

Initial Budget Amendment (No. _____) **LEA Comprehensive Budget**
 Revised Initial Budget ARRA Regular

ILLINOIS STATE BOARD OF EDUCATION
 Innovation and Improvement Division
 100 North First Street, N-242
 Springfield, Illinois 62777-0001

FY 2012 ARRA
School Improvement Grant - Section 1003(g)
Budget Summary

Use whole dollars only. OMIT COMMAS AND DECIMAL PLACES, e.g., 2536

LEA Comprehensive Budget – Year 1 Implementation

ISBE USE ONLY	PROGRAM APPROVAL DATE AND INITIALS	
	TOTAL FUNDS	
	CARRYOVER FUNDS	
	CURRENT FUNDS	
	BEGIN DATE	END DATE 08/31/2012

FISCAL YEAR 12	SOURCE OF FUNDS CODE 4855 - 12	REGION, COUNTY, DISTRICT, TYPE CODE	SUBMISSION DATE
DISTRICT NAME AND NUMBER			
CONTACT PERSON		TELEPHONE NUMBER (Include Area Code)	
E-MAIL ADDRESS		FAX NUMBER (Include Area Code)	

Directions: Prior to preparing this Budget Summary and Payment Schedule request, please refer to the "State and Federal Grant Administration Policy and Fiscal Requirements and Procedures" handbook that can be accessed at <http://www.isbe.net/funding/pdf/fiscal_procedure_handbk.pdf>. Obligations of funds based on this budget request cannot begin prior to July 1, or receipt of a substantially approvable budget request, whichever is later.

LINE	FUNCTION NUMBER (1)	EXPENDITURE ACCOUNT (2)	SALARIES (3)	EMPLOYEE BENEFITS (4)	PURCHASED SERVICES (5)	SUPPLIES AND MATERIALS (6)	CAPITAL OUTLAY** (7)	OTHER OBJECTS (8)	NON-CAPITALIZED EQUIPMENT** (9)	TOTAL (11)
			(Obj. 100s)	(Obj. 200s)	(Obj. 300s)	(Obj. 400s)	(Obj. 500s)	(Obj. 600s)	(Obj. 700s)	
1	1000	Instruction								
2	2110	Attendance & Social Work Services								
3	2120	Guidance Services								
7	2210	Improvement of Instruction Services								
8	2220	Educational Media Services								
9	2230	Assessment & Testing								
10	2300	General Administration								
11	2400	School Administration								
13	2520	Fiscal Services*								
15	2540	Operation & Maintenance of Plant Services								
16	2550	Pupil Transportation Services								
18	2570	Internal Services*								
19	2610	Direction of Central Support Services								
20	2620	Planning, Research, Development & Evaluation Services								
21	2630	Information Services								
22	2640	Staff Services*								
23	2660	Data Processing Services*								
24	2900	Other Support Services								
25	3000	Community Services								
26	4000	Payments to Other Districts or Government Units								
28	Total Direct Costs									
30	TOTAL BUDGET									

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

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

_____ Date _____ Original Signature of Superintendent or Administrator _____ Date _____ Original Signature of ISBE Division Administrator, Innovation & Improvement

Initial Budget Amendment (No. _____) LEA Budget
 Revised Initial Budget ARRA Regular

FISCAL YEAR 12	SOURCE OF FUNDS CODE 4855 - 12	REGION, COUNTY, DISTRICT, TYPE CODE	SUBMISSION DATE
DISTRICT NAME AND NUMBER			
CONTACT PERSON		TELEPHONE NUMBER (Include Area Code)	
E-MAIL ADDRESS		FAX NUMBER (Include Area Code)	

ILLINOIS STATE BOARD OF EDUCATION
 Innovation and Improvement Division
 100 North First Street, N-242
 Springfield, Illinois 62777-0001

FY 2012 ARRA
School Improvement Grant - Section 1003(g)
Budget Summary

Use whole dollars only. OMIT COMMAS AND DECIMAL PLACES, e.g., 2536

LEA Budget – Year 1 Implementation

ISBE USE ONLY	PROGRAM APPROVAL DATE AND INITIALS	
	TOTAL FUNDS	
	CARRYOVER FUNDS	
	CURRENT FUNDS	
	BEGIN DATE	END DATE 08/31/2012

