**SSI Grant Guidelines**

\*\*LEAs must receive EPS approval for revisions *prior to* implementing any change in spending or program.

**Below are examples of the level of detail required in the budget narrative. Please refer to the** [**USFR**](https://www.azauditor.gov/sites/default/files/USFRCOA060222.pdf) **or** [**USFRCS**](https://www.azauditor.gov/sites/default/files/USFRCSCOA121621.pdf) **for additional guidance on coding.**

*This document provides samples but is not an all-inclusive list of approvable formats, costs, etc.*

**6100 Salaries**

|  |
| --- |
| Function Code 1000 (direct instructional contact with students) |
| *Board adopted salary or hourly rate* |

Detail needed: # of staff x # of hours x hourly rate = total; FTE x salary = total

What is the pay for? (example: after school tutoring, substitutes)

Position example: reading interventionist

***\*Job description required for positions***

***\*Tutoring plan required for tutoring programs***

***\*Stipend amounts are not allowed – must break down hours x hourly rate***

|  |
| --- |
| Function Code 2100, 2200, 2600, 2700 (staff) |
| *Board adopted rates* |

Detail needed: # of staff x # of hours x hourly rate = total; FTE x salary = total

What is the pay for? (example: off contract committee work to research math curriculum)

Position example: data coach

***\*Job description required for positions***

***\*Stipend amounts are not allowed – must break down hours x hourly rate***

**6200 Benefits**

|  |
| --- |
| All Function Codes |
| *Board adopted rates* |

Benefits are required for each position in 6100. Exceptions must be noted in your narrative. Provide the percentage used in your cost calculation for related benefits

**6300 Purchased Professional Services**

|  |
| --- |
| Function code 2100, 2200, 2600, 2700 (staff) |
| *TBD based on provider services or conference fees* |

Educational Service Provider (external provider/consultant)

Detail needed: Who? What? When? For whom? ***\*Must include date***

How much? # of days x daily rate =

***\*Scope of work with deliverables required for external providers/consultants***

Professional Learning Activities

Detail needed: Who? What? When? For whom? ***\*Must include date***

How much? # of days x daily rate =

Conference registration ***\*Conference brochure or agenda required***

Detail needed: Conference name, location? length? Who is attending?

Registration cost x # of staff =

|  |
| --- |
| Function Code 2300, 2400, 2500, 2900 (administrators) |
| *TBD based on provider services or conference fees* |

Leadership Development

Detail needed: Who? What? When? For whom? ***\*Must include date***

How much? # of days x daily rate =

***\*Scope of work with deliverables required for external providers/consultants***

Professional Learning Activities

Detail needed: Who? What? When? For whom? ***\*Must include date***

How much? # of days x daily rate =

Conference registration ***\*Conference brochure or agenda required***

Detail needed: Conference name, location? length? Who is attending?

Registration cost x # of staff =

**6500 Travel Costs**

|  |
| --- |
| Function Code 2100, 2200, 2600, 2700 (staff) |
| *TBD based on state per diem or board adopted rates* |

Travel expenses related to conferences attended by staff.

Detail needed: Conference name and date

Transportation cost (airfare, mileage, rideshare) x # of staff =

Hotel room cost x nights x # of staff =

Per Diem x # days x # of staff =

***\*Please check conference details. If breakfast and lunch are provided at the conference, per diem cannot be reimbursed for these meals.***

|  |
| --- |
| Function Code 2300, 2400, 2500, 2900 (administrators) |
| *TBD based on state per diem or board adopted rates* |

Travel expenses related to conferences attended by administrators.

Detail needed: Conference name and date

Transportation cost (airfare, mileage, rideshare) x # of administrators =

Hotel room cost x nights x # of administrators =

Per Diem x # days x # of administrators =

***\*Please check conference details. If breakfast and lunch are provided at the conference, per diem cannot be reimbursed for these meals.***

**6600 Supplies**

|  |
| --- |
| Function Code 1000 (direct instructional contact with students) |
| *Per quote(s)* |

Curricular materials, instructional kits, site licenses, etc. for student use

Detail needed: Who will use? What is the purpose?

Item name x # of items x cost =

***\*Miscellaneous office supplies and student rewards not allowed.***

***\*Quotes are needed for all items.***

|  |
| --- |
| Function Code 2100, 2200, 2600, 2700 (staff) |
| *Per quote(s)* |

Supplies for staff, professional learning books, etc.

Detail needed: Who will use? What is the purpose?

Item name x # of items x cost =

***\*Miscellaneous office supplies not allowed***

***\*Quotes are needed for all items.***

**6910 Indirect Costs**

|  |
| --- |
| Function Code 0000 |
| *As approved* |

**SSI Grant recipients are required to:**

* Receive EPS approval for revisions *prior to* implementing any change in spending or program.
* Submit revisions for any fiscal or programmatic change.
* In accordance with sound accounting practices, LEAs are required to request reimbursements monthly.
* Keep necessary Time and Effort documentation.
* Submit Completion Reports on time.

**\*Grantees failing to meet any single requirement of compliance are subject to possible funding forfeiture or having funds placed on hold.**

**Grant Revision Requirements**

-A remaining balance of zero is necessary.

