Louisiana Department of Education FY14 1003(g) School Improvement Grant LEA Application Budget

LA Department of Education Contact:

John Baxter Phone: 225-342-9442 John.Baxter@la.gov

Applicants must complete a budget for the full three years of the grant program.

The computerized budget allows interaction among worksheets, calculates subtotals and totals automatically, and links data from detail sheets to the summary sheets.

You will only enter budget data on the budget detail worksheets (Detail Y1, Detail Y2, Detail Y3). The data will link to the appropriate summary sheets.

Complete the following information.

(This information is linked to the top of each budget form.)

Name of Eligible Recipient:	ARISE Academy		
Street Address:	3820 St. Claude Ave		
Mailing Address:	3820 St. Claude Ave		
City, State, Zip:	New Orleans, LA 70117		
Submitted by:	Bessie Goggins		
Telephone # Fax #:	504-352-8795	Fax #	(888) 456-2087
Email Address	bessie.goggins@ariseschools.org		

The additional information below will be used to request corrections to the budgets. This information is not linked to the budget forms.

Program Coordinator	Bessie Goggins
Telephone	504-352-8795
Fax	(888) 456-2087
Email	bessie.goggins@ariseschools.org

Fiscal/Accounting Contact	Sabrina Buerger
Telephone	504-352-5736
Fax	(888) 456-2087
Email	sabrina.buerger@ariseschools.org

Summary of Object Codes Required for Budget Detail

Examples of typical allowable costs are provided for each object. For further details regarding specific object codes, refer to the Louisiana Accounting and Uniform Governmental Handbook (LAUGH Guide) located on the Department's website at http://www.louisianaschools.net/lde/finance/688.html

100 Salaries & 200 Benefits: Extended teacher contract salaries and benefits are allowable as long as the activities the staff are engaged in are the planning and initial implementation of the school, curriculum development and/or the professional development of staff.

300 Purchased Professional and Technical Services: Payment for curriculum development; Payment for staff development or related consultant work to implement intervention model activities (workshops, conferences).

400 Purchased Property Services: Only minor renovations to meet applicable federal, state and local health and safety requirements (accessibility to ramps or bathrooms); no remodeling; no painting; no landscaping; no technology leases.

500 Other Purchased Services: To attend national and state conferences and conferences for specific field (Core Knowledge, Environmental, etc.,) that are related to the implementation of the intervention model.

600 Supplies: Textbooks and other curriculum materials; classroom supplies, start-up technologies related to the implementation of the intervention model, etc. Software is always considered a supply item, regardless of cost.

700 Property: This would include items over the threshold limit for supplies. If the unit cost is \$5,000 or more, it must be shown here.

Refer to the SIG Guidance for additional information about 1003(g) School Improvement Grants.

Examples of non-allowable costs: No major renovations (no leasehold improvements, no roofing, no repairs to walls, no paving driveways, no construction or property improvements, no carpeting or painting, no landscaping); no public address or intercom systems; no student transportation costs or bus tickets, no purchase of vans, buses or other vehicles; no insurance other than employee benefits; no audits; no legal fees: no fees associated with subscriptions or memberships; no field trips.

Louisiana Department of Education Year One Budget Detail

Name of Eligible			
Recipient:	ARISE Academy	Program:	1003(g) School Improvement Grant
Street Address:	3820 St. Claude Ave	Project:	FY2014
Mailing Address:	3820 St. Claude Ave	Submitted by:	Bessie Goggins
City, State, Zip:	New Orleans, LA 70117	Telephone/Fax #:	504-352-8795 (888) 456-2087
		E-mail Address:	bessie.goggins@ariseschools.org

