each year.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total   |
|--------------|--------|---------|---------|---------|---------|
| FTE          |        |         |         |         | -       |
| Salary       | 42,000 | 40,000  | 40,000  | 40,000  | 162,000 |
| <b>Total</b> | 42,000 | 40,000  | 40,000  | 40,000  | 162,000 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **This expenditure will support the county's efforts to train teachers and administrators in the implementation of the common core standards. Salaries are included for teachers only, as administrators will work during compensated duty days. Committees of 17 elementary teachers at each grade span (k-1, 2-3, etc) will work for 5 days to interpret curriculum alignment within a given subject, develop grade appropriate resources, and refine our existing bank of unit assessments. This amount will specifically support costs associated with 466.6 substitute teachers ( @ \$90 avg) . Years two through four will realize comparable costs ( 444.5 sub days ) to supplement local curriculum development allocation. [Daily substitutes earn a range of \$78/day to \$92/day depending upon their education level. The \$90 level is the average of our experience.]**

**Contract Services:** expenditures for services performed by persons who are no on the LEA payroll, including equipment repair. Please provide a brief description of the contracted services included with this project. In the table below, please itemize the services provided. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Supplies and Materials:** expenditures for articles or materials which meet one or more of the conditions outlined on page 66 of the Local Financial Reporting Manual. Please provide a brief description of the supplies and materials included with this project. In the table below, please itemize the supplies and materials. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

|                 |  |
|-----------------|--|
| Project Name:   | <b>Professional Development for Core Standards</b> |
| LEA:            | <b>Cecil County Public Schools</b>                 |
| Project Number: | <b>1</b>   |

**Project Details by Object**

**Other Charges:** expenditures for employee benefits and other miscellaneous expenditures that cannot be classified elsewhere. Please provide a brief description of the other charges included in this project. In the table below, please itemize the other charges. USDE guidance requires specificity for this item. Add rows if necessary.

|                 | Year 1       | Year 2*      | Year 3*      | Year 4*      | Total         |
|-----------------|--------------|--------------|--------------|--------------|---------------|
| Fringe Benefits | 3,360        | 3,200        | 3,200        | 3,200        | 12,960        |
|                 |              |              |              |              | -             |
| <b>Total</b>    | <b>3,360</b> | <b>3,200</b> | <b>3,200</b> | <b>3,200</b> | <b>12,960</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Fringe Benefits include FICA and Workers Compensation at 8% of total Salaries and Wages above. If the allocations do not change, the 8% set aside for fixed charges (estimate based on 7.65% Soc Sec/FICA and .269% Workers' Comp) would not change from what is presented.**

**Property:** expenditures for the acquisition of new or replacement fixed assets including equipment, vehicles, buildings, school sites, other property, to the extent allowable under the American Recovery and Reinvestment Act. Please provide a brief description of the property expenditures included in this project. In the table below, please itemize property expenditures. USDE guidance requires specificity for this item. Add rows if necessary.

|              | Year 1   | Year 2*  | Year 3*  | Year 4*  | Total    |
|--------------|----------|----------|----------|----------|----------|
| item         |          |          |          |          | -        |
| item         |          |          |          |          | -        |
| <b>Total</b> | <b>-</b> | <b>-</b> | <b>-</b> | <b>-</b> | <b>-</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Transfers (Indirect Costs):** payments to other LEAs or transfers between major fund types within the LEA. Please provide a brief description of the transfers included in this project. In the table below, please itemize the transfers. Add rows if necessary.

|                | Year 1       | Year 2*      | Year 3*      | Year 4*      | Total        |
|----------------|--------------|--------------|--------------|--------------|--------------|
| Indirect Costs | 1,447        | 1,378        | 1,378        | 1,378        | 5,581        |
|                |              |              |              |              | -            |
| <b>Total</b>   | <b>1,447</b> | <b>1,378</b> | <b>1,378</b> | <b>1,378</b> | <b>5,581</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Based on current indirect cost rate of 3.19% of expenses less equipment.**

**Total Project Costs**

| Year 1 | Year 2* | Year 3* | Year 4* | Total   |
|--------|---------|---------|---------|---------|
| 46,807 | 44,578  | 44,578  | 44,578  | 180,541 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Project Budget Summary Table**

**Local School System:** Cecil County Public Schools

**Project Name:** STEM Lead Teacher Stipend

**Associated with Criteria:** B3

**Project Number:** 2

| <b>Budget Categories</b>      | <b>Project Year 1 (a)</b> | <b>Project Year 2 (b)</b> | <b>Project Year 3 (c)</b> | <b>Project Year 4 (d)</b> | <b>Total (e)</b> |
|-------------------------------|---------------------------|---------------------------|---------------------------|---------------------------|------------------|
| 1. Salaries and Wages         | 2,140                     | 5,350                     | 5,350                     | 5,350                     | 18,190           |
| 2. Contract Services          | -                         | -                         | -                         | -                         | -                |
| 3. Supplies and Materials     | -                         | -                         | -                         | -                         | -                |
| 4. Other Charges              | 171                       | 428                       | 428                       | 428                       | 1,455            |
| 5. Property                   | -                         | -                         | -                         | -                         | -                |
| 6. Transfers (Indirect Costs) | 74                        | 184                       | 184                       | 184                       | 626              |
| 7. Total Costs (lines 1-6)    | 2,385                     | 5,962                     | 5,962                     | 5,962                     | 20,271           |

Columns (a) through (d): For each project year for which funding is requested, show the total amount requested for each applicable budget object.

Column (e): Show the total amount requested for all project years.



Local School System: **Cecil County Public Schools**  
**Project Title: STEM Lead Teacher Stipend**  
**Criteria:** (associated reform criteria) **B3**  
 Project Number: 2

### Project Budget Narrative

#### Project Description:

RTTT funds will support Lead Teacher stipends at each of the five high schools in Cecil County. For the first year, only two schools will receive this stipend because they have been the pilot STEM Academies. Beginning school year 2011 - 2012, all five high schools will receive the stipend. Lead teachers will coordinate the assimilation of the new Common Core Standards into the STEM Academies while at the same time supporting STEM seniors through their Capstone process.

#### Funding:

Funding is based on each lead teacher position paid at the current lead teacher rate of \$1,070 per school per year.

#### Year by Year Description:

Years 1-4: Each year, the STEM lead teacher is responsible for (a) serving on the STEM steering committee, (b) participating in the student selection process, (c) sharing with others the promotional, recruitment activities, (d) consulting with each senior STEM student to arrange his/her senior capstone project, (e) facilitating collaboration with an industry mentor, and (f) serving as the communication link between the STEM steering committee and the teachers of STEM courses. The only roll out issue over the 4 years is the number of lead teachers: 2 in school year 2010-11 and 5 henceforth, matching the two stage roll out of the STEM project. Only 2 schools have senior STEM students graduating in 2011.

