

# **Program Justification The Academic Challenge for Success**

January 25, 2002

**DATED MATERIAL -- OPEN IMMEDIATELY**

- Issued To:** Virginia Department of Education (for schools “Accredited With Warning” in English or mathematics for 2001, Appendix A: Eligible Schools)
- Grant Period:** January 1, 2002 – September 30, 2002
- Submission Deadline:** The program justification summary (Section V in this packet) must be submitted by eligible schools to the Virginia Department of Education by 5:00 p.m. on Friday, March 8, 2002. An original and one copy must be received by the Virginia Department of Education (address below). No faxes or electronic submissions.
- Source of Funds:** U. S. Department of Labor School-to-Work State Implementation Grant Awarded to Virginia on October 3, 2001.
- Sponsor:** Virginia Business-Education Partnership  
701 East Franklin Street, Suite 811  
Richmond, Virginia 23219

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  - E. Request for Reimbursement (due no later than July 15, 2002)

## I. Important Dates

<b>Program Justification Issued</b>	<b>January 25, 2002</b>
<b>Program justifications Due to VDOE</b>	<b>March 8, 2002</b>
<b>Final Reimbursement Request Due</b>	<b>July 15, 2002</b>
<b>Final Progress Report Due</b>	<b>August 15, 2002</b>

## II. Program justification Check-List

- Complete all parts of the program justification including:
  - Part A. Division Summary with required signatures
  - Part B. Division Budget Summary
  - Part C. School Summary with required signatures (one for each eligible and participating school)
  - Part D. School Budget Narrative (one for each eligible and participating school)
  - Part E. School Budget Summary (one for each eligible and participating school)
- Keep at least one copy of your program justification for your own files.
- Ensure that Virginia Department of Education (VDOE) receives the original and one (1) copy of the completed program justification by 5:00 p.m. on Friday, March 8, 2002.

### III. Overview

## General Information

#### Purpose

Additional instructional time will be provided for students in schools receiving a 2001 accreditation rating of “Accredited With Warning” in mathematics or English and who are at-risk of not passing the Standards of Learning assessments in grades 3, 5, 8, or the high school end-of-course tests. The goal is to enable Academic Challenge for Success students to pass the SOL tests they will take in the spring of 2002.

Federal support of the Academic Challenge for Success is provided through the U. S. Department of Labor’s School-to-Work State Implementation Grant awarded to Virginia on October 3, 2001. The Virginia Business-Education Partnership in partnership with Capital One sponsor this program.

#### Funding

The Academic Challenge for Success is a cost reimbursement program. This means that the amount of the reimbursement is limited to the amount of allowable funding indicated in Appendix A and does not include the \$500 grant from Capital One. Request for reimbursement forms are provided in this program justification as Appendix E. No reimbursement request is required to receive the \$500 grant from Capital One.

Local school divisions will submit one request for reimbursement with summaries attached for all eligible and participating schools. If the request for reimbursement is received by VDOE prior to June 1, 2002, localities will be reimbursed by VDOE prior to June 30, 2002.

Request for reimbursement must be submitted by July 15, 2002. No request for reimbursement will be considered after this time.

Funding provides participating schools with funding for academic intervention:

- Local target schools must identify students to be served who may be at-risk of not passing the Standards of Learning assessments in the spring of 2002.
- Funds shall be issued to eligible schools upon approval by the Superintendent of Instruction of the school’s program justification, certified by the division superintendent and the school principal, for the use of the funds. The Superintendent may require revisions to a school’s program justification before issuing such approval.
- The Department of Education may audit a school’s program to ensure compliance with the school’s program justification, the requirements of this section, and the board guidelines. A final report is included in the program justification as Appendix D. The final report must be submitted not later than August 15, 2002.
- Funds, indicated for each eligible school in Appendix A, must be used to provide a minimum of 150 hours of additional instructional time. Students who will be taking Standards of Learning assessments in spring of 2002 are eligible to receive this additional instruction.
- Each school should design a plan to deliver a minimum of 150 hours of instruction. Examples of possible delivery models are outlined in Appendix B.
- There will be no required local match in order to participate in this program.
- No administrative costs are permitted with the funds provided, this includes staff travel.

## Eligible Schools

Eligible schools for participation in the Academic Challenge for Success include those schools that are accredited with warning in mathematics or English for the year 2001 (see Appendix A)

## Eligible Students

Students in grades 3, 5, and 8, or high school students taking end-of-course tests in spring of 2002 who are locally determined to be at-risk of not passing the Standards of Learning assessments will be eligible.

## Participation

School divisions must submit a completed program justification, below, that includes:

- Part A. Division Summary
- Part B. Division Budget Summary
- Part C. School Summary
- Part D. School Budget Narrative, and
- Part E. School Budget Summary for each eligible and participating school.

One original and one copy of the completed program justification should be submitted by Friday, March 8, 2002 to:

Kathleen M. Smith  
Virginia Department of Education  
P. O. Box 2120  
Richmond, VA 23218-2120

The program justification must include an agreement signed by the county or city administrator and the division superintendent certifying that there will be no reduction in the local school division's budget as a result of receiving funds for the Academic Challenge for Success initiative.

## Additional Funding Sources

Federal funding for this program has been made available through the U. S. Department of Labor School-to-Work State Implementation Grant Awarded to Virginia

on October 3, 2001 and a partnership with Virginia Business-Education Partnership and Capital One. The following state funding sources could also be used to supplement Academic Challenge for Success activities: Lottery; At-risk Add-on; SOL Remediation; SOL Instructional Materials; and SOQ Remediation.

## The Challenge

It is recognized that additional resources are necessary for the Academic Challenge for Success initiative to be successful. The challenge is for participating communities to contribute to the success of these students on the SOL tests in the spring of 2002.

## The Challenge for Local School Divisions

- provide the necessary transportation, custodial services, materials, computer labs, and quality staff;
- provide leadership and planning for designing the Academic Challenge for Success;
- offer the best talent and resources the division has available to increase the academic achievement of students so that they can succeed on the SOL tests; and,
- coordinate other on-going remediation and intervention programs with the instructional focus of the Academic Challenge for Success initiative to eliminate duplication and ensure enhancement of current efforts.

## The Challenge for Businesses

- adopt an Academic Challenge for Success school and provide resources such as volunteer manpower, funds for materials, incentives for students, and funds for other resources.

## The Challenge for Parents

- place a priority on regular attendance in academic activities to maximize their child's opportunities for success in the Academic Challenge program;
- place a priority on academics and reading; and,
- provide a quiet place and designated time for study and quality homework each night.

## The Challenge for Students

- attend every session of the Academic Challenge for Success and give their best effort in their class work and homework.

# IV. Program Justification Components and Specific Directions

Section V contains the directions for completing the program justification.

## Deadline for Submissions; Number of Copies Required

An original and one (1) copy of the completed program justification must be received by the Virginia Department of Education no later than 5:00 p.m. on Friday, March 8, 2002. The program justification should be mailed, couriered or hand-delivered. No faxed or e-mailed program justifications will be accepted.