Object Code	Expenditure Category	Amount
100	SALARIES	
	Under each salary heading, provide the following:	
	1. Denote # of full-time employees in each group and % full-time	
	2. For part-time employees, provide applicable rates	
	3. Attach a job description for all new positions	
	Officials/Administrators/Managers	
	Technology Coordinator - School Site Based	\$ 28,333.00
	Chief Acadmeic Officer - 10% time per school .1 FTE (blended learning support)	\$ 8,855.00
	Executive Director - 5% time per school .05 FTE (program oversight and support)	\$ 5,762.00
	Teachers	
	1 Teacher Resident - 1 FTE's - 100% Full time (Americorp residents) Expended during grant pe	\$ 10,000.00
	Clerical/Secretarial	
	Aides/Paraprofessionals 108200	
	Behavior Associate	\$ 29,750.00
	Psycology Intern	\$ 25,500.00
	TOTAL SALARIES (Object 100)	\$ 108,200.00
200	EMPLOYEE BENEFITS	

	Health Insurance			
	\$313 per month x number of eligible FTE's noted	in Salaries section 100	\$	10,642.00
	Life Insurance			
	Dental Insurance			
	\$58 per month x number of eligible FTE's noted in	Salaries section 100	\$	1,972.00
	FICA (6.2%) - Provide Total Salary Amount to de \$ 108,200.00 X	6.2%	\$	6,708.40
	₽ 106,200.00 ∧	0.2 /6	φ	0,700.40
	Medicare (1.45%) -Provide Total Salary Amount to	o determine benefit cost		
	\$ 108,200.00 X	1.45%	\$	1,568.90
				,
	Teacher Retirement (15.5% in FY08/09)- Provide	Total Salary Amount to determine benefit cos	t.	
	\$ 10,000.00 X	3.0%	\$	300.00
	School Employees (17.8% in FY08/09)- Provide T	otal Salary Amount to determine benefit cost.		
	\$ 98,200.00 X	3.0%	\$	2,946.00
	_			
	Unemployment Comp. (%)-Provide Total Salary			
	\$ 108,200.00 X	1.300000%	\$	1,406.60
	Worker's Comp. (%)-Provide Total Salary Amou			
	\$ 108,200.00 X	0.600000%	\$	649.20
		YEE BENEFITS (Object 200)	\$	26,193.10
			Ψ	20,133.10
300	PURCHASED PROFESSIONAL	& TECHNICAL SERVICES		
	For every service budgeted, provide the following:			
	1. Name of vendor or consultant			
	2. Rate of Pay			
	3. Topic covered or service provided			
	Communities in Schools - Flat Rate consulting contract	ct for a Full Time Social Worker	\$	15,606.90

	TOTAL PURCHASED PROF/TECH SERV. (Object 300)	\$ 15,606.90
400	PURCHASED PROPERTY SERVICES	
	For every servcie budgeted, provide the following:	
	1. List sites	
	2. List applicable rates	
	Only allowable renovations are minor renovations to meet applicable federal, state, and local	
	health and safety requirements (i.e., accessiblity to ramps or bathrooms)	
	Rental of Equipment (Technology leases not allowed)	
	Other Purchased Property Services (Specify below.)	
	TOTAL PURCHASED PROPERTY SERVICES (Object 400)	\$ -
500	OTHER PURCHASED SERVICES	
	For all services budgeted, provide the following:	
	1. List sites	
	2. List applicable rates	
	For all travel costs budgeted, provide the following: (registration fees included also)	
	1. Position of employee	
	2. Mileage rates as applicable for local travel	
	Travel - In-State (List name of conference attending)	

	Provide examples of each type of the Materials and Supplies to be purchased.	
600	SUPPLIES	
		Ψ
	TOTAL OTHER PURCHASED SERVICES (Object 500)	\$ -
	Other (Specify below.)	
	Printing	
	Postage	
	Phone (list monthly rate)	
	Travel - Out-of-State (List name of conference attending)	

700	PROPERTY	
	TOTAL PROPERTY (Object 700)	\$ -
	TOTAL BUDGET DETAIL SHEETS (Ojbects 100 thru 700)	\$ 150,000.00

Louisiana Department of Education Year One Budget Summary

Name of Eligible Recipient: ARISE Academy	Program: 1003(g) School Improvement Gra
Street Address: 3820 St. Claude Ave	Project: FY2014
Mailing Address: 3820 St. Claude Ave	Submitted by: Bessie Goggins
City, State, Zip: New Orleans, LA 70117	Telephone/Fax #: 504-352-8795 (888) 456-2087
	E-mail Address: bessie.goggins@ariseschools.org