Directions: Prior to preparing this Budget Summary and Payment Schedule request, please refer to the "State and Federal Grant Administration Policy and Fiscal Requirements and Procedures" handbook that can be accessed at <http://www.isbe.net/funding/pdf/fiscal_procedure_handbk.pdf>. Obligations of funds based on this budget request cannot begin prior to July 1, or receipt of a substantially approvable budget request, whichever is later.

LINE	FUNCTION NUMBER (1)	EXPENDITURE ACCOUNT (2)	SALARIES (3)	EMPLOYEE BENEFITS (4)	PURCHASED SERVICES (5)	SUPPLIES AND MATERIALS (6)	CAPITAL OUTLAY** (7)	OTHER OBJECTS (8)	NON-CAPITALIZED EQUIPMENT** (9)	TOTAL (11)
			(Obj. 100s)	(Obj. 200s)	(Obj. 300s)	(Obj. 400s)	(Obj. 500s)	(Obj. 600s)	(Obj. 700s)	
1	1000	Instruction								
2	2110	Attendance & Social Work Services								
3	2120	Guidance Services								
7	2210	Improvement of Instruction Services								
8	2220	Educational Media Services								
9	2230	Assessment & Testing								
10	2300	General Administration								
11	2400	School Administration								
13	2520	Fiscal Services*								
15	2540	Operation & Maintenance of Plant Services								
16	2550	Pupil Transportation Services								
18	2570	Internal Services*								
19	2610	Direction of Central Support Services								
20	2620	Planning, Research, Development & Evaluation Services								
21	2630	Information Services								
22	2640	Staff Services*								
23	2660	Data Processing Services*								
24	2900	Other Support Services								
25	3000	Community Services								
26	4000	Payments to Other Districts or Government Units								
28	Total Direct Costs									
30	TOTAL BUDGET									

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

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

_____ Date _____ Original Signature of Superintendent or Administrator _____ Date _____ Original Signature of ISBE Division Administrator, Innovation & Improvement

Initial Budget
 Amendment (No. _____)
 LEA Budget
 Revised Initial Budget
 ARRA
 Regular

**FY 2012 INDIVIDUAL SCHOOL BUDGET – YEAR 1 IMPLEMENTATION
AMENDMENT BUDGET SUMMARY BREAKDOWN**

SCHOOL NAME	DISTRICT NAME AND NUMBER	REGION, COUNTY, DISTRICT, TYPE CODE
-------------	--------------------------	-------------------------------------

Directions: Prior to preparing this amendment request, please refer to the State and Federal Grant Administration Policy and Fiscal Requirements Procedures Handbook that can be accessed at <www.isbe.net/funding/PDF/fiscal_procedure_handbk.pdf>. Obligations of funds based on this amendment cannot begin prior to the date of receipt at ISBE of a substantially approvable amendment request.

To complete the form below, provide a thorough description of each line item to be amended. Expenditure Description and Itemization (column 3) must match the currently approved budget and must include specific information for each entry. Rationale for Requested Change (column 7) must provide sufficient information and detail for ISBE personnel to ascertain approval of each line item amendment request. Amendment requests that do not fulfill these requirements will be denied until sufficient information is provided to ISBE.

Attach new Budget Summary and Payment Schedule (Attachment 2) to reflect requested amendment amounts.

