

Secondary

ILLINOIS STATE BOARD OF EDUCATION
 Career Development
 100 North First Street
 Springfield, Illinois 62777-0001

PROJECT NUMBER
AGENCY NAME
EFE NUMBER

- Initial Application
 Amendment

LEA SUBMISSION DATE

**CAREER AND TECHNICAL EDUCATION
 IMPROVEMENT GRANT
 Budget Information**

FUNCTION AND OBJECT CODES	BUDGET	OTHER INFORMATION
1000 INSTRUCTION		Please use this space to further explain any of the following items:
SALARIES		If salaries are budgeted, provide the staff person's name, title, % of time paid from the grant and salary rate.
110 Salaries - Teacher	\$	Describe out-of-state travel requests including function attending, date of travel, benefit to the project, number of travelers, and projected cost.
114 Salaries - Interpreters	\$	If "Other" expenditures are budgeted, provide a description of the proposed expenditure.
115 Salaries - Tutors, Notetakers, etc.	\$	
117 Salaries - Teacher Aide/Paraprofessional	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
EMPLOYEE BENEFITS		
200 Employee Benefits	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
PURCHASED SERVICES		
323 Repairs and Maintenance Services	\$	
325 Rentals - Equipment	\$	
380 Workers' and Unemployment Compensation	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
SUPPLIES AND MATERIALS		
414 Curriculum/Supplemental Material	\$	
470 Software	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
CAPITAL OUTLAY		
541 Instructional Equipment	\$	
542 Special Adapted Equipment/Devices	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
1000 TOTAL	\$	

Please attach additional pages if necessary.

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FUNCTION AND OBJECT CODES	BUDGET	OTHER INFORMATION
2120 GUIDANCE SERVICES		Please use this space to further explain any of the following items: If salaries are budgeted, provide the staff person's name, title, % of time paid from the grant and salary rate. Describe out-of-state travel requests including function attending, date of travel, benefit to the project, number of travelers, and projected cost. If "Other" expenditures are budgeted, provide a description of the proposed expenditure.
SALARIES		
112 Salaries - Spec. Pops Coord.	\$	
113 Salaries - Secretary	\$	
116 Salaries - Placement Coord.	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
EMPLOYEE BENEFITS		
200 Employee Benefits	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
PURCHASED SERVICES		
314 Prof. Services - Consultants	\$	
319 Other Prof. and Tech Services	\$	
323 Repairs and Maintenance Services	\$	
325 Rentals	\$	
332 Travel	\$	
340 Communication - Telephone, Postage	\$	
350 Advertising	\$	
360 Printing and Binding	\$	
380 Workers' and Unemployment Compensation	\$	
391 Photocopying	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
SUPPLIES AND MATERIALS		
400 Supplies and Materials	\$	
470 Software	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	

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FUNCTION AND OBJECT CODES	BUDGET	OTHER INFORMATION
2120 GUIDANCE SERVICES (Continued)		Please use this space to further explain any of the following items: If salaries are budgeted, provide the staff person's name, title, % of time paid from the grant and salary rate. Describe out-of-state travel requests including function attending, date of travel, benefit to the project, number of travelers, and projected cost. If "Other" expenditures are budgeted, provide a description of the proposed expenditure.
CAPITAL OUTLAY		
543 Office Equipment.....	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
2120 TOTAL	\$	
2210 IMPROVEMENT OF INSTRUCTION SERVICES		
SALARIES		
111 Coordinator -Project	\$	
120 Temp. Salaries	\$	
130 Overtime Salaries	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
EMPLOYEE BENEFITS		
200 Employee Benefits	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
PURCHASED SERVICES		
314 Prof. Services - Consultants	\$	
319 Other Prof. and Tech Services	\$	
325 Rentals - Meeting Room	\$	
332 Travel	\$	
360 Printing and Binding	\$	
380 Workers' and Unemployment Compensation	\$	
391 Photocopying	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
SUPPLIES AND MATERIALS		
400 Supplies and Materials	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
2210 TOTAL	\$	

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FUNCTION AND OBJECT CODES	BUDGET	OTHER INFORMATION
2300 GENERAL ADMINISTRATION		Please use this space to further explain any of the following items: If salaries are budgeted, provide the staff person's name, title, % of time paid from the grant and salary rate. Describe out-of-state travel requests including function attending, date of travel, benefit to the project, number of travelers, and projected cost. If "Other" expenditures are budgeted, provide a description of the proposed expenditure.
SALARIES		
111 Salaries - Director	\$	
113 Salaries - Secretary	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
EMPLOYEE BENEFITS		
200 Employee Benefits	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
PURCHASED SERVICES		
316 Data Processing - Computer Time	\$	
317 Audit Services	\$	
318 Legal Services	\$	
323 Repairs and Maintenance Services	\$	
325 Rentals	\$	
332 Travel	\$	
333 Food-Related Expenditures	\$	
340 Communication - Telephone, Postage	\$	
350 Advertising	\$	
360 Printing and Binding	\$	
380 Insurance - Workers' and Unemployment Compensation, Liability	\$	
391 Photocopying	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	
SUPPLIES AND MATERIALS		
400 Supplies and Materials	\$	
440 Periodicals	\$	
470 Software	\$	
Other (specify by object)	\$	
_____	\$	
Subtotal	\$	