Object Code	Expenditure Category	Amount
100	Salaries	\$ 108,200.00
200	Employee Benefits	\$ 26,193.10
300	Purchased Professional/Tech Svcs.	\$ 15,606.90
400	Purchased Property Services	\$-
500	Other Purchased Services	\$-
600	Supplies	\$-
700	Property	\$
GRAND T	OTAL	\$ 150,000.00

Louisiana Department of Education Year 2 Budget Detail

Name of Eligible			
Recipient:	ARISE Academy	Program:	1003(g) School Improvement Grant
Street Address:	3820 St. Claude Ave	Project:	FY2014
Mailing Address:	3820 St. Claude Ave	Submitted by:	Bessie Goggins
City, State, Zip:	New Orleans, LA 70117	Telephone/Fax #:	504-352-8795 (888) 456-2087
		E-mail Address:	bessie.goggins@ariseschools.org

Object Code	Expenditure Category		Amount
100	SALARIES		
	Under each salary heading, provide the following:		
	1. Denote # of full-time employees in each group and % full-time		
	2. For part-time employees, provide applicable rates		
	3. Attach a job description for all new positions		
	Officials/Administrators/Managers		
	Clerical/Secretarial		
	Aides/Paraprofessionals		
	Behavior Associate	\$	29,750.00
	Psycology Intern (Part year funding)	\$	20,250.00
	TOTAL SALARIES (Object 100)	\$	50,000.00
200	EMPLOYEE BENEFITS		

	Health Insurance	
	Life Insurance	
	Dental Insurance	
	FICA (6.2%) - Provide Total Salary Amount to determine benefit cost.	
	× 6.2%	\$-
	Medicare (1.45%) -Provide Total Salary Amount to determine benefit cost.	
	X 1.45%	\$-
	Teacher Retirement (15.5% in FY08/09)- Provide Total Salary Amount to determine benefit cost	
	X 3.0%	\$-
	School Employees (17.8% in FY08/09)- Provide Total Salary Amount to determine benefit cost.	
	X 3.0%	\$-
	Unemployment Comp. (%)-Provide Total Salary Amount and Rate to determine benefit cost.	
	X 0.60000%	\$-
	Worker's Comp. (%)-Provide Total Salary Amount and Rate to determine benefit cost.	
	X 1.30000%	\$-
	TOTAL EMPLOYEE BENEFITS (Object 200)	\$-
300	PURCHASED PROFESSIONAL & TECHNICAL SERVICES	
	For every service budgeted, provide the following:	
	1. Name of vendor or consultant	
	2. Rate of Pay	
	3. Topic covered or service provided	

	TOTAL PURCHASED PROF/TECH SERV. (Object 300)	\$-
400	PURCHASED PROPERTY SERVICES	
	For every servcie budgeted, provide the following:	
	1. List sites	
	2. List applicable rates	
	Only allowable renovations are minor renovations to meet applicable federal, state, and local	
	health and safety requirements (i.e., accessiblity to ramps or bathrooms)	
	Rental of Equipment (Technology leases not allowed)	
	Other Purchased Property Services (Specify below.)	
		.
	TOTAL PURCHASED PROPERTY SERVICES (Object 400)	\$-
500	OTHER PURCHASED SERVICES	
	For all services budgeted, provide the following:	
	1. List sites	
	2. List applicable rates	
	For all travel costs budgeted, provide the following: (registration fees included also)	
	1. Position of employee	
	2. Mileage rates as applicable for local travel	
	Travel - In-State (List name of conference attending)	

	Travel - Out-of-State (List name of conference attending)	
	Phone (list monthly rate)	
	Postage	
	Printing	
	Other (Specify below.)	
	TOTAL OTHER PURCHASED SERVICES (Object 500)	\$-
600	SUPPLIES	
	Provide examples of each type of Materials and Supplies to be purchased.	
		\$-
	TOTAL SUPPLIES (Object 600)	\$-
700		
700	PROPERTY	