The program justification should be straightforward and concise, but please note that all information and signatures requested must be provided.

The program justification must be submitted on the forms provided.

Package one original and one copy of the completed program justification as follows:

- Part A. Division Summary
- Part B. Division Budget Summary
- Copies of Part C. School Summary, Part D. School Budget Narrative, and Part E. School Budget Summary for each eligible and participating school.

The original and one copy of the program justification should be stapled. Please do not use notebooks, paperclips or other bindings for proposals.

## Part A. Division Summary

Questions 1-7 are self-explanatory. Please provide all information requested.

Question 8 requires signatures of both the Superintendent and the County or City Administrator.

## Part B. Division Budget Summary

Part B (Division Budget Summary) summarizes Part E. (School Budget Summary) from each eligible and participating school.

Part B.1. Projected Expenditures. Only report expenditures paid with funds indicated in Appendix A. Do not report expenditures paid by other revenue sources including the \$500 grant that will be provided to each participating school from Capital One. Allowable costs are explained in Appendix C.

Part B.2. Other Projected Expenditures. If additional revenues are used to supplement the costs of this program, including the \$500 grant from Capital One, indicate the type and categories in which these revenues will be expended. For those schools participating, the \$500 provided from Capital

One is a grant and is not subject to cost reimbursement.

### **Part C: School Summary**

Questions 1-10 and 12-18 are self-explanatory.

For Question 11, refer to Appendix B: Sample Delivery Models. More than one model may be checked.

Questions 19-24 require the signature of the principal.

### **Part D: School Budget Narrative**

The budget narrative should describe your budget plans for the use of the funds provided in Appendix A. The narrative should justify and clarify the budget figures shown only on Part E.1. Expenditures. Please break down your budget narrative according to the allowable expenditures described in Appendix C. Do not report projected expenditures that will be paid with revenue from other sources including the \$500 grant that will be provided from Capital One.

### **Part E: School Budget Summary**

Part B.1. Projected Expenditures. Only report expenditures paid with funds indicated in Appendix A. Do not report expenditures paid by other revenue sources including the \$500 grant that will be provided from Capital One. Allowable costs are explained in Appendix C.

Part B. 2. Other Projected Expenditures. If additional revenues will be used to supplement the costs of this program, including the \$500 grant from Capital One, indicate the type and categories in which these revenues will be expended. For those schools participating, the \$500 provided from Capital One is a grant and is not subject to cost reimbursement.

# V. Program justification

## Commonwealth of Virginia Academic Challenge for Success

**PART A. Division Summary for \_\_\_\_\_**  
**(Name of Division)**

Please carefully review the entire contents of this program justification, including the Appendices A through E of which this division summary is one part before completing the document. All information and signatures requested must be provided.

**Deadline:** An original and one (1) copy of a complete program justification must be received by the Virginia Department of Education no later than 5:00 p.m. on Friday, March 8, 2002. No faxed or e-mailed program justifications will be accepted.

<b>Information Needed</b>	<b>Please provide information as indicated in the column to the left in the boxes below.</b>
1. Name of School Division	1.
2. Division contact person	2.
3. Telephone number of division contact	3.
4. Fax number of division contact	4.
5. E-mail address of division contact (required)	5.
6. How many eligible schools listed in Appendix A will be participating?	6.
7. Total amount requested for the eligible and participating schools? Do not include the \$500 grant provided to each participating school from Capital One.	7.
8. Certification statement: There will be no reduction in the local school division's fiscal year 2002 budget as a result of receiving funds for the Governor's Academic Challenge. Each local division will submit a final report by August 15, 2002 and a request for reimbursement by July 15, 2002 to the Virginia Department of Education. If the request for reimbursement is received by VDOE before June 1, 2002, reimbursement will be provided prior to June 30, 2002.	
_____ Signature of Superintendent	_____ Signature of County or City Administrator
_____ Typed Superintendent's Name	_____ Typed City or County Administrator's Name
_____ Date	_____ Date

## Academic Challenge for Success Budget Justification

**Part B. Division Budget Summary for \_\_\_\_\_**  
**(Name of Division)**

Number of participating schools: \_\_\_\_\_

1. Projected Expenditures. Summarize projected expenditures from eligible and participating schools (Part E.1. School Budget Summary) that will be paid with funds provided by the Virginia Department of Education for this program only (do not exceed the amount for each school listed in Appendix A). Do not report expenditures that will be paid by other revenue sources including the \$500 grant provided to each participating school from Capital One.

(1) Budget Category	(2) Grant Request Administrative	(3) Grant Request Non-Administrative	(4) Combined Total Grant Request
Employee Salaries/Wages 1000			
Employee Benefits 2000			
Purchased Services 3000			
Internal Services 4000			
Other Services 5000			
Materials & Supplies 6000			
Capital Outlay 8000			
Total			

## Academic Challenge for Success Budget Justification

**Part B, continued. Division Budget Summary for \_\_\_\_\_**  
(Name of Division)

1. Other Projected Expenditures. Summarize projected expenditures from eligible and participating schools (Part E.2. School Budget Summary) that will be paid with funds provided by other sources of revenue including the \$500 grant provided to each participating school from Capital One.

Budget Category	(1) Academic Challenge funds	(2) Other federal funds	(3) State funding sources	(4) Local Cash	(5) Local In-Kind or Volunteer	(4) Outside Contributions Including \$500 from Capital One	(4) Total
Employee Salaries/Wages 1000							
Employee Benefits 2000							
Purchased Services 3000							
Internal Services 4000							
Other Services 5000							
Materials & Supplies 6000							
Capital Outlay 8000							
Total							

Commonwealth of Virginia  
**Academic Challenge for Success**

**PART C. School Summary for \_\_\_\_\_**  
(Name of School) (Name of Division)

Please carefully review the entire contents of this program justification, including the Appendices A through E of which this school summary is one part before completing the document. All information and signatures requested must be provided.

Each local school division will submit one program justification. Part A (Division Summary) and Part B (Division Budget Summary) are completed at the division level. The division's program justification will include a completed Part C (School Summary) and Part D (School Budget Summary) from each eligible school.