FUNCTION NUMBER (1)	OBJECT NUMBER (2)	ITEMIZATION (3)	CURRENTLY APPROVED AMOUNT (4)	REQUESTED CHANGE (+ OR -) (5)	REVISED AMOUNT (6)	RATIONALE FOR REQUESTED CHANGE (7)
			NET CHANGE (+ or -)			

Initial Budget
 Amendment (No. _____)
 LEA Budget
 Revised Initial Budget
 ARRA
 Regular

**FY 2012 INDIVIDUAL SCHOOL BUDGET – YEAR 1 IMPLEMENTATION
AMENDMENT BUDGET SUMMARY BREAKDOWN**

SCHOOL NAME	DISTRICT NAME AND NUMBER	REGION, COUNTY, DISTRICT, TYPE CODE
-------------	--------------------------	-------------------------------------

Directions: Prior to preparing this amendment request, please refer to the State and Federal Grant Administration Policy and Fiscal Requirements Procedures Handbook that can be accessed at <www.isbe.net/funding/PDF/fiscal_procedure_handbk.pdf>. Obligations of funds based on this amendment cannot begin prior to the date of receipt at ISBE of a substantially approvable amendment request.

To complete the form below, provide a thorough description of each line item to be amended. Expenditure Description and Itemization (column 3) must match the currently approved budget and must include specific information for each entry. Rationale for Requested Change (column 7) must provide sufficient information and detail for ISBE personnel to ascertain approval of each line item amendment request. Amendment requests that do not fulfill these requirements will be denied until sufficient information is provided to ISBE.

Attach new Budget Summary and Payment Schedule (Attachment 2) to reflect requested amendment amounts.

FUNCTION NUMBER (1)	OBJECT NUMBER (2)	ITEMIZATION (3)	CURRENTLY APPROVED AMOUNT (4)	REQUESTED CHANGE (+ OR -) (5)	REVISED AMOUNT (6)	RATIONALE FOR REQUESTED CHANGE (7)
			NET CHANGE (+ or -)			

Initial Budget
 Amendment (No. _____)
 LEA Budget
 Revised Initial Budget
 ARRA
 Regular

**FY 2012 INDIVIDUAL SCHOOL BUDGET – YEAR 1 IMPLEMENTATION
AMENDMENT BUDGET SUMMARY BREAKDOWN**

SCHOOL NAME	DISTRICT NAME AND NUMBER	REGION, COUNTY, DISTRICT, TYPE CODE
-------------	--------------------------	-------------------------------------

Directions: Prior to preparing this amendment request, please refer to the State and Federal Grant Administration Policy and Fiscal Requirements Procedures Handbook that can be accessed at <www.isbe.net/funding/PDF/fiscal_procedure_handbk.pdf>. Obligations of funds based on this amendment cannot begin prior to the date of receipt at ISBE of a substantially approvable amendment request.

To complete the form below, provide a thorough description of each line item to be amended. Expenditure Description and Itemization (column 3) must match the currently approved budget and must include specific information for each entry. Rationale for Requested Change (column 7) must provide sufficient information and detail for ISBE personnel to ascertain approval of each line item amendment request. Amendment requests that do not fulfill these requirements will be denied until sufficient information is provided to ISBE.

Attach new Budget Summary and Payment Schedule (Attachment 2) to reflect requested amendment amounts.

FUNCTION NUMBER (1)	OBJECT NUMBER (2)	ITEMIZATION (3)	CURRENTLY APPROVED AMOUNT (4)	REQUESTED CHANGE (+ OR -) (5)	REVISED AMOUNT (6)	RATIONALE FOR REQUESTED CHANGE (7)
			NET CHANGE (+ or -)			

Initial Budget
 Amendment (No. _____)
 LEA Budget
 Revised Initial Budget
 ARRA
 Regular

**FY 2012 INDIVIDUAL SCHOOL BUDGET – YEAR 1 IMPLEMENTATION
AMENDMENT BUDGET SUMMARY BREAKDOWN**

SCHOOL NAME	DISTRICT NAME AND NUMBER	REGION, COUNTY, DISTRICT, TYPE CODE
-------------	--------------------------	-------------------------------------

Directions: Prior to preparing this amendment request, please refer to the State and Federal Grant Administration Policy and Fiscal Requirements Procedures Handbook that can be accessed at <www.isbe.net/funding/PDF/fiscal_procedure_handbk.pdf>. Obligations of funds based on this amendment cannot begin prior to the date of receipt at ISBE of a substantially approvable amendment request.