TOTAL PROPERTY (Object 700)	\$ -
TOTAL BUDGET DETAIL SHEETS (Ojbects 100 thru 700)	\$ 50,000.00

Louisiana Department of Education Year 2 Budget Summary

Name of Eligible			
Recipient:	ARISE Academy	Program:	1003(g) School Improvement Grant
Street Address:	3820 St. Claude Ave	Project:	FY2014
Mailing Address:	3820 St. Claude Ave	Submitted by:	Bessie Goggins
City, State, Zip:	New Orleans, LA 70117	Telephone/Fax #:	504-352-8795 (888) 456-2087
		E-mail Address:	bessie.goggins@ariseschools.org

Object Code	Expenditure Category	Amount
100	Salaries	\$ 50,000.00
200	Employee Benefits	\$
300	Purchased Professional/Tech Svcs.	\$
400	Purchased Property Services	\$
500	Other Purchased Services	\$
600	Supplies	\$
700	Property	\$
GRAND T	OTAL	\$ 50,000.00

Louisiana Department of Education Year 3 Budget Detail

Name of Eligible					
Recipient:	ARISE Academy	Program: 100	1003(g) School Improvement Grant		
Street Address:	3820 St. Claude Ave	Project:	FY2014		
Mailing Address:	3820 St. Claude Ave	Submitted by:	Bessie Goggins		
City, State, Zip:	New Orleans, LA 70117	Telephone/Fax #:	504-352-8795	(888) 456-2087	
		E-mail Address:	bessie.goggins@	ariseschools.org	

Object Code	Expenditure Category	Amount
100	SALARIES	
	Under each salary heading, provide the following:	
	1. Denote # of full-time employees in each group and % full-time	
	2. For part-time employees, provide applicable rates	
	3. Attach a job description for all new positions	
	Officials/Administrators/Managers	
	Teachers	
	Clerical/Secretarial	
	Aides/Paraprofessionals	
	Behavior Associate	\$ 29,750.00
	Psycology Intern (Part year funding)	\$ 20,250.00
	TOTAL SALARIES (Object 100)	\$ 50,000.00
200	EMPLOYEE BENEFITS	

	Health Insurance	
	Life Insurance	
	Dental Insurance	
	FICA (6.2%) - Provide Total Salary Amount to determine benefit cost.	
	× 6.2%	\$-
	Medicare (1.45%) -Provide Total Salary Amount to determine benefit cost.	
	X 1.45%	\$-
	Teacher Retirement (15.5% in FY08/09)- Provide Total Salary Amount to determine benefit cost	
	X 3.0%	\$-
	School Employees (17.8% in FY08/09)- Provide Total Salary Amount to determine benefit cost.	
	X 3.0%	\$-
	Unemployment Comp. (%)-Provide Total Salary Amount and Rate to determine benefit cost.	
	X 0.60000%	\$-
	Worker's Comp. (%)-Provide Total Salary Amount and Rate to determine benefit cost.	
	X 1.30000%	\$-
	TOTAL EMPLOYEE BENEFITS (Object 200)	\$-
300	PURCHASED PROFESSIONAL & TECHNICAL SERVICES	
	For every service budgeted, provide the following:	
	1. Name of vendor or consultant	
	2. Rate of Pay	
	3. Topic covered or service provided	

	TOTAL PURCHASED PROF/TECH SERV. (Object 300)	\$-
400	PURCHASED PROPERTY SERVICES	
	For every servcie budgeted, provide the following:	
	1. List sites	
	2. List applicable rates	
	Only allowable renovations are minor renovations to meet applicable federal, state, and local	
	health and safety requirements (i.e., accessiblity to ramps or bathrooms)	
	Rental of Equipment (Technology leases not allowed)	
	Other Purchased Property Services (Specify below.)	
		•
	TOTAL PURCHASED PROPERTY SERVICES (Object 400)	\$ -
500	OTHER PURCHASED SERVICES	
	For all services budgeted, provide the following:	
	1. List sites	
	2. List applicable rates	
	For all travel costs budgeted, provide the following: (registration fees included also)	
	1. Position of employee	
	2. Mileage rates as applicable for local travel	
	Travel - In-State (List name of conference attending)	