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| Project Name: <b>STEM Lead Teacher Stipend</b> |
| LEA: <b>Cecil County Public Schools</b>        |
| Project Number: <b>2</b>                       |

**Project Details by Object**

**Salaries and Wages:** provide a brief description of the salaries and wages included with this project. Please provide information by employee classification. If necessary, repeat the FTE table for each classification. Include the number of FTE multiplied by the annual salary for each year.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total  |
|--------------|--------|---------|---------|---------|--------|
| FTE          |        |         |         |         | -      |
| Salary       | 2,140  | 5,350   | 5,350   | 5,350   | 18,190 |
| <b>Total</b> | 2,140  | 5,350   | 5,350   | 5,350   | 18,190 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Lead teacher stipend is provided for the additional work related to monitoring, supporting and implementing the Common Core Standards into all STEM Academies in Cecil County. Moreover, lead teachers will support students who are completing their Senior Capstone Projects. Currently, two high schools (Elkton High School and Perryville High School) will graduate the first cohort of STEM seniors with the remaining three high schools having a senior STEM class next year and will begin using the lead teacher role. The stipend for all lead teachers is \$1070 per year. There are two teachers in this position currently and all 5 schools will come "on line" for the 2011-12 school year and beyond.**

**Contract Services:** expenditures for services performed by persons who are no on the LEA payroll, including equipment repair. Please provide a brief description of the contracted services included with this project. In the table below, please itemize the services provided. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Supplies and Materials:** expenditures for articles or materials which meet one or more of the conditions outlined on page 66 of the Local Financial Reporting Manual. Please provide a brief description of the supplies and materials included with this project. In the table below, please itemize the supplies and materials. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.



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| Project Name: <b>STEM Lead Teacher Stipend</b> |
| LEA: <b>Cecil County Public Schools</b>        |
| Project Number: <b>2</b>                       |

**Project Details by Object**

**Other Charges:** expenditures for employee benefits and other miscellaneous expenditures that cannot be classified elsewhere. Please provide a brief description of the other charges included in this project. In the table below, please itemize the other charges. USDE guidance requires specificity for this item. Add rows if necessary.

|               | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|---------------|--------|---------|---------|---------|-------|
| Fixed Charges | 171    | 428     | 428     | 428     | 1,455 |
| item          |        |         |         |         | -     |
| <b>Total</b>  | 171    | 428     | 428     | 428     | 1,455 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. Fixed charges equals eight percent of salaries and wages

**Property:** expenditures for the acquisition of new or replacement fixed assets including equipment, vehicles, buildings, school sites, other property, to the extent allowable under the American Recovery and Reinvestment Act. Please provide a brief description of the property expenditures included in this project. In the table below, please itemize property expenditures. USDE guidance requires specificity for this item. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Transfers (Indirect Costs):** payments to other LEAs or transfers between major fund types within the LEA. Please provide a brief description of the transfers included in this project. In the table below, please itemize the transfers. Add rows if necessary.

|                | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|----------------|--------|---------|---------|---------|-------|
| Indirect Costs | 74     | 184     | 184     | 184     | 626   |
| item           |        |         |         |         | -     |
| <b>Total</b>   | 74     | 184     | 184     | 184     | 626   |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Total Project Costs**

| Year 1 | Year 2* | Year 3* | Year 4* | Total  |
|--------|---------|---------|---------|--------|
| 2,385  | 5,962   | 5,962   | 5,962   | 20,271 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Project Budget Summary Table**

**Local School System:** Cecil County Public Schools

**Project Name:** Learning Mangement System

**Associated with Criteria:** C (3)

**Project Number:** 3

| <b>Budget Categories</b>      | <b>Project<br/>Year 1<br/>(a)</b> | <b>Project<br/>Year 2<br/>(b)</b> | <b>Project<br/>Year 3<br/>(c)</b> | <b>Project<br/>Year 4<br/>(d)</b> | <b>Total<br/>(e)</b> |
|-------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|-----------------------------------|----------------------|
| 1. Salaries and Wages         | -                                 | -                                 | -                                 | -                                 | -                    |
| 2. Contract Services          | 25,000                            | 300,000                           | 200,000                           | 177,800                           | 702,800              |
| 3. Supplies and Materials     | -                                 | -                                 | -                                 | -                                 | -                    |
| 4. Other Charges              | -                                 | -                                 | -                                 | -                                 | -                    |
| 5. Property                   | 250,000                           | 50,000                            | -                                 | -                                 | 300,000              |
| 6. Transfers (Indirect Costs) | 798                               | 9,570                             | 6,380                             | 5,672                             | 22,420               |
| 7. Total Costs (lines 1-6)    | 275,798                           | 359,570                           | 206,380                           | 183,472                           | 1,025,220            |

Columns (a) through (d): For each project year for which funding is requested, show the total amount requested for each applicable budget object.

Column (e): Show the total amount requested for all project years.

**Local School System:** Cecil County Public Schools  
**Project Title:** Learning Mangement System  
**Criteria:** (associated reform criteria) C (3)  
**Project Number:** 3

### Project Budget Narrative

#### Project Description:

RTTT funds will be used to develop a data collection and management system in Cecil County Public Schools as it relates to formative and summative assessment, educator evaluations, and technology system capability.

#### Funding:

Funds will be used to establish an instructional technology infrastructure with an expectation that a level of subsequent costs will recur. Any recurring costs, such as maintenance agreements or annual subscriptions, will be absorbed by local funding sources.

#### Year by Year Description:

**Year One:** Conduct needs assessment, conduct instructional technology audit, release a wide ranging RFP for an integrated system and purchase hardware upgrades to expand server capacity and connectivity.

**Years Two through Four:** Implement contracted service or product countywide for use by school system. The estimates shown here are based on other RFP experiences seeking the type and scope of services for 1400 staff and 16,000 students. After proposals are received and one is selected, we will be able to separate the license fees, contracted services, and software/hardware upgrades needed to support our technology initiatives. In the end, these funds may go toward any of four or five budget objects, but this level of detail is not known now.

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| Project Name: <b>Learning Mangement System</b> |
| LEA: <b>Cecil County Public Schools</b>        |
| Project Number: <b>3</b>                       |

**Project Details by Object**

**Salaries and Wages:** provide a brief description of the salaries and wages included with this project. Please provide information by employee classification. If necessary, repeat the FTE table for each classification. Include the number of FTE multiplied by the annual salary for each year.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| FTE          |        |         |         |         | -     |
| Salary       |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

**(Training associated with this initiative is addressed in the project #4)**

**Contract Services:** expenditures for services performed by persons who are no on the LEA payroll, including equipment repair. Please provide a brief description of the contracted services included with this project. In the table below, please itemize the services provided. Add rows if necessary.

|                                     | Year 1 | Year 2* | Year 3* | Year 4* | Total   |
|-------------------------------------|--------|---------|---------|---------|---------|
| LMS subscription                    | 25,000 |         |         |         | 25,000  |
| General Cont Serv for extending LMS |        | 300,000 | 200,000 | 177,800 | 677,800 |
| <b>Total</b>                        | 25,000 | 300,000 | 200,000 | 177,800 | 702,800 |