**Deadline: An original and one (1) copy of a complete program justification must be received by the Virginia Department of Education no later than 5:00 p.m. on Friday, March 8, 2002. No faxed or e-mailed program justifications will be accepted.**

INFORMATION NEEDED	Please provide information as indicated in the column to the left in the boxes below.
1. Name of division	1.
2. Name of school	2.
3. School number	3.
4. Address of the school	4.
5. School contact person	5.
6. Contact telephone number	6.
7. Contact fax number	7.
9. Email address of contact person (required)	8.
10. Number of paid staff for the program	9.
11. Number of volunteer staff for the program	10.
12. Check which program delivery model(s) will be provided (See Appendix B).	11. <input type="checkbox"/> Individual/Small Group Model <input type="checkbox"/> Test Taking Strategies Model <input type="checkbox"/> Common Skills Deficit Model <input type="checkbox"/> Computer Assisted Model <input type="checkbox"/> Other (give a brief description below):

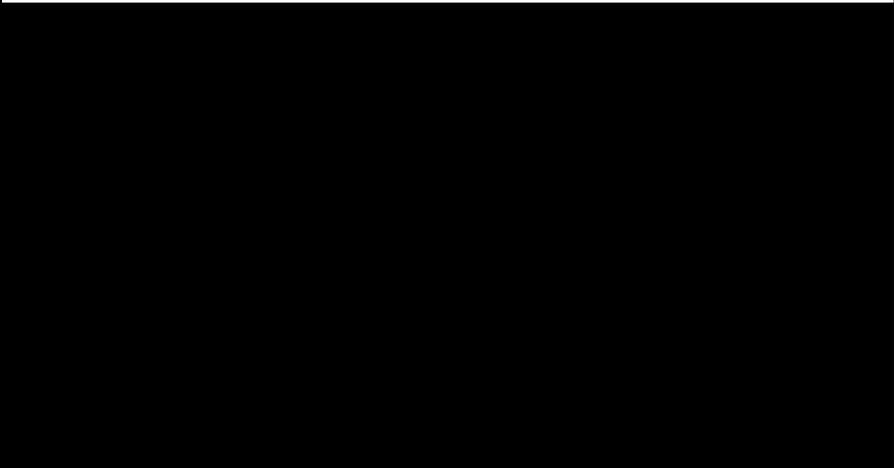
<p>13. Check the area(s) and grade(s) in which funds will be used (English includes English/Reading and/or Writing)</p>	<p>12.</p> <p> <input type="checkbox"/> 3<sup>rd</sup> Grade English    <input type="checkbox"/> 3<sup>rd</sup> Grade Mathematics  <input type="checkbox"/> 5<sup>th</sup> Grade English    <input type="checkbox"/> 5<sup>th</sup> Grade Mathematics  <input type="checkbox"/> 8<sup>th</sup> Grade English    <input type="checkbox"/> 8<sup>th</sup> Grade Mathematics  <input type="checkbox"/> 11<sup>th</sup> Grade English    <input type="checkbox"/> Algebra I  <input type="checkbox"/> Geometry                <input type="checkbox"/> Algebra II </p>
<p>14. Check when 150 hours of additional instruction will take place. More than one check can be provided.</p>	<p>13.</p> <p> <input type="checkbox"/> Before school  <input type="checkbox"/> After school  <input type="checkbox"/> Saturday  <input type="checkbox"/> Other (give a brief description below). </p>
<p>15. Number of students Identified</p>	<p>14.</p>
<p>16. Specify the number of students projected for remediation in each area (if identified for both English and math, count the student twice, once for each subject).</p>	<p>15.</p> <p> <input type="checkbox"/> 3<sup>rd</sup> Grade English  <input type="checkbox"/> 3<sup>rd</sup> Grade Mathematics  <input type="checkbox"/> 5<sup>th</sup> Grade English  <input type="checkbox"/> 5<sup>th</sup> Grade Mathematics  <input type="checkbox"/> 8<sup>th</sup> Grade English  <input type="checkbox"/> 8<sup>th</sup> Grade Mathematics  <input type="checkbox"/> 11<sup>th</sup> Grade English  <input type="checkbox"/> Algebra I (7<sup>th</sup>/8<sup>th</sup> Grade)  <input type="checkbox"/> Algebra I (9<sup>th</sup> Grade and above)  <input type="checkbox"/> Geometry (7<sup>th</sup>/8<sup>th</sup> Grade)  <input type="checkbox"/> Geometry (9<sup>th</sup> Grade and above)  <input type="checkbox"/> Algebra II </p>
<p>17. Anticipated date of implementation</p>	<p>16.</p>
<p>18. Anticipated date of completion</p>	<p>17.</p>
<p>19. Total amount of eligible funding requested. (Cannot exceed amount indicated in Appendix A. Do not include the \$500 grant provided from Capital One.)</p>	<p>18.</p>
<p>19. Principal's typed name</p>	<p>19.</p>
<p>20. Principal's signature</p>	<p>20.</p>
<p>21. Date of signature</p>	<p>21.</p>
<p>22. Principal's telephone</p>	<p>22.</p>
<p>23. Principal's fax</p>	<p>23.</p>
<p>24. Principal's e-mail address</p>	<p>24.</p>

# Academic Challenge for Success Budget Justification

**Part D. School Budget Narrative for** \_\_\_\_\_  
(Name of School) (Name of Division)

Projected Expenditures. List and describe projected expenditures that will be paid with funds provided by the Virginia Department of Education for this program only (amount indicated in Appendix A). Do not include expenditures that will be paid with other revenue sources including the \$500 grant provided from Capital One.

<p><b>1000 Employee Salaries and Wages</b></p> <p>Include compensation for instructional and transportation personnel employed by eligible schools to provide 150 hours of additional instruction. Compensation for wages for personnel other than instructional and transportation personnel are not allowable costs. Administrative salaries and wages are not allowable costs. In order to receive reimbursement, Coordinators must provide instruction to students. Specify number of employees, wages per employee, and number of hours of employment. If none, state none.</p>	<p><i>Example: 2 instructors at \$15.00 per hour for 30 hours = \$900.00</i></p>
<p><b>2000 Employee Benefits</b></p> <p>Include job-related benefits provided to employees listed in employee salaries and wages, above, as part of their total compensation. Fringe benefits include the employer's portion of FICA, pensions, insurance and employee allowances. These may be claimed for employees being paid with grant funds as outlined in Personal Services, above. Specify percentage per person. If none, state none.</p>	<p><i>Example: 2 instructors at 30% of \$900 = \$540</i></p>
<p><b>3000 Purchased Services</b></p> <p>Include services acquired from outside vendors such as stipends paid to retired teachers or consultants. No "sub-contractees or sub-grantees" are allowed.</p>	<p><i>Example: 2 tutors (retired teachers) at \$500.00 stipend = \$1,000.</i></p>

<p><b>4000 Internal Services</b></p> <p>Include charges from an internal service fund to other activities or elements of the local agency for central purchasing of paper supplies, print shop costs, or pupil transportation. Be specific and list each item separately. If none, state none.</p>	<p><i>Example: Paper supplies =\$ 300. Consumables including glue, crayons = \$200. Pupil transportation = \$1,000.</i></p>
<p><b>5000 Other Charges</b></p> <p>Include postage needed for newsletters or other correspondence to parents. Snacks are not an allowable cost for use with these funds. If none, state none.</p>	<p><i>Example: Postage for mail out to parents= \$35</i></p>
<p><b>6000 Materials and Supplies</b></p> <p>Include articles and commodities that are consumed or materially altered, paper-back reading books, math manipulatives, board games, pre- and post-tests, software, teacher resource guides, purchased programs, and curriculum reference materials. Includes minor equipment (under \$5,000) that is not capital outlay such calculators, or electronic educational games. If none, state none.</p>	<p><i>Example: Software (name of program) = \$300. 10 calculators at \$80 = \$800.</i></p>
<p><b>8000 Capital Outlay</b></p> <p>Not allowable with funds received from this grant. Must be paid with funds from other sources of revenue. Include outlays of \$5,000 or more that result in the acquisition of or additions to fixed assets except outlays for major capital facilities that are constructed or acquired. Examples include machinery and equipment, computers, furniture and fixtures, and communications equipment.</p>	
<p><b>Total</b></p>	

## Academic Challenge for Success Budget Justification

Part E. School Budget Summary for \_\_\_\_\_  
(Name of School) (Name of Division)

1. Projected Expenditures. Summarize projected expenditures listed in the budget narrative (Part D. School Budget Narrative.) Include only those expenditures that will be paid with funds provided by the Virginia Department of Education for this program only (do not exceed the Appendix A). Do not report expenditures paid by other revenue sources including the \$500 grant provided from Capital One.

(1) Budget Category	(2) Grant Request Administrative	(3) Grant Request Non-Administrative	(4) Combined Total Grant Request
Employee Salaries/Wages 1000			
Employee Benefits 2000			
Purchased Services 3000			
Internal Services 4000			
Other Services 5000			
Materials & Supplies 6000			
Capital Outlay 8000			
Total			

## Academic Challenge for Success Budget Justification

**Part E., continued. School Budget Summary for \_\_\_\_\_**  
(Name of School) (Name of Division)

2. Other Projected Expenditures. Summarize projected expenditures from eligible and participating schools (Part E.2. School Budget Summary) that will be paid with funds provided by other sources of revenue including the \$500 grant from Capital One.

Budget Category	(1) Academic Challenge funds	(2) Other federal funds	(3) State funding sources	(4) Local Cash	(5) Local In-Kind or Volunteer	(4) Outside Contributions Including \$500 from Capital One	(4) Total
Employee Salaries/Wages 1000							
Employee Benefits 2000							
Purchased Services 3000							
Internal Services 4000							
Other Services 5000							
Materials & Supplies 6000							
Capital Outlay 8000							
<b>Total</b>							

**APPENDIX A  
AMOUNT OF ELIGIBLE FUNDING PER SCHOOL**

Div. Num.	Division	Sch. Num.	School	Base Funding Per School	Target Population for Per Pupil Funding	Per Pupil Funding Based on Enrollment	Total Funding Per School From Federal Funds
004	AMELIA	10	AMELIA COUNTY HIGH	\$4,309	111	\$806	\$5,115
005	AMHERST	770	CENTRAL ELEM.	\$4,026	128	\$930	\$4,956
011	BLAND	62	ROCKY GAP ELEM.	\$4,026	78	\$567	\$4,593
011	BLAND	232	BLAND ELEM.	\$4,026	71	\$516	\$4,542
013	BRUNSWICK	650	BRUNSWICK SR. HIGH	\$4,309	167	\$1,213	\$5,522
014	BUCHANAN	360	WHITEWOOD HIGH	\$4,309	0	\$0	\$4,309
014	BUCHANAN	970	VANSANT ELEM.	\$4,309	0	\$0	\$4,309
019	CHARLES CITY CO.	100	CHARLES CITY CO. HIGH	\$4,309	65	\$472	\$4,781
021	CHESTERFIELD	30	CHESTERFIELD COMMUNITY HIGH	\$4,309	24	\$174	\$4,483
026	DICKENSON	840	ERVINTON HIGH	\$4,309	70	\$508	\$4,817
027	DINWIDDIE	471	DINWIDDIE COUNTY MIDDLE	\$4,309	356	\$2,586	\$6,895
029	FAIRFAX	310	BURKE CENTER	\$4,733	0	\$0	\$4,733
029	FAIRFAX	1015	STUDENT SERVICES SECONDARY CTR	\$4,733	0	\$0	\$4,733
029	FAIRFAX	1750	QUANDER ROAD SCHOOL	\$4,733	0	\$0	\$4,733
029	FAIRFAX	2201	BRYANT ALTERNATIVE HIGH	\$4,733	115	\$835	\$5,568
029	FAIRFAX	2208	STUDENT SERVICES ELEM CTR	\$4,421	0	\$0	\$4,421
029	FAIRFAX	2212	AREA I ALTERNATIVE	\$4,733	0	\$0	\$4,733
029	FAIRFAX	2213	AREA II ALTERNATIVE	\$4,733	0	\$0	\$4,733
029	FAIRFAX	2214	AREA III ALTERNATIVE	\$4,733	0	\$0	\$4,733
029	FAIRFAX	2227	ELEMENTARY SP ED CTR	\$4,421	0	\$0	\$4,421

Div. Num.	Division	Sch. Num.	School	Base Funding Per School	Target Population for Per Pupil Funding	Per Pupil Funding Based on Enrollment	Total Funding Per School From Federal Funds
036	GLOUCESTER	400	VICTORY ACADEMY	\$4,309	30	\$218	\$4,527
038	GRAYSON	70	FRIES MIDDLE	\$4,309	94	\$683	\$4,992
040	GREENSVILLE	361	ZION ALTERNATIVE ED	\$4,309	33	\$240	\$4,549
043	HENRICO	41	VA. RANDOLPH SP. ED. CTR.	\$4,309	40	\$291	\$4,600
043	HENRICO	45	NEW START/BASIC ALT SCH	\$4,309	41	\$298	\$4,607
043	HENRICO	70	NEW BRIDGE SCHOOL	\$4,026	22	\$160	\$4,186
043	HENRICO	350	MT. VERNON MIDDLE	\$4,309	47	\$341	\$4,650
044	HENRY	871	CENTER FOR COMMUNITY LRNG	\$4,309	11	\$80	\$4,389
049	KING AND QUEEN	280	CENTRAL HIGH	\$4,309	138	\$1,002	\$5,311
052	LEE	20	KEOKEE ELEM.	\$4,026	29	\$211	\$4,237
052	LEE	290	PENNINGTON MIDDLE	\$4,309	246	\$1,787	\$6,096
058	MECKLENBURG	980	BLUESTONE SR. HIGH	\$4,309	158	\$1,148	\$5,457
060	MONTGOMERY	650	AUBURN HIGH	\$4,309	75	\$545	\$4,854
060	MONTGOMERY	770	CHRISTIANSBURG HIGH	\$4,309	228	\$1,656	\$5,965
060	MONTGOMERY	904	EASTERN MONTGOMERY HIGH	\$4,309	68	\$494	\$4,803
091	SUSSEX	380	JEFFERSON ELEM.	\$4,026	81	\$588	\$4,614
094	WASHINGTON	1040	JOHN S. BATTLE HIGH	\$4,309	139	\$1,010	\$5,319
098	YORK	334	YORK RIVER REGIONAL	\$4,309	5	\$36	\$4,345
101	ALEXANDRIA CITY	150	SEC. TRAINING & ED. PROG.	\$4,733	20	\$145	\$4,878
107	COVINGTON CITY	360	JETER-WATSON INTERMEDIATE	\$4,026	69	\$501	\$4,527
108	DANVILLE CITY	1270	GLENWOOD ELEM.	\$4,026	65	\$472	\$4,498
108	DANVILLE CITY	1371	OPPORTUNITY SCHOOL	\$4,309	15	\$109	\$4,418
108	DANVILLE CITY	1373	WOODROW WILSON ELEM.	\$4,026	92	\$668	\$4,694
117	NEWPORT NEWS CITY	1140	BRIARFIELD ELEM.	\$4,026	75	\$545	\$4,571
118	NORFOLK CITY	2114	NORFOLK PREPARATORY HIGH	\$4,309	62	\$450	\$4,759
118	NORFOLK CITY	2115	NORFOLK ALTERNATIVE MIDDLE	\$4,309	0	\$0	\$4,309