To complete the form below, provide a thorough description of each line item to be amended. Expenditure Description and Itemization (column 3) must match the currently approved budget and must include specific information for each entry. Rationale for Requested Change (column 7) must provide sufficient information and detail for ISBE personnel to ascertain approval of each line item amendment request. Amendment requests that do not fulfill these requirements will be denied until sufficient information is provided to ISBE.

Attach new Budget Summary and Payment Schedule (Attachment 2) to reflect requested amendment amounts.

FUNCTION NUMBER (1)	OBJECT NUMBER (2)	ITEMIZATION (3)	CURRENTLY APPROVED AMOUNT (4)	REQUESTED CHANGE (+ OR -) (5)	REVISED AMOUNT (6)	RATIONALE FOR REQUESTED CHANGE (7)
			NET CHANGE (+ or -)			

Initial Budget
 Amendment (No. _____)
 LEA Budget
 Revised Initial Budget
 ARRA
 Regular

**FY 2012 INDIVIDUAL SCHOOL BUDGET – YEAR 1 IMPLEMENTATION
AMENDMENT BUDGET SUMMARY BREAKDOWN**

SCHOOL NAME	DISTRICT NAME AND NUMBER	REGION, COUNTY, DISTRICT, TYPE CODE
-------------	--------------------------	-------------------------------------

Directions: Prior to preparing this amendment request, please refer to the State and Federal Grant Administration Policy and Fiscal Requirements Procedures Handbook that can be accessed at <www.isbe.net/funding/PDF/fiscal_procedure_handbk.pdf>. Obligations of funds based on this amendment cannot begin prior to the date of receipt at ISBE of a substantially approvable amendment request.

To complete the form below, provide a thorough description of each line item to be amended. Expenditure Description and Itemization (column 3) must match the currently approved budget and must include specific information for each entry. Rationale for Requested Change (column 7) must provide sufficient information and detail for ISBE personnel to ascertain approval of each line item amendment request. Amendment requests that do not fulfill these requirements will be denied until sufficient information is provided to ISBE.

Attach new Budget Summary and Payment Schedule (Attachment 2) to reflect requested amendment amounts.

FUNCTION NUMBER (1)	OBJECT NUMBER (2)	ITEMIZATION (3)	CURRENTLY APPROVED AMOUNT (4)	REQUESTED CHANGE (+ OR -) (5)	REVISED AMOUNT (6)	RATIONALE FOR REQUESTED CHANGE (7)
			NET CHANGE (+ or -)			

Initial Budget
 Amendment (No. _____)
 LEA Budget
 Revised Initial Budget
 ARRA
 Regular

**FY 2012 INDIVIDUAL SCHOOL BUDGET – YEAR 1 IMPLEMENTATION
AMENDMENT BUDGET SUMMARY BREAKDOWN**

SCHOOL NAME	DISTRICT NAME AND NUMBER	REGION, COUNTY, DISTRICT, TYPE CODE
-------------	--------------------------	-------------------------------------

Directions: Prior to preparing this amendment request, please refer to the State and Federal Grant Administration Policy and Fiscal Requirements Procedures Handbook that can be accessed at <www.isbe.net/funding/PDF/fiscal_procedure_handbk.pdf>. Obligations of funds based on this amendment cannot begin prior to the date of receipt at ISBE of a substantially approvable amendment request.

To complete the form below, provide a thorough description of each line item to be amended. Expenditure Description and Itemization (column 3) must match the currently approved budget and must include specific information for each entry. Rationale for Requested Change (column 7) must provide sufficient information and detail for ISBE personnel to ascertain approval of each line item amendment request. Amendment requests that do not fulfill these requirements will be denied until sufficient information is provided to ISBE.

Attach new Budget Summary and Payment Schedule (Attachment 2) to reflect requested amendment amounts.

FUNCTION NUMBER (1)	OBJECT NUMBER (2)	ITEMIZATION (3)	CURRENTLY APPROVED AMOUNT (4)	REQUESTED CHANGE (+ OR -) (5)	REVISED AMOUNT (6)	RATIONALE FOR REQUESTED CHANGE (7)
			NET CHANGE (+ or -)			