**See notes on accompanying budget narrative, previous page. Until a RFP is developed and awarded, these are estimates of what may be needed for contracted services, equipment, product licenses, training or connectivity services. Year 1 includes the anticipated cost of the first year contract for a 3000-5000 seat Learning Management System. Years 2-4 are estimated allowing for heavier costs upfront, with smaller amounts needed once the program is lauched. We will need to amend the budget to meet the specificity of our expenses in years 2-4.**

**Supplies and Materials:** expenditures for articles or materials which meet one or more of the conditions outlined on page 66 of the Local Financial Reporting Manual. Please provide a brief description of the supplies and materials included with this project. In the table below, please itemize the supplies and materials. Add rows if necessary.

|      | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|------|--------|---------|---------|---------|-------|
| item |        |         |         |         | -     |

|  |
|--|
| Project Name: <b>Learning Mangement System</b> |
| LEA: <b>Cecil County Public Schools</b>        |
| Project Number: <b>3</b>                       |

| Project Details by Object |   |   |   |   |   |
|---------------------------|---|---|---|---|---|
| item                      |   |   |   |   | - |
| <b>Total</b>              | - | - | - | - | - |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

|  |
|--|
| Project Name: <b>Learning Mangement System</b> |
| LEA: <b>Cecil County Public Schools</b>        |
| Project Number: <b>3</b>                       |

**Project Details by Object**

**Other Charges:** expenditures for employee benefits and other miscellaneous expenditures that cannot be classified elsewhere. Please provide a brief description of the other charges included in this project. In the table below, please itemize the other charges. USDE guidance requires specificity for this item. Add rows if necessary.

|                 | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|-----------------|--------|---------|---------|---------|-------|
| Fringe Benefits | -      | -       | -       | -       | -     |
|                 |        |         |         |         | -     |
| <b>Total</b>    | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Fringe Benefits include FICA and Workers Compensation at 8% of total Salaries and Wages above.**

**Property:** expenditures for the acquisition of new or replacement fixed assets including equipment, vehicles, buildings, school sites, other property, to the extent allowable under the American Recovery and Reinvestmanet Act. Please provide a brief description of the property expenditures included in this project. In the table below, please itemize property expenditures. USDE guidance requires specificity for this item. Add rows if necessary.

|  | Year 1  | Year 2* | Year 3* | Year 4* | Total   |
|--|---------|---------|---------|---------|---------|
| Server and central network Upgrades                        | 250,000 |         |         |         | 250,000 |
| Data collection equipment to support summative assessments |         | 50,000  |         |         | 50,000  |
| <b>Total</b>   | 250,000 | 50,000  | -       | -       | 300,000 |

**Pending the selection of a LMS provider, we anticipate significant upgrades to our server and connectivity infrastructure in year 1. Year 2 includes the likelihood that we will need to expand our school based hardware associated with collecting data, whether via scanned assessments or teacher entered scores.**

**Transfers (Indirect Costs):** payments to other LEAs or transfers between major fund types within the LEA. Please provide a brief description of the transfers included in this project. In the table below, please itemize the transfers. Add rows if necessary.

| Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------|---------|---------|---------|-------|
|--------|---------|---------|---------|-------|

Project Name: **Learning Mangement System**  
 LEA: **Cecil County Public Schools**  
 Project Number: **3**

**Project Details by Object**

|                |     |       |       |       |        |
|----------------|-----|-------|-------|-------|--------|
| Indirect Costs | 798 | 9,570 | 6,380 | 5,672 | 22,420 |
|                |     |       |       |       | -      |
| <b>Total</b>   | 798 | 9,570 | 6,380 | 5,672 | 22,420 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Based on current indirect cost rate of 3.19% of expenses less equipment.**

Project Name: **Learning Mangement System**  
 LEA: **Cecil County Public Schools**  
 Project Number: **3**

**Project Details by Object**

**Total Project Costs**

| Year 1  | Year 2* | Year 3* | Year 4* | Total     |
|---------|---------|---------|---------|-----------|
| 275,798 | 359,570 | 206,380 | 183,472 | 1,025,220 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.



**Project Budget Summary Table**

**Local School System:** Cecil County Public Schools

**Project Name:** Formatting Local Assessments for Online Use

**Associated with Criteria:** C3

**Project Number:** 4

| <b>Budget Categories</b>      | <b>Project Year 1<br/>(a)</b> | <b>Project Year 2<br/>(b)</b> | <b>Project Year 3<br/>(c)</b> | <b>Project Year 4<br/>(d)</b> | <b>Total<br/>(e)</b> |
|-------------------------------|-------------------------------|-------------------------------|-------------------------------|-------------------------------|----------------------|
| 1. Salaries and Wages         | 25,000                        | 15,000                        | 5,000                         | 5,000                         | 50,000               |
| 2. Contract Services          | -                             | -                             | -                             | -                             | -                    |
| 3. Supplies and Materials     | -                             | -                             | -                             | -                             | -                    |
| 4. Other Charges              | 2,000                         | 1,200                         | 400                           | 400                           | 4,000                |
| 5. Property                   | -                             | -                             | -                             | -                             | -                    |
| 6. Transfers (Indirect Costs) | 861                           | 517                           | 172                           | 172                           | 1,722                |
| 7. Total Costs (lines 1-6)    | 27,861                        | 16,717                        | 5,572                         | 5,572                         | 55,722               |

Columns (a) through (d): For each project year for which funding is requested, show the total amount requested for each applicable budget object.

Column (e): Show the total amount requested for all project years.

Local School System: Cecil County Public Schools  
**Project Title: Formatting Local Assessments for Online Use**  
**Criteria:** (associated reform criteria) **C3**  
Project Number: 4

**Project Budget Narrative**

**Project Description:**

**CCPS staff will receive stipends for upgrading current local unit assessments and formatting them in such a way that data can be stored online and harvested by teachers and used to support classroom instruction and subsequent decision making at the school and classroom level.**

**Funding:**

**Funds will support approximately 185 workshop days in year one, 111 in year two, and 37 in years three and four.**

**Year by Year Description:**

**Years one and two will address costs related to core content area unit assessments being placed online for student and teacher use. Years three and four will be used to make needed adjustments depending on requirements of Common Core Standards**

|  |
|--|
| Project Name: <b>Formatting Local Assessments for Online Use</b> |
| LEA: <b>Cecil County Public Schools</b>                          |
| Project Number: <b>4</b>   |

**Project Details by Object**

**Salaries and Wages:** provide a brief description of the salaries and wages included with this project. Please provide information by employee classification. If necessary, repeat the FTE table for each classification. Include the number of FTE multiplied by the annual salary for each year.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total  |
|--------------|--------|---------|---------|---------|--------|
| FTE          |        |         |         |         | -      |
| Salary       | 25,000 | 15,000  | 5,000   | 5,000   | 50,000 |
| <b>Total</b> | 25,000 | 15,000  | 5,000   | 5,000   | 50,000 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **CCPS staff will receive stipends for upgrading current local unit assessments and formatting them in such a way that data can be stored online and harvested by teachers and used to support classroom instruction and subsequent decision making at the school and classroom level.** Year 1: 185 workshop days @ \$135; Year 2: 110 days, Years 3 and 4: 37 days