Div. Num.	Division	Sch. Num.	School	Base Funding Per School	Target Population for Per Pupil Funding	Per Pupil Funding Based on Enrollment	Total Funding Per School From Federal Funds
120	PETERSBURG CITY	100	BLANDFORD ELEMENTARY SCHOOL	\$4,026	128	\$930	\$4,956
120	PETERSBURG CITY	110	VIRGINIA AVENUE ELEM.	\$4,026	122	\$886	\$4,912
120	PETERSBURG CITY	120	PEABODY MIDDLE	\$4,309	242	\$1,758	\$6,067
120	PETERSBURG CITY	130	WALNUT HILL ELEM.	\$4,026	219	\$1,591	\$5,617
120	PETERSBURG CITY	160	WESTVIEW ELEM.	\$4,026	130	\$944	\$4,970
120	PETERSBURG CITY	170	ROBERT E. LEE ELEM.	\$4,026	104	\$755	\$4,781
120	PETERSBURG CITY	180	J. E. B. STUART ELEM.	\$4,026	161	\$1,170	\$5,196
120	PETERSBURG CITY	190	A. P. HILL ELEM.	\$4,026	90	\$654	\$4,680
120	PETERSBURG CITY	200	PETERSBURG HIGH	\$4,309	271	\$1,969	\$6,278
120	PETERSBURG CITY	210	VERNON JOHNS SCHOOL	\$4,309	191	\$1,387	\$5,696
121	PORTSMOUTH CITY	150	MOUNT HERMON ELEM	\$4,026	57	\$414	\$4,440
121	PORTSMOUTH CITY	240	I. C. NORCOM HIGH	\$4,309	255	\$1,852	\$6,161
121	PORTSMOUTH CITY	280	BRIGHTON ELEM.	\$4,026	105	\$763	\$4,789
121	PORTSMOUTH CITY	310	WM. E. WATERS MIDDLE	\$4,309	250	\$1,816	\$6,125
121	PORTSMOUTH CITY	1630	HODGES MANOR ELEM.	\$4,026	145	\$1,053	\$5,079
121	PORTSMOUTH CITY	1640	HIGHLAND BILTMORE ELEM.	\$4,026	124	\$901	\$4,927
121	PORTSMOUTH CITY	1650	LAKEVIEW ELEM.	\$4,026	199	\$1,446	\$5,472
121	PORTSMOUTH CITY	1761	NEW DIRECTIONS CENTER	\$4,309	9	\$65	\$4,374
121	PORTSMOUTH CITY	1762	EMILY SPONG ELEM	\$4,026	63	\$458	\$4,484
121	PORTSMOUTH CITY	1763	S.H. CLARKE ACADEMY ELEM.	\$4,026	155	\$1,126	\$5,152
121	PORTSMOUTH CITY	1764	EXCEL CAMPUS	\$4,309	35	\$254	\$4,563
123	RICHMOND CITY	20	THOMAS JEFFERSON HIGH	\$4,309	165	\$1,199	\$5,508
123	RICHMOND CITY	60	ONSLow MINNIS MIDDLE	\$4,309	157	\$1,140	\$5,449
123	RICHMOND CITY	81	CAREER DEVELOPMENT CTR.	\$4,309	58	\$421	\$4,730
123	RICHMOND CITY	130	OVERBY-SHEPPARD ELEM.	\$4,026	130	\$944	\$4,970
123	RICHMOND CITY	170	BLACKWELL ELEM.	\$4,026	167	\$1,213	\$5,239

Div. Num.	Division	Sch. Num.	School	Base Funding Per School	Target Population for Per Pupil Funding	Per Pupil Funding Based on Enrollment	Total Funding Per School From Federal Funds
123	RICHMOND CITY	290	GEORGE MASON ELEM.	\$4,026	108	\$785	\$4,811
123	RICHMOND CITY	311	GEORGE W. CARVER ELEM.	\$4,026	183	\$1,329	\$5,355
123	RICHMOND CITY	510	SUMMER HILL/RUFFIN ROAD	\$4,026	159	\$1,155	\$5,181
123	RICHMOND CITY	620	ARMSTRONG HIGH	\$4,309	119	\$864	\$5,173
123	RICHMOND CITY	621	FRANKLIN MILITARY	\$4,309	41	\$298	\$4,607
123	RICHMOND CITY	650	WOODVILLE ELEM.	\$4,026	213	\$1,547	\$5,573
123	RICHMOND CITY	690	MAYMONT ELEM.	\$4,026	83	\$603	\$4,629
123	RICHMOND CITY	710	FAIRFIELD COURT ELEM.	\$4,026	121	\$879	\$4,905
123	RICHMOND CITY	720	WHITCOMB COURT ELEM.	\$4,026	113	\$821	\$4,847
123	RICHMOND CITY	730	JOHN MARSHALL HIGH	\$4,309	210	\$1,525	\$5,834
123	RICHMOND CITY	741	GEORGE WYTHE HIGH	\$4,309	211	\$1,533	\$5,842
123	RICHMOND CITY	770	MOSBY MIDDLE	\$4,309	140	\$1,017	\$5,326
123	RICHMOND CITY	810	CLARK SPRINGS ELEM.	\$4,026	124	\$901	\$4,927
123	RICHMOND CITY	830	CHIMBORAZO ELEM.	\$4,026	186	\$1,351	\$5,377
123	RICHMOND CITY	850	JOHN F. KENNEDY HIGH	\$4,309	161	\$1,170	\$5,479
123	RICHMOND CITY	1080	ELKHARDT MIDDLE	\$4,309	144	\$1,046	\$5,355
123	RICHMOND CITY	1510	HUGUENOT HIGH	\$4,309	301	\$2,187	\$6,496
123	RICHMOND CITY	1710	J. L. FRANCIS ELEM.	\$4,026	154	\$1,119	\$5,145
123	RICHMOND CITY	1740	PRE-SCHOOL DEV. CENTER	\$4,026	0	\$0	\$4,026
123	RICHMOND CITY	3101	CHANDLER MIDDLE	\$4,309	153	\$1,111	\$5,420
124	ROANOKE CITY	30	FOREST PARK MAGNET	\$4,026	93	\$676	\$4,702
124	ROANOKE CITY	220	ROANOKE ACDMY/MATH & SC	\$4,026	87	\$632	\$4,658
124	ROANOKE CITY	420	HURT PARK ELEM.	\$4,026	101	\$734	\$4,760
124	ROANOKE CITY	551	NOEL C. TAYLOR LRNG. ACADEMY	\$4,309	55	\$400	\$4,709
127	SUFFOLK CITY	300	LAKELAND HIGH	\$4,309	419	\$3,044	\$7,353
127	SUFFOLK CITY	392	TURLINGTON WOODS ATERNATIVE	\$4,309	0	\$0	\$4,309