	Travel - Out-of-State (List name of conference attending)	
	Phone (list monthly rate)	
	Postage	
	Printing	
	Other (Specify below.)	
	TOTAL OTHER PURCHASED SERVICES (Object 500)	\$-
600	SUPPLIES	
000		
	Provide examples of each type of Materials and Supplies to be purchased.	
	TOTAL SUPPLIES (Object 600)	\$-
700	PROPERTY	

TOTAL PROPERTY (Object 700)	\$ -
TOTAL BUDGET DETAIL SHEETS (Ojbects 100 thru 700)	\$ 50,000.00

Louisiana Department of Education Year 3 Budget Summary

Name of Eligible			
Recipient:	ARISE Academy	Program:	1003(g) School Improvement Grant
Street Address:	3820 St. Claude Ave	Project:	FY2014
Mailing Address:	3820 St. Claude Ave	Submitted by:	Bessie Goggins
City, State, Zip:	New Orleans, LA 70117	Telephone/Fax #:	504-352-8795 (888) 456-2087
		E-mail Address:	bessie.goggins@ariseschools.org

Object Code	Expenditure Category	Amount
100	Salaries	\$ 50,000.00
200	Employee Benefits	\$
300	Purchased Professional/Tech Svcs.	\$
400	Purchased Property Services	\$
500	Other Purchased Services	\$
600	Supplies	\$
700	Property	\$
GRAND T	OTAL	\$ 50,000,00

Louisiana Department of Education Year Four Budget Detail

Name of Eligible			
Recipient:	ARISE Academy	Program:	1003(g) School Improvement Grant
Street Address:	3820 St. Claude Ave	Project:	FY2014
Mailing Address:	3820 St. Claude Ave	Submitted by:	Bessie Goggins
City, State, Zip:	New Orleans, LA 70117	Telephone/Fax #:	504-352-8795 (888) 456-2087
		E-mail Address:	bessie.goggins@ariseschools.org

Object Code	Expenditure Category	Amount
100	SALARIES	
	Under each salary heading, provide the following:	
	1. Denote # of full-time employees in each group and % full-time	
	2. For part-time employees, provide applicable rates	
	3. Attach a job description for all new positions	
	Officials/Administrators/Managers	
	Teachers	
	Clerical/Secretarial	
	Aides/Paraprofessionals	
	TOTAL SALARIES (Object 100)	¢
		Ψ -
200	EMPLOYEE BENEFITS	

	Health Insurance			
	Life Insurance			
	Dental Insurance			
	FICA (6.2%) - Provide Total Salary Amount to determine benefit cost.			
	\$ - X 6.2%	\$-		
	Medicare (1.45%) -Provide Total Salary Amount to determine benefit cost.			
	\$ - X 1.45%	\$-		
	Teacher Retirement (15.5% in FY08/09)- Provide Total Salary Amount to determine benefit cost.			
	× 15.5%	\$-		
	School Employees (17.8% in FY08/09)- Provide Total Salary Amount to determine benefit cost.			
	\$ - X 17.8%	\$-		
	Unemployment Comp. (%)-Provide Total Salary Amount and Rate to determine benefit cost.			
	\$ - X 0.00000%	\$-		
	Worker's Comp. (%)-Provide Total Salary Amount and Rate to determine benefit cost.			
	\$ - X 0.00000%	\$-		
	TOTAL EMPLOYEE BENEFITS (Object 200)	\$-		
300	PURCHASED PROFESSIONAL & TECHNICAL SERVICES			
	For every service budgeted, provide the following:			
	1. Name of vendor or consultant			
	2. Rate of Pay			
	3. Topic covered or service provided			