**Contract Services:** expenditures for services performed by persons who are no on the LEA payroll, including equipment repair. Please provide a brief description of the contracted services included with this project. In the table below, please itemize the services provided. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Supplies and Materials:** expenditures for articles or materials which meet one or more of the conditions outlined on page 66 of the Local Financial Reporting Manual. Please provide a brief description of the supplies and materials included with this project. In the table below, please itemize the supplies and materials. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

|  |
|--|
| Project Name: <b>Formatting Local Assessments for Online Use</b> |
| LEA: <b>Cecil County Public Schools</b>                          |
| Project Number: <b>4</b>   |

**Project Details by Object**

**Other Charges:** expenditures for employee benefits and other miscellaneous expenditures that cannot be classified elsewhere. Please provide a brief description of the other charges included in this project. In the table below, please itemize the other charges. USDE guidance requires specificity for this item. Add rows if necessary.

|                 | Year 1       | Year 2*      | Year 3*    | Year 4*    | Total        |
|-----------------|--------------|--------------|------------|------------|--------------|
| Fringe Benefits | 2,000        | 1,200        | 400        | 400        | 4,000        |
|                 |              |              |            |            | -            |
| <b>Total</b>    | <b>2,000</b> | <b>1,200</b> | <b>400</b> | <b>400</b> | <b>4,000</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Fringe Benefits include FICA and Workers Compensation at 8% of total Salaries and Wages above.**

**Property:** expenditures for the acquisition of new or replacement fixed assets including equipment, vehicles, buildings, school sites, other property, to the extent allowable under the American Recovery and Reinvestment Act. Please provide a brief description of the property expenditures included in this project. In the table below, please itemize property expenditures. USDE guidance requires specificity for this item. Add rows if necessary.

|              | Year 1   | Year 2*  | Year 3*  | Year 4*  | Total    |
|--------------|----------|----------|----------|----------|----------|
| item         |          |          |          |          | -        |
| item         |          |          |          |          | -        |
| <b>Total</b> | <b>-</b> | <b>-</b> | <b>-</b> | <b>-</b> | <b>-</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Transfers (Indirect Costs):** payments to other LEAs or transfers between major fund types within the LEA. Please provide a brief description of the transfers included in this project. In the table below, please itemize the transfers. Add rows if necessary.

|                | Year 1     | Year 2*    | Year 3*    | Year 4*    | Total        |
|----------------|------------|------------|------------|------------|--------------|
| Indirect Costs | 861        | 517        | 172        | 172        | 1,722        |
|                |            |            |            |            | -            |
| <b>Total</b>   | <b>861</b> | <b>517</b> | <b>172</b> | <b>172</b> | <b>1,722</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Based on current indirect cost rate of 3.19% of expenses less equipment.**

**Total Project Costs**

| Year 1 | Year 2* | Year 3* | Year 4* | Total  |
|--------|---------|---------|---------|--------|
| 27,861 | 16,717  | 5,572   | 5,572   | 55,722 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

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**Project Budget Summary Table**

**Cecil County**  
**Public**  
**Local School System: Schools**  
**Project Name: LMS Training**  
**Associated with Criteria: C3**  
**Project Number: 5**

| <b>Budget Categories</b>      | <b>Project Year 1 (a)</b> | <b>Project Year 2 (b)</b> | <b>Project Year 3 (c)</b> | <b>Project Year 4 (d)</b> | <b>Total (e)</b> |
|-------------------------------|---------------------------|---------------------------|---------------------------|---------------------------|------------------|
| 1. Salaries and Wages         | -                         | 72,300                    | 10,000                    | 10,000                    | 92,300           |
| 2. Contract Services          | -                         | -                         | -                         | -                         | -                |
| 3. Supplies and Materials     | -                         | -                         | -                         | -                         | -                |
| 4. Other Charges              | -                         | 5,784                     | 800                       | 800                       | 7,384            |
| 5. Property                   | -                         | -                         | -                         | -                         | -                |
| 6. Transfers (Indirect Costs) | -                         | 2,491                     | 345                       | 345                       | 3,181            |
| 7. Total Costs (lines 1-6)    | -                         | 80,575                    | 11,145                    | 11,145                    | 102,865          |

Columns (a) through (d): For each project year for which funding is requested, show the total amount requested for each applicable budget object.

Column (e): Show the total amount requested for all project years.

Local School System: Cecil County Public Schools

**Project Title: LMS Training**

**Criteria:** (associated reform criteria) **C3**

Project Number: 5

### **Project Budget Narrative**

#### **Project Description:**

**Provide professional development to stakeholders in use of learning management system and application as it relates to data interpretation for school and county based improvement efforts**

#### **Funding:**

**Each school will select three teachers to receive training then deliver to their peers in a train the trainer model. Moreover, during the school year, training will continue in after school workshops where all teachers will receive two hours of training. Total cost \$72,300 in Year 2 and \$102,865 for all four years before fixed charges.**

#### **Year by Year Description:**

**Costs for this project will primarily be incurred during year two of RTTT implementation for the original roll out. Year 3 and 4 costs are associated with training new teachers and providing retraining/ refinement training as needed.**



|   |
|---|
| Project Name: <b>LMS Training</b>       |
| LEA: <b>Cecil County Public Schools</b> |
| Project Number: <b>5</b>                |

**Project Details by Object**

**Salaries and Wages:** provide a brief description of the salaries and wages included with this project. Please provide information by employee classification. If necessary, repeat the FTE table for each classification. Include the number of FTE multiplied by the annual salary for each year.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total  |
|--------------|--------|---------|---------|---------|--------|
| FTE          |        |         |         |         | -      |
| Salary       |        | 72,300  | 10,000  | 10,000  | 92,300 |
| <b>Total</b> | -      | 72,300  | 10,000  | 10,000  | 92,300 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Provide professional development to stakeholders in use of learning management system and application as it relates to data interpretation for school and county based improvement efforts. This will include 180 days of summer training for building leads as well as hourly supplemental training for all teachers (approximately 2,400 hours of teacher time in year two). Years three and four allow for training new hires . 180 days X \$135 = 24,300. 2400 hours X \$20 = 48,000. Net cost of year one= \$72300. Years 3 and 4: 500 hours X \$20 = 10,000.**

**Contract Services:** expenditures for services performed by persons who are no on the LEA payroll, including equipment repair. Please provide a brief description of the contracted services included with this project. In the table below, please itemize the services provided. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Supplies and Materials:** expenditures for articles or materials which meet one or more of the conditions outlined on page 66 of the Local Financial Reporting Manual. Please provide a brief description of the supplies and materials included with this project. In the table below, please itemize the supplies and materials. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

|                 |                                    |
|-----------------|------------------------------------|
| Project Name:   | <b>LMS Training</b>                |
| LEA:            | <b>Cecil County Public Schools</b> |
| Project Number: | <b>5</b>                           |