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**CAREER AND TECHNICAL EDUCATION
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 Budget Information**

FUNCTION AND OBJECT CODES	BUDGET	OTHER INFORMATION
2300 GENERAL ADMINISTRATION (Continued)		Please use this space to further explain any of the following items: If salaries are budgeted, provide the staff person's name, title, % of time paid from the grant and salary rate. Describe out-of-state travel requests including function attending, date of travel, benefit to the project, number of travelers, and projected cost. If "Other" expenditures are budgeted, provide a description of the proposed expenditure.
CAPITAL OUTLAY		
543 Office Equipment.....	\$	
Other (specify by object)		
_____	\$	
Subtotal	\$	
2300 TOTAL	\$	
2520 FISCAL SERVICES		
SALARIES		
119 Salaries - Bookkeeper	\$	
Other (specify by object)		
_____	\$	
Subtotal	\$	
EMPLOYEE BENEFITS		
200 Employee Benefits	\$	
Other (specify by object)		
_____	\$	
Subtotal	\$	
PURCHASED SERVICES		
380 Workers' and Unemployment Compensation	\$	
Other (specify by object)		
_____	\$	
Subtotal	\$	
SUPPLIES AND MATERIALS		
400 Supplies and Materials	\$	
Other (specify by object)		
_____	\$	
Subtotal	\$	
2520 TOTAL	\$	
2540 OPERATION AND MAINTENANCE OF PLANT SERVICES		
PURCHASED SERVICES		
323 Repair and Maintenance Services	\$	
325 Rentals - Office	\$	
370 Water/Sewer Services	\$	
Other (specify by object)		
_____	\$	
Subtotal	\$	

Please attach additional pages if necessary.

B

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- Initial Budget
- Amendment

LEA SUBMISSION DATE

ILLINOIS STATE BOARD OF EDUCATION
 Career Development
 100 North First Street
 Springfield, Illinois 62777-0001

ISBE USE ONLY

ISBE APPROVAL DATE	
BEGIN	END

**CAREER AND TECHNICAL EDUCATION
 IMPROVEMENT GRANT
 Budget Summary and Payment Schedule**

Use whole dollars only.
OMIT DECIMAL PLACES, e.g., \$2536.

FISCAL YEAR		SOURCE OF FUNDS CODE		REGION, COUNTY, DISTRICT, TYPE CODE						PAYMENT SCHEDULE
04		322000								
AGENCY NAME				CONTACT PERSON			TELEPHONE NUMBER			
							()		1 July-August (81)	
Function Number	EXPENDITURE ACCOUNT	SALARIES	EMPLOYEE BENEFITS	PURCHASED SERVICES	SUPPLIES & MATERIALS	CAPITAL OUTLAY**	TRANSFERS	TOTAL		
		3	4	5	6	7	9			
1	2	(Obj. 100's)	(Obj. 200's)	(Obj. 300's)	(Obj. 400's)	(Obj. 500's)	(Obj. 700's)	11		
1	1000	Instruction							3 October (83)	
3	2120	Guidance Services							4 November (84)	
7	2210	Improvement of Instruction Services							5 December (85)	
10	2300	General Administration							6 January (86)	
13	2520	Fiscal Services*							7 February (87)	
15	2540	Operation & Maintenance of Plant Services							8 March (88)	
25	3000	Community Services							9 April (89)	
26	4100	Payments to Other Govt. Units							10 May (90)	
28	Total Direct Costs								11 June (91)	
29	Approved Indirect Costs X								12 July-August (92)	
30	TOTAL BUDGET								TOTAL \$	

* If expenditures are shown, the indirect cost rate cannot be used.

** Not applicable to all grants, and in no instances can Capital Outlay or Facilities Acquisition & Construction Services be included in the indirect cost application.

ILLINOIS STATE BOARD OF EDUCATION
 Career Development and Preparation, E-426
 100 North First Street
 Springfield, Illinois 62777-0001

**FY 2004 CAREER AND TECHNICAL EDUCATION IMPROVEMENT GRANT
 Verification Form**

SYSTEM NAME	EFE #
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For FY04, the Revised Program Improvement Grant has been merged with the Administrative Grant, Tech Prep, Work-Based Learning and Elementary Career Development Program grants for the purpose of increasing local programmatic flexibility and reducing paperwork. This change will improve accountability for the use of CTE funds. This change is intended to support improvement in career and technical education (CTE) quality instructional program-related activities that enhance CTE student achievement and promote the expansion of career development opportunities for students. The focus of this grant may shift with the adoption by the State Board of a comprehensive Career Development Policy.

Assurances: Members of the EFE System Board of Control and directors of participating Area Career Centers have been informed about and understand the change in the flow of the CTE and career development-related funds for FY04.

Chair, Board of Control

Date