	TOTAL PURCHASED PROF/TECH SERV. (Object 300)	\$-
400	PURCHASED PROPERTY SERVICES	
	For every servcie budgeted, provide the following:	
	1. List sites	
	2. List applicable rates	
	Only allowable renovations are minor renovations to meet applicable federal, state, and local	
	health and safety requirements (i.e., accessiblity to ramps or bathrooms)	
	Rental of Equipment (Technology leases not allowed)	
	Other Purchased Property Services (Specify below.)	
	TOTAL PURCHASED PROPERTY SERVICES (Object 400)	\$-
500	OTHER PURCHASED SERVICES	
000	For all services budgeted, provide the following:	
	1. List sites	
	2. List applicable rates	
	For all travel costs budgeted, provide the following: (registration fees included also)	
	1. Position of employee	
	2. Mileage rates as applicable for local travel	
	Travel - In-State (List name of conference attending)	

	Travel - Out-of-State (List name of conference attending)	
	Phone (list monthly rate)	
	Postage	
	Printing	
	Other (Specify below.)	
	TOTAL OTHER PURCHASED SERVICES (Object 500)	\$ -
		•
600	SUPPLIES	
	Provide examples of each type of the Materials and Supplies to be purchased.	
	Other Supplies (Specify below.)	
	TOTAL SUPPLIES (Object 600)	\$-
700	PROPERTY	
100		

TOTAL PROPERTY (Object 700)	\$-
TOTAL BUDGET DETAIL SHEETS (Ojbects 100 thru 700)	\$-

Louisiana Department of Education Year Four Budget Summary

Name of Eligible Recipient: ARISE Academy	Program: 100	3(g) School Improvement Grant
Street Address: 3820 St. Claude Ave	Project: FY2	2014
Mailing Address: 3820 St. Claude Ave	Submitted by: Bes	ssie Goggins
City, State, Zip: New Orleans, LA 70117	Telephone/Fax #: 504	-352-8795 (888) 456-2087
	E-mail Address: bes	sie.goggins@ariseschools.org

Object Code	Expenditure Category	Amount
100	Salaries	\$
200	Employee Benefits	\$
300	Purchased Professional/Tech Svcs.	\$ -
400	Purchased Property Services	\$
500	Other Purchased Services	\$
600	Supplies	\$ -
700	Property	\$
GRAND T	OTAL	\$

Louisiana Department of Education Year Five Budget Detail

Name of Eligible			
Recipient:	ARISE Academy	Program:	1003(g) School Improvement Grant
Street Address:	3820 St. Claude Ave	Project:	FY2014
Mailing Address:	3820 St. Claude Ave	Submitted by:	Bessie Goggins
City, State, Zip:	New Orleans, LA 70117	Telephone/Fax #:	504-352-8795 (888) 456-2087
		E-mail Address:	bessie.goggins@ariseschools.org

Object Code	Expenditure Category	Amount
100	SALARIES	
	Under each salary heading, provide the following:	
	1. Denote # of full-time employees in each group and % full-time	
	2. For part-time employees, provide applicable rates	
	3. Attach a job description for all new positions	
	Officials/Administrators/Managers	
	Teachers	
	Clerical/Secretarial	
	Aides/Paraprofessionals	
	TOTAL SALARIES (Object 100)	\$-
200	EMPLOYEE BENEFITS	

	Health Insurance	
	Life Insurance	
	Dental Insurance	
	FICA (6.2%) - Provide Total Salary Amount to determine benefit cost.	
	\$ - X 6.2%	\$-
	Medicare (1.45%) - Provide Total Salary Amount to determine benefit cost.	
	\$ - X 1.45%	\$-
	Teacher Retirement (15.5% in FY08/09)- Provide Total Salary Amount to determine benefit cost	
	X 15.5%	\$-
	School Employees (17.8% in FY08/09)- Provide Total Salary Amount to determine benefit cost.	
	\$ - X 17.8%	\$-
	Unemployment Comp. (%)-Provide Total Salary Amount and Rate to determine benefit cost.	
	\$ - X 0.00000%	\$-
	Worker's Comp. (%)-Provide Total Salary Amount and Rate to determine benefit cost.	
	\$ - X 0.00000%	\$-
	TOTAL EMPLOYEE BENEFITS (Object 200)	\$-
300	PURCHASED PROFESSIONAL & TECHNICAL SERVICES	
	For every service budgeted, provide the following:	
	1. Name of vendor or consultant	
	2. Rate of Pay	
	3. Topic covered or service provided	