**Project Details by Object**

**Other Charges:** expenditures for employee benefits and other miscellaneous expenditures that cannot be classified elsewhere. Please provide a brief description of the other charges included in this project. In the table below, please itemize the other charges. USDE guidance requires specificity for this item. Add rows if necessary.

|                 | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|-----------------|--------|---------|---------|---------|-------|
| Fringe Benefits | -      | 5,784   | 800     | 800     | 7,384 |
|                 |        |         |         |         | -     |
| <b>Total</b>    | -      | 5,784   | 800     | 800     | 7,384 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Fringe Benefits include FICA and Workers Compensation at 8% of total Salaries and Wages above.**

**Property:** expenditures for the acquisition of new or replacement fixed assets including equipment, vehicles, buildings, school sites, other property, to the extent allowable under the American Recovery and Reinvestment Act. Please provide a brief description of the property expenditures included in this project. In the table below, please itemize property expenditures. USDE guidance requires specificity for this item. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Transfers (Indirect Costs):** payments to other LEAs or transfers between major fund types within the LEA. Please provide a brief description of the transfers included in this project. In the table below, please itemize the transfers. Add rows if necessary.

|                | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|----------------|--------|---------|---------|---------|-------|
| Indirect Costs | -      | 2,491   | 345     | 345     | 3,181 |
|                |        |         |         |         | -     |
| <b>Total</b>   | -      | 2,491   | 345     | 345     | 3,181 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Based on current indirect cost rate of 3.19% of expenses less equipment.**

**Total Project Costs**

| Year 1 | Year 2* | Year 3* | Year 4* | Total   |
|--------|---------|---------|---------|---------|
| -      | 80,575  | 11,145  | 11,145  | 102,865 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

### Project Budget Summary Table

**Local School System:** Cecil County Public Schools  
**Project Name:** Develop teacher evaluation system  
**Associated with Criteria:** D (2)  
**Project Number:** 6

| <b>Budget Categories</b>      | <b>Project Year 1 (a)</b> | <b>Project Year 2 (b)</b> | <b>Project Year 3 (c)</b> | <b>Project Year 4 (d)</b> | <b>Total (e)</b> |
|-------------------------------|---------------------------|---------------------------|---------------------------|---------------------------|------------------|
| 1. Salaries and Wages         | 6,000                     | 7,500                     | -                         | -                         | 13,500           |
| 2. Contract Services          | -                         | -                         | -                         | -                         | -                |
| 3. Supplies and Materials     | -                         | -                         | -                         | -                         | -                |
| 4. Other Charges              | 480                       | 600                       | -                         | -                         | 1,080            |
| 5. Property                   | -                         | -                         | -                         | -                         | -                |
| 6. Transfers (Indirect Costs) | 207                       | 258                       | -                         | -                         | 465              |
| 7. Total Costs (lines 1-6)    | 6,687                     | 8,358                     | -                         | -                         | 15,045           |

Columns (a) through (d): For each project year for which funding is requested, show the total amount requested for each applicable budget object.

Column (e): Show the total amount requested for all project years.

**Local School System:** Cecil County Public Schools  
**Project Title:** Development of Teacher Evaluation System  
**Criteria:** (associated reform criteria) D2  
**Project Number:** 6

### Project Budget Narrative

#### Project Description:

Cecil County Public School stakeholders will work collaboratively to develop a Teacher Evaluation System that incorporates Maryland's Education Reform Act criteria.

#### Funding:

To support teacher participation, this committee will have sixty substitute days ( \$90 per day ) and sixty summer workshop days (@ \$135) during which development will occur.

#### Year by Year Description:

This process will occur during year one and two of the RTTT process. Years three and four will not require any significant funding.

|  |
|--|
| Project Name: <b>Develop teacher evaluation system</b> |
| LEA: <b>Cecil County Public Schools</b>                |
| Project Number: <b>6</b>                               |

**Project Details by Object**

**Salaries and Wages:** provide a brief description of the salaries and wages included with this project. Please provide information by employee classification. If necessary, repeat the FTE table for each classification. Include the number of FTE multiplied by the annual salary for each year.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total  |
|--------------|--------|---------|---------|---------|--------|
| FTE          |        |         |         |         | -      |
| Salary       | 6,000  | 7,500   |         |         | 13,500 |
| <b>Total</b> | 6,000  | 7,500   | -       | -       | 13,500 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **This budget is based upon 60 substitute days @ \$90 = \$5400 and 60 workshop days @ \$135 = 8,100 for a total of \$13,500 across two fiscal years. The work of this committee will begin in spring of 2011 (30 substitute days for meetings allowing for teacher representation), extend into summer 2011 workshop days (50 summer stipend days @ \$135) and finish in fall of 2011 with whatever days are needed (via substitutes for meetings) to complete the task. The actual calendar of these meetings has not yet been established, pending collaborative planning with our teacher association representatives.**

**Contract Services:** expenditures for services performed by persons who are no on the LEA payroll, including equipment repair. Please provide a brief description of the contracted services included with this project. In the table below, please itemize the services provided. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
|              |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Supplies and Materials:** expenditures for articles or materials which meet one or more of the conditions outlined on page 66 of the Local Financial Reporting Manual. Please provide a brief description of the supplies and materials included with this project. In the table below, please itemize the supplies and materials. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

|  |
|--|
| Project Name: <b>Develop teacher evaluation system</b> |
| LEA: <b>Cecil County Public Schools</b>                |
| Project Number: <b>6</b>                               |

**Project Details by Object**

**Other Charges:** expenditures for employee benefits and other miscellaneous expenditures that cannot be classified elsewhere. Please provide a brief description of the other charges included in this project. In the table below, please itemize the other charges. USDE guidance requires specificity for this item. Add rows if necessary.

|                 | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|-----------------|--------|---------|---------|---------|-------|
| Fringe Benefits | 480    | 600     | -       | -       | 1,080 |
|                 |        |         |         |         | -     |
| <b>Total</b>    | 480    | 600     | -       | -       | 1,080 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Fringe Benefits include FICA and Workers Compensation at 8% of total Salaries and Wages above. (estimate based on 7.65% Soc Sec/FICA and .269% Workers' Comp)**

**Property:** expenditures for the acquisition of new or replacement fixed assets including equipment, vehicles, buildings, school sites, other property, to the extent allowable under the American Recovery and Reinvestment Act. Please provide a brief description of the property expenditures included in this project. In the table below, please itemize property expenditures. USDE guidance requires specificity for this item. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Transfers (Indirect Costs):** payments to other LEAs or transfers between major fund types within the LEA. Please provide a brief description of the transfers included in this project. In the table below, please itemize the transfers. Add rows if necessary.

|                | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|----------------|--------|---------|---------|---------|-------|
| Indirect Costs | 207    | 258     | -       | -       | 465   |
|                |        |         |         |         | -     |
| <b>Total</b>   | 207    | 258     | -       | -       | 465   |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Based on current indirect cost rate of 3.19% of expenses less equipment.**

**Total Project Costs**

| Year 1 | Year 2* | Year 3* | Year 4* | Total  |
|--------|---------|---------|---------|--------|
| 6,687  | 8,358   | -       | -       | 15,045 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Project Budget Summary Table**

**Local School System:** Cecil County Public Schools

**Project Name:** Educational Program Audits

**Associated with Criteria:** D (5)

**Project Number:** 7

| <b>Budget Categories</b>      | <b>Project Year 1 (a)</b> | <b>Project Year 2 (b)</b> | <b>Project Year 3 (c)</b> | <b>Project Year 4 (d)</b> | <b>Total (e)</b> |
|-------------------------------|---------------------------|---------------------------|---------------------------|---------------------------|------------------|
| 1. Salaries and Wages         | -                         | -                         | -                         | -                         | -                |
| 2. Contract Services          | -                         | -                         | -                         | -                         | -                |
| 3. Supplies and Materials     | -                         | 10,000                    | -                         | -                         | 10,000           |
| 4. Other Charges              | -                         | -                         | -                         | -                         | -                |
| 5. Property                   | -                         | -                         | -                         | -                         | -                |
| 6. Transfers (Indirect Costs) | -                         | 319                       | -                         | -                         | 319              |
| 7. Total Costs (lines 1-6)    | -                         | 10,319                    | -                         | -                         | 10,319           |

Columns (a) through (d): For each project year for which funding is requested, show the total amount requested for each applicable budget object.

Column (e): Show the total amount requested for all project years.

**Local School System:** Cecil County Public Schools  
**Project Title:** Educational Program Audits  
**Criteria:** (associated reform criteria) D (5)  
**Project Number:** 7

**Project Budget Narrative**

**Project Description:**

**Conduct instructional audits in all schools and use subsequent data to generate professional learning opportunities for teachers and administrators.**

**Funding:**

**To facilitate data collection during onsite audits, CCPS will purchase mobile equipments, e.g., PC tablet computers or iPad computers. 20 items @ \$500**

**Year by Year Description:**

**Purchases will occur in year 2 to support audits occurring in years 3, 4, 5.**



|                 |                                    |
|-----------------|------------------------------------|
| Project Name:   | <b>Educational Program Audits</b>  |
| LEA:            | <b>Cecil County Public Schools</b> |
| Project Number: | <b>7</b>                           |

**Project Details by Object**

**Salaries and Wages:** provide a brief description of the salaries and wages included with this project. Please provide information by employee classification. If necessary, repeat the FTE table for each classification. Include the number of FTE multiplied by the annual salary for each year.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| FTE          |        |         |         |         | -     |
| Salary       |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Contract Services:** expenditures for services performed by persons who are no on the LEA payroll, including equipment repair. Please provide a brief description of the contracted services included with this project. In the table below, please itemize the services provided. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Supplies and Materials:** expenditures for articles or materials which meet one or more of the conditions outlined on page 66 of the Local Financial Reporting Manual. Please provide a brief description of the supplies and materials included with this project. In the table below, please itemize the supplies and materials. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total  |
|--------------|--------|---------|---------|---------|--------|
| item         |        | 10,000  |         |         | 10,000 |
| item         |        |         |         |         | -      |
| <b>Total</b> | -      | 10,000  | -       | -       | 10,000 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. 20 portable PC tablets or iPad devices (@ \$500) will be purchased in year 2 for use in years 2, 3, 4.

|                 |                                    |
|-----------------|------------------------------------|
| Project Name:   | <b>Educational Program Audits</b>  |
| LEA:            | <b>Cecil County Public Schools</b> |
| Project Number: | <b>7</b>                           |

**Project Details by Object**

**Other Charges:** expenditures for employee benefits and other miscellaneous expenditures that cannot be classified elsewhere. Please provide a brief description of the other charges included in this project. In the table below, please itemize the other charges. USDE guidance requires specificity for this item. Add rows if necessary.

|                 | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|-----------------|--------|---------|---------|---------|-------|
| Fringe Benefits | -      | -       | -       | -       | -     |
|                 |        |         |         |         | -     |
| <b>Total</b>    | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Fringe Benefits include FICA and Workers Compensation at 8% of total Salaries and Wages above.**

**Property:** expenditures for the acquisition of new or replacement fixed assets including equipment, vehicles, buildings, school sites, other property, to the extent allowable under the American Recovery and Reinvestment Act. Please provide a brief description of the property expenditures included in this project. In the table below, please itemize property expenditures. USDE guidance requires specificity for this item. Add rows if necessary.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------|--------|---------|---------|---------|-------|
| item         |        |         |         |         | -     |
| item         |        |         |         |         | -     |
| <b>Total</b> | -      | -       | -       | -       | -     |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Transfers (Indirect Costs):** payments to other LEAs or transfers between major fund types within the LEA. Please provide a brief description of the transfers included in this project. In the table below, please itemize the transfers. Add rows if necessary.

|                | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|----------------|--------|---------|---------|---------|-------|
| Indirect Costs | -      | 319     | -       | -       | 319   |
|                |        |         |         |         | -     |
| <b>Total</b>   | -      | 319     | -       | -       | 319   |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Based on current indirect cost rate of 3.19% of expenses less equipment.**

**Total Project Costs**

| Year 1 | Year 2* | Year 3* | Year 4* | Total  |
|--------|---------|---------|---------|--------|
| -      | 10,319  | -       | -       | 10,319 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Project Budget Summary Table**

**Local School System:** Cecil County Public Schools

**Project Name:** Professional Development for Low Performing Schools

**Associated with Criteria:** E (2)

**Project Number:** 8

| <b>Budget Categories</b>      | <b>Project Year 1 (a)</b> | <b>Project Year 2 (b)</b> | <b>Project Year 3 (c)</b> | <b>Project Year 4 (d)</b> | <b>Total (e)</b> |
|-------------------------------|---------------------------|---------------------------|---------------------------|---------------------------|------------------|
| 1. Salaries and Wages         | 15,000                    | 39,000                    | 39,000                    | 39,000                    | 132,000          |
| 2. Contract Services          | -                         | 10,000                    | 10,000                    | 10,000                    | 30,000           |
| 3. Supplies and Materials     | 1,000                     | 2,000                     | 2,000                     | 2,000                     | 7,000            |
| 4. Other Charges              | 1,200                     | 3,120                     | 3,120                     | 3,120                     | 10,560           |
| 5. Property                   | -                         | -                         | -                         | -                         | -                |
| 6. Transfers (Indirect Costs) | 549                       | 1,726                     | 1,726                     | 1,726                     | 5,727            |
| 7. Total Costs (lines 1-6)    | 17,749                    | 55,846                    | 55,846                    | 55,846                    | 185,287          |

Columns (a) through (d): For each project year for which funding is requested, show the total amount requested for each applicable budget object.

Column (e): Show the total amount requested for all project years.

**Local School System:** Cecil County Public Schools  
**Project Title:** Professional Development for Low Performing Schools  
**Criteria:** (associated reform criteria) E (2)  
**Project Number:** 8

### Project Budget Narrative

#### Project Description:

In the identified low performing schools, provide professional development activities to enhance teacher capacity to deliver effective, collaborative and differentiated instruction designed to close the achievement gaps.

#### Funding:

Professional development will be provided on topics identified by Teacher Capacity Needs Assessment protocols. The activities will occur as a combination of substitute release days (100 @ \$90), after school workshops (300 hours @ \$20) and --beginning with year 2-- summer training institutes 200 days @ \$120).

#### Year by Year Description:

**Year 1:** Substitute and afterschool workshops during the balance of 2010-11.  
**Years 2-3-4:** In addition to the opportunities above, intensive summer workshops will be provided to the staff members of identified schools. Summer 2011, 2012, 2013

|                 |  |
|-----------------|--|
| Project Name:   | <b>Professional Development for Low Performing Schools</b> |
| LEA:            | <b>Cecil County Public Schools</b>                         |
| Project Number: | <b>8</b>   |

**Project Details by Object**

**Salaries and Wages:** provide a brief description of the salaries and wages included with this project. Please provide information by employee classification. If necessary, repeat the FTE table for each classification. Include the number of FTE multiplied by the annual salary for each year.

|              | Year 1 | Year 2* | Year 3* | Year 4* | Total   |
|--------------|--------|---------|---------|---------|---------|
| FTE          |        |         |         |         | -       |
| Salary       | 15,000 | 39,000  | 39,000  | 39,000  | 132,000 |
| <b>Total</b> | 15,000 | 39,000  | 39,000  | 39,000  | 132,000 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Year 1 allocations based on: 100 substitute days (@ \$90) and 300 after school workshop hours (@ \$20). Years 2-3-4 include those opportunities as well as a 5 day summer institute for 50 teachers (200 x \$120)**

**Contract Services:** expenditures for services performed by persons who are no on the LEA payroll, including equipment repair. Please provide a brief description of the contracted services included with this project. In the table below, please itemize the services provided. Add rows if necessary.

|                      | Year 1 | Year 2* | Year 3* | Year 4* | Total  |
|----------------------|--------|---------|---------|---------|--------|
| Training consultants |        | 10,000  | 10,000  | 10,000  | 30,000 |
| item                 |        |         |         |         | -      |
| <b>Total</b>         | -      | 10,000  | 10,000  | 10,000  | 30,000 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. Summer training institutes (starting in funding year 2) will benefit from professional leadership of consultants such as those associated with University of Kansas Learning Center, experts on differentiation and/or inclusion of technology in instruction.

**Supplies and Materials:** expenditures for articles or materials which meet one or more of the conditions outlined on page 66 of the Local Financial Reporting Manual. Please provide a brief description of the supplies and materials included with this project. In the table below, please itemize the supplies and materials. Add rows if necessary.

|                    | Year 1 | Year 2* | Year 3* | Year 4* | Total |
|--------------------|--------|---------|---------|---------|-------|
| Training materials | 1,000  | 2,000   | 2,000   | 2,000   | 7,000 |
| item               |        |         |         |         | -     |
| <b>Total</b>       | 1,000  | 2,000   | 2,000   | 2,000   | 7,000 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **These funds will support texts for professional learning community study groups and other print materials needed for the summer institutes (years 2-3-4). The specific titles are not yet identified, but ASCD texts, for example, average \$25 each, allowing for 40 in year 1 and up to 80 in subsequent years as we expand the program to other schools who may enter advanced stages of improvement status.**

|                 |  |
|-----------------|--|
| Project Name:   | <b>Professional Development for Low Performing Schools</b> |
| LEA:            | <b>Cecil County Public Schools</b>                         |
| Project Number: | <b>8</b>   |

**Project Details by Object**

**Other Charges:** expenditures for employee benefits and other miscellaneous expenditures that cannot be classified elsewhere. Please provide a brief description of the other charges included in this project. In the table below, please itemize the other charges. USDE guidance requires specificity for this item. Add rows if necessary.

|                 | Year 1       | Year 2*      | Year 3*      | Year 4*      | Total         |
|-----------------|--------------|--------------|--------------|--------------|---------------|
| Fringe Benefits | 1,200        | 3,120        | 3,120        | 3,120        | 10,560        |
|                 |              |              |              |              | -             |
| <b>Total</b>    | <b>1,200</b> | <b>3,120</b> | <b>3,120</b> | <b>3,120</b> | <b>10,560</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Fringe Benefits include FICA and Workers Compensation at 8% of total Salaries and Wages above.**

**Property:** expenditures for the acquisition of new or replacement fixed assets including equipment, vehicles, buildings, school sites, other property, to the extent allowable under the American Recovery and Reinvestment Act. Please provide a brief description of the property expenditures included in this project. In the table below, please itemize property expenditures. USDE guidance requires specificity for this item. Add rows if necessary.

|              | Year 1   | Year 2*  | Year 3*  | Year 4*  | Total    |
|--------------|----------|----------|----------|----------|----------|
| item         |          |          |          |          | -        |
| item         |          |          |          |          | -        |
| <b>Total</b> | <b>-</b> | <b>-</b> | <b>-</b> | <b>-</b> | <b>-</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Transfers (Indirect Costs):** payments to other LEAs or transfers between major fund types within the LEA. Please provide a brief description of the transfers included in this project. In the table below, please itemize the transfers. Add rows if necessary.

|                | Year 1     | Year 2*      | Year 3*      | Year 4*      | Total        |
|----------------|------------|--------------|--------------|--------------|--------------|
| Indirect Costs | 549        | 1,726        | 1,726        | 1,726        | 5,727        |
|                |            |              |              |              | -            |
| <b>Total</b>   | <b>549</b> | <b>1,726</b> | <b>1,726</b> | <b>1,726</b> | <b>5,727</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Based on current indirect cost rate of 3.19% of expenses less equipment.**

**Total Project Costs**

| Year 1 | Year 2* | Year 3* | Year 4* | Total   |
|--------|---------|---------|---------|---------|
| 17,749 | 55,846  | 55,846  | 55,846  | 185,287 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.







**Project Budget Summary Table**

**Local School System:** Cecil County Public Schools

**Project Name:** Extended STEM Learning Opportunities for Low Performing Schools

**Associated with Criteria:** E (2)

**Project Number:** 9

| <b>Budget Categories</b>      | <b>Project Year 1 (a)</b> | <b>Project Year 2 (b)</b> | <b>Project Year 3 (c)</b> | <b>Project Year 4 (d)</b> | <b>Total (e)</b> |
|-------------------------------|---------------------------|---------------------------|---------------------------|---------------------------|------------------|
| 1. Salaries and Wages         | 43,200                    | 43,200                    | 43,200                    | 43,200                    | 172,800          |
| 2. Contract Services          | 36,600                    | 36,600                    | 36,600                    | 36,600                    | 146,400          |
| 3. Supplies and Materials     | 5,000                     | 5,000                     | 5,000                     | 5,000                     | 20,000           |
| 4. Other Charges              | 3,456                     | 3,456                     | 3,456                     | 3,456                     | 13,824           |
| 5. Property                   |                           |                           |                           |                           |                  |
| 6. Transfers (Indirect Costs) | 2,815                     | 2,815                     | 2,815                     | 2,815                     | 11,260           |
| 7. Total Costs (lines 1-6)    | 91,071                    | 91,071                    | 91,071                    | 91,071                    | 364,284          |

Columns (a) through (d): For each project year for which funding is requested, show the total amount requested for each applicable budget object.