***\*Do not delete any of the original narrative – add to/below the original narrative*.**

-Note the revision # and date of revision (i.e. Revision #1, Oct. 5, 2021)

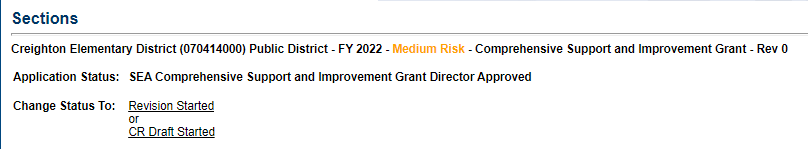
-Use a different color font for each new revision or highlight the new revision.

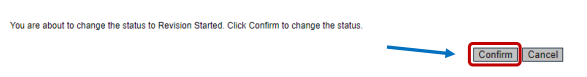
-Be detailed in your narrative to indicate if an expenditure increased, decreased, or was added.

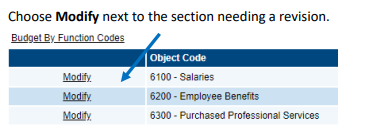
-Double check your math. The total in the narrative must match the line item total.

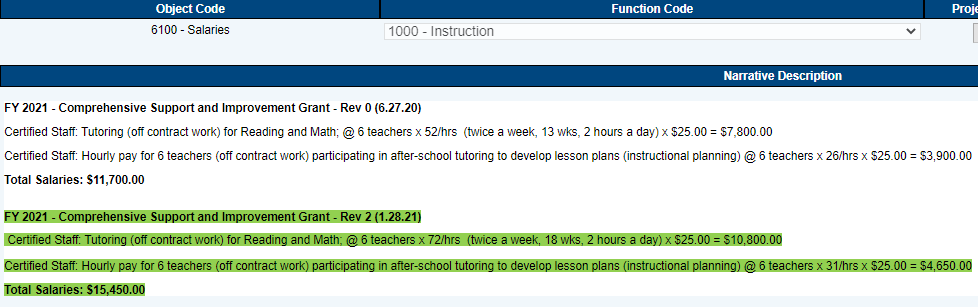
-Upload any revised quotes, scopes of work, evidence-based summary forms, etc.

-Revise your IAP to match the revision in GME. Add/remove any funding tags if needed.

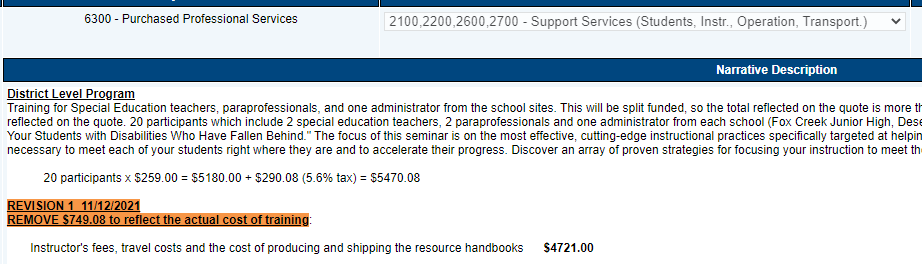
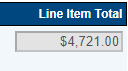
Starting a revision: Under Sections: Choose Revision Started and then click Confirm.



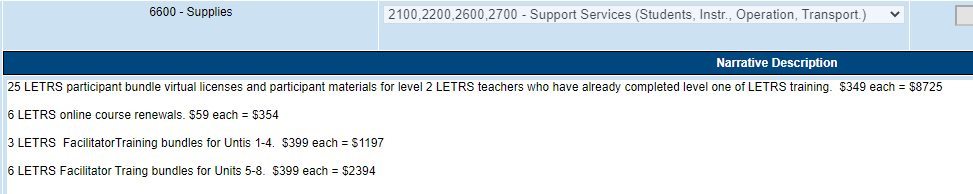


Example1: Increasing funding to a current line item expenditure.

Adjust the line item total to match the changes in the narrative.

Example 2: Decreasing funding to a current line item expenditure.

Adjust the line item total to match the changes in the narrative.

Example 3: Adding a new item to fund.

**Revision 1 12/5/21** – Add new items (see quote in related documents)

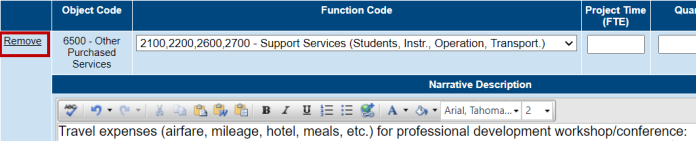
25 LETRS participant bundle virtual licenses and participant materials for level 2 LETRS teachers who have already completed level 1 of LETRS training $349 each = $8725

Adjust the line item total to match the changes in the narrative.

$8725.00

Example 4: Completely removing a line item from the current budget.

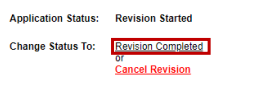
When removing an item completely from the budget, choose **Remove**. This action will be recorded in the Change Log. The line item will be deleted from the budget.

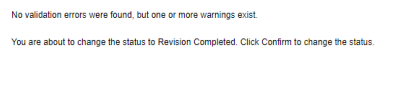


Saving revisions: Each time a change is made save the information. The save button is located at the top of the page.



Completing a revision: Once all of your revisions have been completed and saved, return to the **Sections** page and choose **Revision Completed** and **Confirm**.



The funding application will then need LEA Business Manager Approval and LEA Authorized Representative Approval in order to be sent to ADE for Specialist and Director approval.