Div. Num.	Division	Sch. Num.	School	Base Funding Per School	Target Population for Per Pupil Funding	Per Pupil Funding Based on Enrollment	Total Funding Per School From Federal Funds
128	VIRGINIA BEACH CITY	270	CENTER EFFECTIVE LEARNING	\$4,309	84	\$610	\$4,919
132	WINCHESTER CITY	181	NREP SPECIAL ED CTR	\$4,309	10	\$73	\$4,382
				\$423,196	10,573	\$76,804	\$500,000

## **Appendix B**

# **Sample Delivery Models**

### **Individual Model**

Purpose:	Individual and prescriptive instruction will be provided to students whose academic achievement puts them at-risk of not passing the spring SOL tests.
Population:	Students who have a variety of skill deficits are identified by their classroom teacher.
Instruction:	Using a ratio of 10 students per teacher, intense instruction is provided by a teacher trained in remediation techniques. A certified teacher who is trained in remediation techniques or a volunteer under the supervision of a certified teacher provides one-to-one tutoring or small-group instruction. Instruction follows an individualized prescriptive plan developed by the students' content teachers.
Resource Requirements:	One teacher per 10 students, volunteers or tutors, and individualized instructional materials

### **Common Skills Deficit Model**

Purpose:	Strategies for addressing specific content skill deficits that are characteristic of a group of at-risk students will be provided.
Population:	This program is designed for students who exhibit common skill deficits in a particular content area.
Instruction:	Identify the skills in a particular subject area, for the target grade, which are most commonly in need of strengthening for students whose academic achievement indicates that they are at-risk of failing SOL tests. Instructional units on the targeted skills are developed and provided to Academic Challenge teachers. New or different instructional strategies are employed to ensure mastery.
Resource Requirements:	One teacher for 15 students, content specific resource materials, and manipulatives as appropriate

## **Computer Assisted Model**

Purpose:	Computer-assisted software programs validated as effective for correcting specific academic deficits will be provided.
Population:	This program is designed for students who have been determined by their classroom teachers as having specific academic deficits that can be correlated to the instructional software.
Instruction:	Effective software programs designed to address individually identified skill deficits, as determined by the classroom teacher, are provided in a computer lab setting at ratios of approximately 20:1.
Resource Requirements:	One teacher per 20 students, a 20-station computer lab, and content specific software

## **Test Taking Strategies Model**

Purpose:	Students who have the content knowledge but are not familiar with or skilled in taking standardized tests will be given strategies for test-taking. A lack of such skills inhibits the transfer and application of content knowledge to the test questions.
Population:	This program is for students who failed the previous SOL test by a few scale score points or who are not familiar or skilled in test-taking strategies and could benefit from improved test-taking skills.
Instruction:	Test taking skills such as interpreting information from graphs, pictures, charts, maps, and other visual cues; applying strategies for taking multiple-choice tests; accurately comprehending the meaning of a standardized test question; and identifying obviously incorrect answers are directly taught in a setting of 20 students per teacher. The local school division could develop teacher resource packets on test-taking skills on a division-wide basis to assist all teachers of Academic Challenge programs and to bring consistency to the instruction.
Resource Requirements:	One teacher per 20 students and test-taking skills resource materials

## **Combined Models**

The capacity of these models could be doubled using a combined model approach. For example, the capacity of the computer-assisted model could be doubled if coordinated with the test-taking skills model. Using a team teaching rotation, a computer lab (containing 20 students) would be monitored by an instructional aide while a qualified teacher provides instruction on test-taking skills in an adjacent classroom to an additional 20 students. The groups could rotate after two hours.

As another example, students could participate in the prescriptive model for the first two hours and then rotate to a common skills deficit model for an additional two hours.

## Appendix C Object Codes and Allowable Costs

The following account categories are used to track expenditures. The descriptions are provided as examples only.

### Object Codes

<b>1000</b>	<p><b>Employee Salaries and Wages</b>            Include compensation for the instructional and transportation personnel employed by eligible schools to provide 150 hours of additional instruction to eligible students. Compensation for wages for personnel other than instructional personnel or transportation personnel are not allowable costs. Administrative salaries and wages are not allowable costs.</p>
<b>2000</b>	<p><b>Employee Benefits</b>            Include job-related benefits provided to employees listed in employee salaries and wages, above, as part of their total compensation. Fringe benefits include the employer's portion of FICA, pensions, insurance and employee allowances. These may be claimed for employees being paid with grant funds as outlined in Personal Services, above.</p>
<b>3000</b>	<p><b>Purchased Services</b>            Include services acquired from outside vendors such as stipends paid to retired teachers or consultants. No "sub-contractees or sub-grantees" are allowed.</p>
<b>4000</b>	<p><b>Internal Services</b>            Include charges from an internal service fund to other activities or elements of the local agency for central purchasing of paper supplies, print shop costs or pupil transportation.</p>
<b>5000</b>	<p><b>Other Charges</b>            Include postage needed for newsletters or other correspondence to parents. Snacks are not an allowable cost for use with these funds.</p>
<b>6000</b>	<p><b>Materials and Supplies</b>            Include articles and commodities that are consumed or materially altered, paper-back reading books, math manipulatives, board games, pre- and post-tests, software, teacher resource guides, purchased programs, and curriculum reference materials. Includes minor equipment (under \$5,000) that is not capital outlay such as calculators, or electronic educational games.</p>

**Appendix D**  
**Final Report**  
*Academic Challenge for Success*

**PART A. Division Summary for \_\_\_\_\_**  
**(Name of Division)**

**Must be submitted by the Division with all eligible and participating school summaries (Part B. School Summary) attached no later than August 15, 2002 to:**

Kathleen M. Smith  
 Virginia Department of Education  
 P. O. Box 2120  
 Richmond, VA 23218-2120

Complete Part A (Division Summary) and attach Part B (School Summary) of the final report for each eligible and participating school.

<b>Information Needed</b>	<b>Please provide information as indicated in the column to the left in the boxes below.</b>
1. School Division	1.
2. Division contact person	2.
3. Telephone number of division contact	3.
4. Fax number of division contact	4.
5. E-mail address of division contact (required)	5.
6. How many schools participated?	6.
7. Total amount of reimbursement requested for the division as indicated in Appendix E.	7.
8. Certification statement: This final report includes Part B (School Summary) for each participating school and Appendix E. Reimbursement Request.	
_____ Signature of Superintendent	_____ Signature of County or City Administrator
_____ Typed Superintendent's Name	_____ Typed City or County Administrator's Name
_____ Date	_____ Date

## Final Report

**PART B. School Summary for** \_\_\_\_\_  
(Name of School) (Name of Division)

**Must be completed and attached to Part A (Division Summary) for each participating school. Attach sample assessments, newspaper articles, or other curricula developed as a part of this program (optional).**

INFORMATION NEEDED	Please provide information as indicated in the column to the left in the boxes below.
1. Name of division	1.
2. Name of school	2.
3. School number	3.
4. Address of the school	4.
5. Number of paid instructional staff for the program	5.
6. Number of volunteer staff for the program	6.
7. Check which program delivery model(s) were used (See Appendix B).	7. <input type="checkbox"/> Individual/Small Group Model <input type="checkbox"/> Test Taking Strategies Model <input type="checkbox"/> Common Skills Deficit Model <input type="checkbox"/> Computer Assisted Model <input type="checkbox"/> Other (give a brief description below):
8. Check the area(s) and grade(s) in which students were remediated (English includes English/Reading and/or Writing)	8. <input type="checkbox"/> 3 <sup>rd</sup> Grade English <input type="checkbox"/> 3 <sup>rd</sup> Grade Mathematics <input type="checkbox"/> 5 <sup>th</sup> Grade English <input type="checkbox"/> 5 <sup>th</sup> Grade Mathematics <input type="checkbox"/> 8 <sup>th</sup> Grade English <input type="checkbox"/> 8 <sup>th</sup> Grade Mathematics <input type="checkbox"/> 11 <sup>th</sup> Grade English <input type="checkbox"/> Algebra I <input type="checkbox"/> Geometry <input type="checkbox"/> Algebra II
9. Check when 150 hours of additional instruction took place. More than one check can be provided.	9. <input type="checkbox"/> Before school <input type="checkbox"/> After school <input type="checkbox"/> Saturday <input type="checkbox"/> Other (give a brief description below).
10. Number of students who participated in the program.	10.

<p>11. Specify the number of students who were remediated in each area (if identified for both English and math, count the student twice, once for each subject).</p>	<p>11.</p> <p>___ 3<sup>rd</sup> Grade English</p> <p>___ 3<sup>rd</sup> Grade Mathematics</p> <p>___ 5<sup>th</sup> Grade English</p> <p>___ 5<sup>th</sup> Grade Mathematics</p> <p>___ 8<sup>th</sup> Grade English</p> <p>___ 8<sup>th</sup> Grade Mathematics</p> <p>___ 11<sup>th</sup> Grade English</p> <p>___ Algebra I (7<sup>th</sup>/8<sup>th</sup> Grade)</p> <p>___ Algebra I (9<sup>th</sup> Grade and above)</p> <p>___ Geometry (7<sup>th</sup>/8<sup>th</sup> Grade)</p> <p>___ Geometry (9<sup>th</sup> Grade and above)</p> <p>___ Algebra II</p>
<p>11. How many total hours of instruction were provided?</p>	<p>12. (# of teachers x number of hours per teacher)</p>
<p>13. Begin date and end date.</p>	<p>13. Begin date: End Date</p>
<p>14. Of the students remediated, (see number 11 above) how many passed the SOL tests in each of the areas listed in the spring of 2002?</p>	<p>14.</p> <p>___ 3<sup>rd</sup> Grade English</p> <p>___ 3<sup>rd</sup> Grade Mathematics</p> <p>___ 5<sup>th</sup> Grade English</p> <p>___ 5<sup>th</sup> Grade Mathematics</p> <p>___ 8<sup>th</sup> Grade English</p> <p>___ 8<sup>th</sup> Grade Mathematics</p> <p>___ 11<sup>th</sup> Grade English</p> <p>___ Algebra I (7<sup>th</sup>/8<sup>th</sup> Grade)</p> <p>___ Algebra I (9<sup>th</sup> Grade and above)</p> <p>___ Geometry (7<sup>th</sup>/8<sup>th</sup> Grade)</p> <p>___ Geometry (9<sup>th</sup> Grade and above)</p> <p>___ Algebra II</p>
<p>15. What is your school's overall pass rate, including all students, on Spring 2002 (only) SOL assessments in the indicated areas? (Do not include writing.)</p>	<p>15.</p> <p>___ 3<sup>rd</sup> Grade English</p> <p>___ 3<sup>rd</sup> Grade Mathematics</p> <p>___ 5<sup>th</sup> Grade English</p> <p>___ 5<sup>th</sup> Grade Mathematics</p> <p>___ 8<sup>th</sup> Grade English</p> <p>___ 8<sup>th</sup> Grade Mathematics</p> <p>___ 11<sup>th</sup> Grade English</p> <p>___ Algebra I (7<sup>th</sup>/8<sup>th</sup> Grade)</p> <p>___ Algebra I (9<sup>th</sup> Grade and above)</p> <p>___ Geometry (7<sup>th</sup>/8<sup>th</sup> Grade)</p> <p>___ Geometry (9<sup>th</sup> Grade and above)</p> <p>___ Algebra II</p>
<p>16. Optional. Attach documents</p>	<p>16. Attachments. If possible, limit to no more than five</p>

such as sample assessments, newspaper articles, or other curricula developed as a part of this program (optional).	pages.
17. Principal's typed name	17.
18. Principal's signature	18.
19. Date of signature	19.
20. Principal's telephone	20.
21. Principal's fax	21.
22. Principal's e-mail address	22.

**Appendix E**  
**Final Request for Reimbursement**  
**Academic Challenge for Success**

**The division summary of expenditures (Part A) must be submitted with school budget summaries for all eligible and participating schools (Part B, C and D) attached no later than July 15, 2002 to:**

Kathleen M. Smith  
Virginia Department of Education  
P. O. Box 2120  
Richmond, VA 23218-2120

Local divisions must summarize school data and complete one division report. This report must include the following forms:

- A. Division Request for Reimbursement Summary
- B. School Request for Reimbursement Summary. Report only those expenditures paid with funds from Appendix A for each eligible and participating school. Do not include expenditures paid with the \$500 grant provided to each participating school from Capital One.
- C. Documentation for Salaries (Object Codes 1000 and 2000). Include school code with each position description. Report only those expenditures paid with funds from Appendix A for each eligible and participating school. Do not include expenditures paid with the \$500 grant provided to each participating school from Capital One.
- D. Documentation for Expenditures for Object Codes 3000, 4000, 5000, and 6000. Report only those expenditures paid with funds from Appendix A for each eligible and participating school. Do not include expenditures paid with the \$500 grant provided to each participating school from Capital One.
- E. Statement of Income. Include the \$500 grant paid to each participating school from Capital One as income. Include all other revenue used to supplement the cost of this program.