Column (e): Show the total amount requested for all project years.

**Local School System:** Cecil County Public Schools  
**Project Title:** Extended STEM Learning Opportunities for Low Performing Schools  
**Criteria:** (associated reform criteria) E (2)  
**Project Number:** 9

### Project Budget Narrative

#### Project Description:

Students who experience difficulty meeting the expectations of MSA proficiency require additional learning opportunities. These will come from extended day and extended year (summer) events designed to meet the needs of these students. We will incorporate STEM pipeline content in the preparation of summer programs both for content relevance and to introduce STEM content to under represented audiences.

#### Funding:

The funding projections are based on the following:

After school programs: 4 teachers x 6 hours/week x 30 weeks x \$30/hour

Summer programs: 8 teachers x 6 hours/ day x 15 days x \$30/hour AND 4 buses X 15 days x \$250/day.

Materials for programs are estimated at \$50 per participant

#### Year by Year Description:

School year, extended day programs can begin during year 1.

Summer programs will operate in summers 2011 to 2014.

|                 |  |
|-----------------|--|
| Project Name:   | <b>Extended STEM Learning Opportunities for Low Performing Schools</b> |
| LEA:            | <b>Cecil County Public Schools</b>                                     |
| Project Number: | <b>9</b>   |

**Project Details by Object**

**Salaries and Wages:** provide a brief description of the salaries and wages included with this project. Please provide information by employee classification. If necessary, repeat the FTE table for each classification. Include the number of FTE multiplied by the annual salary for each year.

|              | Year 1        | Year 2*       | Year 3*       | Year 4*       | Total          |
|--------------|---------------|---------------|---------------|---------------|----------------|
| FTE          |               |               |               |               | -              |
| Salary       | 43,200        | 43,200        | 43,200        | 43,200        | 172,800        |
| <b>Total</b> | <b>43,200</b> | <b>43,200</b> | <b>43,200</b> | <b>43,200</b> | <b>172,800</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **After school program: 4 teachers x 6 hours/week x 30 weeks x \$30/hour. Summer programs: 8 teachers x 6 hours/ day x 15 days x \$30/hour**

**Contract Services:** expenditures for services performed by persons who are no on the LEA payroll, including equipment repair. Please provide a brief description of the contracted services included with this project. In the table below, please itemize the services provided. Add rows if necessary.

|              | Year 1        | Year 2*       | Year 3*       | Year 4*       | Total          |
|--------------|---------------|---------------|---------------|---------------|----------------|
| Bus service  | 36,600        | 36,600        | 36,600        | 36,600        | 146,400        |
| item         |               |               |               |               | -              |
| <b>Total</b> | <b>36,600</b> | <b>36,600</b> | <b>36,600</b> | <b>36,600</b> | <b>146,400</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **After School: 3 buses x 90 days x \$80= \$21,600 Summer: 4 buses x 15 days x \$250= \$15,000**

**Supplies and Materials:** expenditures for articles or materials which meet one or more of the conditions outlined on page 66 of the Local Financial Reporting Manual. Please provide a brief description of the supplies and materials included with this project. In the table below, please itemize the supplies and materials. Add rows if necessary.

|                     | Year 1       | Year 2*      | Year 3*      | Year 4*      | Total         |
|---------------------|--------------|--------------|--------------|--------------|---------------|
| classroom materials | 5,000        | 5,000        | 5,000        | 5,000        | 20,000        |
| item                |              |              |              |              | -             |
| <b>Total</b>        | <b>5,000</b> | <b>5,000</b> | <b>5,000</b> | <b>5,000</b> | <b>20,000</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **For the combined programs, estimated \$50 per each of 100 participants. As an estimate, student workbooks @ \$20 each x 2 subjects, and consumable science materials, average \$10 per participant.**

|                 |  |
|-----------------|--|
| Project Name:   | <b>Extended STEM Learning Opportunities for Low Performing Schools</b> |
| LEA:            | <b>Cecil County Public Schools</b>                                     |
| Project Number: | <b>9</b>   |

**Project Details by Object**

**Other Charges:** expenditures for employee benefits and other miscellaneous expenditures that cannot be classified elsewhere. Please provide a brief description of the other charges included in this project. In the table below, please itemize the other charges. USDE guidance requires specificity for this item. Add rows if necessary.

|                 | Year 1       | Year 2*      | Year 3*      | Year 4*      | Total         |
|-----------------|--------------|--------------|--------------|--------------|---------------|
| Fringe Benefits | 3,456        | 3,456        | 3,456        | 3,456        | 13,824        |
|                 |              |              |              |              | -             |
| <b>Total</b>    | <b>3,456</b> | <b>3,456</b> | <b>3,456</b> | <b>3,456</b> | <b>13,824</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Fringe Benefits include FICA and Workers Compensation at 8% of total Salaries and Wages above. (estimate based on 7.65% Soc Sec/FICA and .269% Workers' Comp)**

**Property:** expenditures for the acquisition of new or replacement fixed assets including equipment, vehicles, buildings, school sites, other property, to the extent allowable under the American Recovery and Reinvestment Act. Please provide a brief description of the property expenditures included in this project. In the table below, please itemize property expenditures. USDE guidance requires specificity for this item. Add rows if necessary.

|              | Year 1   | Year 2*  | Year 3*  | Year 4*  | Total    |
|--------------|----------|----------|----------|----------|----------|
| item         |          |          |          |          | -        |
| item         |          |          |          |          | -        |
| <b>Total</b> | <b>-</b> | <b>-</b> | <b>-</b> | <b>-</b> | <b>-</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.

**Transfers (Indirect Costs):** payments to other LEAs or transfers between major fund types within the LEA. Please provide a brief description of the transfers included in this project. In the table below, please itemize the transfers. Add rows if necessary.

|                | Year 1       | Year 2*      | Year 3*      | Year 4*      | Total         |
|----------------|--------------|--------------|--------------|--------------|---------------|
| Indirect Costs | 2,815        | 2,815        | 2,815        | 2,815        | 11,260        |
|                |              |              |              |              | -             |
| <b>Total</b>   | <b>2,815</b> | <b>2,815</b> | <b>2,815</b> | <b>2,815</b> | <b>11,260</b> |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here. **Based on current indirect cost rate of 3.19% of expenses less equipment.**

**Total Project Costs**

| Year 1 | Year 2* | Year 3* | Year 4* | Total   |
|--------|---------|---------|---------|---------|
| 91,071 | 91,071  | 91,071  | 91,071  | 364,284 |

Please provide complete details for year 1. For years 2-4, please provide an estimate of costs and also provide the basis for this estimate here.