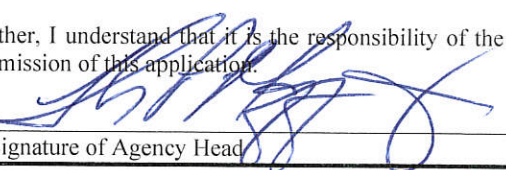
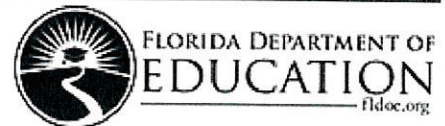


FLORIDA DEPARTMENT OF EDUCATION PROJECT APPLICATION

Please return to: Florida Department of Education Office of Grants Management Room 332, Turlington Building 325 West Gaines Street Tallahassee, Florida 32399-0400 Telephone: (850) 245-0496	A) Program Name: Hamilton County District School Board 2016-2017 TAPS NUMBER: 17A007	DOE USE ONLY Date Received
B) Name and Address of Eligible Applicant: Hamilton County District School Board 5683 US Highway 129 South Jasper, Florida, FL 32052		Project Number (DOE Assigned)
C) Total Funds Requested: \$ 30,329.00 DOE USE ONLY Total Approved Project: \$	D) Applicant Contact & Business Information	
	Contact Name: Phyllis Porter Fiscal Contact Name: Mary Loughran	Telephone Numbers: 386-792-7807
	Mailing Address: 5683 US Highway 129 South Jasper, Florida, 32052	E-mail Addresses: phyllis.porter@hamiltonfl.com
	Physical/Facility Address: 5683 US Highway 129 South Jasper 32052	DUNS number: 121892491 FEIN number: 59-6000629
CERTIFICATION		
<p>I, <u>Thomas P. Moffses</u> as the official who is authorized to legally bind the agency/organization, do hereby certify to the best of my knowledge and belief that all the information and attachments submitted in this application are true, complete and accurate, for the purposes, and objectives, set forth in the RFA or RFP and are consistent with the statement of general assurances and specific programmatic assurances for this project. I am aware that any false, fictitious or fraudulent information or the omission of any material fact may subject me to criminal, or administrative penalties for the false statement, false claims or otherwise. Furthermore, all applicable statutes, regulations, and procedures; administrative and programmatic requirements; and procedures for fiscal control and maintenance of records will be implemented to ensure proper accountability for the expenditure of funds on this project. All records necessary to substantiate these requirements will be available for review by appropriate state and federal staff. I further certify that all expenditures will be obligated on or after the effective date and prior to the termination date of the project. Disbursements will be reported only as appropriate to this project, and will not be used for matching funds on this or any special project, where prohibited.</p> <p>Further, I understand that it is the responsibility of the agency head to obtain from its governing body the authorization for the submission of this application.</p>		
E)  Signature of Agency Head		

DOE 100A
 Revised March 2015



Pam Stewart, Commissioner

A) NAME OF ELIGIBLE RECIPIENT:
 B) Project Number(DOE USE ONLY): 240-1107B-7CR01

E) TAPS
 Number
 17A007

count	Activity	FUNCTION	OBJECT	ACCOUNT TITLE AND NARRATIVE	FTE	AMOUNT
1	ACTIVITIES 1/2: Provide transportation for students to post secondary institutions	5300	330	Travel- for students to visit post secondary institutions and businesses (Need/Activity 1/2)	0.000	\$ 500.00
2	ACTIVITIES 1/2: Provide supplemental materials and supplies for students to increase achievement and graduation rate in reading and math.	5300	510	Supplies- to include supplemental reading and math materials targeted to specific student needs.	0.000	\$ 6,843.00
3	ACTIVITY 1/4: Provide funds to allow student to take the ACT or SAT to achieve postsecondary readiness	5300	730	Dues and Fees- ACT/SAT tests (Need/Activity 1/4)	0.000	\$ 200.00
4	ACTIVITY 1/1: Provide a Graduation Coach	6300	130	Other-Certified Instructional Personnel- Graduation Coach (Need/Activity, 1/1)	0.400	\$ 16,000.00
5	ACTIVITY 1/1: Provide a Graduation Coach	6300	210	Retirement- (7.52%) for Graduation Coach (Need/Activity 1/1)	0.000	\$ 1,203.00
6	ACTIVITY 1/1: Provide a Graduation Coach	6300	220	Social Security- (6.2%) for Graduation Coach (Need/Activity 1/1)	0.000	\$ 992.00
7	ACTIVITY 1/1: Provide a Graduation Coach	6300	221	Medicare/FICA- (1.65%) for Graduation Coach (Need/Activity 1/1)	0.000	\$ 232.00
8	ACTIVITY 1/1: Provide a Graduation Coach	6300	230	Group Insurance- for Graduation Coach (Need/Activity 1/1)	0.000	\$ 960.00

9	ACTIVITY 1/1: Provide a Graduation Coach	6300	240	Workers Compensation- (.0075) for Graduation Coach (Need/Activity 1/1)	0.000	\$ 120.00
10	ACTIVITY 1/1: Travel for Graduation Coach	6300	330	Travel- for Graduation Coach to conferences and meetings (Need/Activity 1/1)	0.000	\$ 750.00
11	ACTIVITY 1/3: Title VI coordinator to attend FASFEPA meetings	6300	330	Travel-Registration, motel and travel for FASFEPA and appropriate trainings pertaining to Title VI Coordinator (Need/Activity 1/3)	0.000	\$ 750.00
12	ACTIVITIES 1/1: Supplies for Graduation Coach	6300	510	Supplies- Materials and supplies to include materials for presentations, flyers, letters and handouts for parents and students, other materials to provide students needed information for success (Need/Activity 1/1)	0.000	\$ 250.00
13	Indirect Cost PLAN B	7200	790	Miscellaneous Expenses- Indirect Cost 5.31%	0.000	\$ 1,529.00
	Total:				C) TOTAL	\$ 30,329.00

DOE 101
Revised August 2013