Budget Amendments

If a budget amendment is needed, please use Form E (Budget Amendment). Budget amendments must be submitted and approved prior to the final report to the address listed above.

Certification

The information and documentation provided in this request for reimbursement are accurate and reflect actual expenditures for the Academic Challenge for Success.

Total reimbursement requested for the Division: \_\_\_\_\_

\_\_\_\_\_  
Signature of Superintendent

\_\_\_\_\_  
Signature of Fiscal Agent

\_\_\_\_\_  
Print name of Superintendent

\_\_\_\_\_  
Print Name of Fiscal Agent

\_\_\_\_\_  
DATE

\_\_\_\_\_  
DATE

**ACADEMIC CHALLENGE FOR SUCCESS  
EXPENDITURES LOG  
REQUEST FOR REIMBURSEMENT**

**Part A. Division Request for Reimbursement Summary for \_\_\_\_\_  
(Name of Division)**

Summarize Part B (School Summary) for each eligible and participating school. Provide and attach back-up documentation as requested in Part C, D, and E.

Column 3 and 4 are the same unless an amended budget form has been filed and approved prior to the submission of this reimbursement.

Expenditures reported in column 5 are only those paid with funds as indicated for each eligible and participating school in Appendix A.

For column 6, subtract column 5 from column 4.

Expenditures reported in column 7 are those that have been not paid with revenue from Appendix A. These expenditures have been paid from other revenue sources including the \$500 grant provided to each participating school from Capital One.

For column 8, add column 5 and column 7.

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Expenditure Accounts	Object Code	Approved budget in the program justification	Amended budget after approval of amended form	Expenditures paid with funds from Appendix A Line 9, Form E (Statement of Income)	New remaining balance	Expenditures paid with other sources of revenue (Include \$500 from Capital One) Line 8, Form E (Statement of Income)	Total Expenditures (Column 5 + Column 7)
Employee Salary/Wages	1000						
Employee Benefits	2000						
Purchased Services	3000						
Internal Services	4000						
Other Services	5000						
Materials/Supplies	6000						
Capital Outlay	8000						
<b>TOTAL</b>							

**ACADEMIC CHALLENGE FOR SUCCESS**

**EXPENDITURES LOG  
REQUEST FOR REIMBURSEMENT**

**Part B. School Request for Reimbursement Summary for**

\_\_\_\_\_

**(Name of School)**

\_\_\_\_\_

**(Name of Division)**

Summarize using Part C, D, and E. Provide and attach back-up documentation as requested in Part C, D, and E. as indicated on each form. Column 3 and 4 are the same unless an amended budget form has been filed and approved prior to the submission of this reimbursement. Expenditures reported in column 5 are only those paid with funds as indicated for each eligible and participating school in Appendix A. For column 6, subtract column 5 from column 4. Expenditures reported in column 7 are those that have been not paid with revenue from Appendix A. These expenditures have been paid from other revenue sources. Include the expenditures paid with the \$500 grant provided from Capital One. For column 8, add column 5 and column 7.

(1)	(2)	(3)	(4)	(5)	(6)	(7)	(8)
Expenditure Accounts	Object Code	Approved budget in the program justification	Amended budget after approval of amended form	Expenditures paid with funds from Appendix A	New remaining balance	Expenditures paid with other sources of revenue (Include \$500 grant from Capital One)	Total Expenditures (Column 5 + Column 7)
Employee Salary/Wages	1000						
Employee Benefits	2000						
Purchased Services	3000						
Internal Services	4000						
Other Services	5000						
Materials/Supplies	6000						
Capital Outlay	8000						
<b>TOTAL</b>							

**ACADEMIC CHALLENGE FOR SUCCESS  
DOCUMENTATION FOR SALARIES  
REQUEST FOR REIMBURSEMENT**

**Part C. Documentation for Salaries (Object Codes 1000 and 2000) for \_\_\_\_\_**  
**(Name of School)**

\_\_\_\_\_  
**(Name of Division)**

**Classify positions as teacher, teacher/coordinator, or instructional support**

If no voucher or check number, indicate that funds were transferred electronically.

Do not include salaries or benefits paid with the \$500 grant from Capital One.

Salaries and fixed charges for the period from \_\_\_\_\_, 2002 until \_\_\_\_\_, 2002 are as follows:

Name	Social Security Number	Classification	Amount of Salary Object Code 1000	Amount of Salary Object Code 2000	Voucher number or Check number
<b>Total</b>					



**ACADEMIC CHALLENGE FOR SUCCESS  
REQUEST FOR REIMBURSEMENT**

**Part E. Statement of Income of Income**

\_\_\_\_\_  
**(Name of School)**

\_\_\_\_\_  
**(Name of Division)**

**Total Income generated and received:**

<b>Type of Income</b>	<b>Amount</b>
1. Capital One	\$500.00
2. Local Cash	
3. Local In-Kind	
4. State (and other state funded grants)	
5. Other Federal	
6. Private	
7. Private	
8. Private	
Subtotal	
9. Expenditures requested for reimbursement for funds received as indicated in Appendix A	
Total of all expenditures (add row 8 and 9)	

**ACADEMIC CHALLENGE FOR SUCCESS  
REQUEST FOR BUDGET AMENDMENT**

**Part F. Request for Budget Amendment**

\_\_\_\_\_  
**(Name of School)**

\_\_\_\_\_  
**(Name of Division)**

Budget amendments need to be requested for expenditures that will be paid with funds provided to eligible and participating schools listed in Appendix A.

<b>Categories</b>	<b>Current Budget Amount From Part E (School Budget Summary) of the Program Justification</b>	<b>Changes + or -</b>	<b>Revised Budget Amount</b>
<b>Employee Salary/Wages (1000)</b>			
<b>Employee Benefits (2000)</b>			
<b>Purchased Services (3000)</b>			
<b>Internal Services (4000)</b>			
<b>Other Services (5000)</b>			
<b>Materials and Supplies (6000)</b>			
<b>Total</b>			

Please answer the following questions on an additional page.

1. What is the purpose of the modifications?
2. For EACH category where money is subtracted, what line item in Part D (School Budget Narrative) of the Program Justification will be decreased or eliminated. Is something being eliminated or reduced for new spending?
3. Where spending will be decreased, why is new use better than the approved budget?

\_\_\_\_\_  
Signature/ DATE of VDOE Project Coordinator

\_\_\_\_\_  
Signature/DATE of Division Fiscal Agent

\_\_\_\_\_  
Print name of VDOE Project Coordinator

\_\_\_\_\_  
Print Name of Fiscal Agent