	TOTAL PURCHASED PROF/TECH SERV. (Object 300)	\$-
400	PURCHASED PROPERTY SERVICES	
	For every servcie budgeted, provide the following:	
	1. List sites	
	2. List applicable rates	
	Only allowable renovations are minor renovations to meet applicable federal, state, and local	
	health and safety requirements (i.e., accessiblity to ramps or bathrooms)	
	Rental of Equipment (Technology leases not allowed)	
	Other Purchased Property Services (Specify below.)	
	TOTAL PURCHASED PROPERTY SERVICES (Object 400)	\$-
500	OTHER PURCHASED SERVICES	
000	For all services budgeted, provide the following:	
	1. List sites	
	2. List applicable rates	
	For all travel costs budgeted, provide the following: (registration fees included also)	
	1. Position of employee	
	2. Mileage rates as applicable for local travel	
	Travel - In-State (List name of conference attending)	

	Travel - Out-of-State (List name of conference attending)	
	Phone (list monthly rate)	
	Postage	
	Printing	
	Other (Specify below.)	
	TOTAL OTHER PURCHASED SERVICES (Object 500)	\$ -
		•
600	SUPPLIES	
	Provide examples of each type of the Materials and Supplies to be purchased.	
	Other Supplies (Specify below.)	
	TOTAL SUPPLIES (Object 600)	\$-
700		
700	PROPERTY	

TOTAL PROPERTY (Object 700)	\$-
TOTAL BUDGET DETAIL SHEETS (Ojbects 100 thru 700)	\$-

Louisiana Department of Education Year Five Budget Summary

Name of Eligible Recipient: ARISE Academy	Program: 1003	B(g) School Improvement Grant
Street Address: 3820 St. Claude Ave	Project: FY20	014
Mailing Address: 3820 St. Claude Ave	Submitted by: Bess	sie Goggins
City, State, Zip: New Orleans, LA 70117	Telephone/Fax #: 504-	352-8795 (888) 456-2087
	E-mail Address: bess	sie.goggins@ariseschools.org

Object Code	Expenditure Category	Amount	
100	Salaries	\$	
200	Employee Benefits	\$	
300	Purchased Professional/Tech Svcs.	\$	
400	Purchased Property Services	\$	
500	Other Purchased Services	\$	
600	Supplies	\$	
700	Property	\$	
700 GRAND T		\$ \$	

Louisiana Department of Education Combined Budget Summary

Name of Eligible Recipient:	ARISE Academy	Program:	1003(g) School Impr	ovement Grant
Street Address:	3820 St. Claude Ave	Project:	FY2014	
Mailing Address:	3820 St. Claude Ave	Submitted by:	Bessie Goggins	
City, State, Zip:	New Orleans, LA 70117	Telephone/Fax#:	504-352-8795	(888) 456-2087
		E-mail Address:	bessie.goggins@aris	eschools.org

Object Code	Expenditure Category	Year 1	Year 2	Year 3	Year 4	Year 5	COMBINED FUNDING
100	Salaries	\$ 108,200.00	\$ 50,000.00	\$ 50,000.00	\$-	\$-	\$208,200.00
200	Employee Benefits	\$ 26,193.10	\$-	\$-	\$-	\$-	\$26,193.10
300	Purchased Professional/Tech Svcs.	\$ 15,606.90	\$ -	\$-	\$-	\$-	\$15,606.90
400	Purchased Property Services	\$-	\$ -	\$-	\$-	\$-	\$0.00
500	Other Purchased Services	\$ -	\$-	\$-	\$-	\$-	\$0.00
600	Supplies	\$-	\$-	\$-	\$-	\$-	\$0.00
700	Property	\$ -	\$-	\$-	\$-	\$-	\$0.00
	TOTAL	\$150,000.00	\$50,000.00	\$50,000.00	\$-	\$-	\$250,000.00

GRANTEE INFORMATION

STATE DEPARTMENT OF EDUCATION

Approved Division Director/Designee:

Date:

Representative of the entity: Date:

Approved Ed. Finance Director/Designeee:

Date:

MAIL TO: