



REQUEST FOR PROGRAM APPROACH CHANGE AND/OR BUDGET MODIFICATION

Delegate/Partner: Sacramento County Office of Education

Funding Source: Federal - ARP

Agreement Number: 21C9651H0ARP-CR

Date: 9/8/22

I. I/We are requesting the following exhibit(s), attached to the agreement contract referenced above, be modified:

*Please check the type of request

- a) Program Options (requires ACF approval) ☐
- b) Budget (within current year) (requires ACF approval for equipment or fixed assets) ☒
- c) Budget Carryover (requires ACF approval) ☐
- d) Calendar (requires Notification only) ☐
- e) Change in Centers/Temporary closure ☐
- f) Summary of Federal Funds ☐
- g) Other: _____

II. The requested changes are:

Requested Changes (Please identify what is in the original agreement and describe the change being requested):

Sacramento County Office of Education (SCOE) would like to request the reallocation of current funds due to changes in program need. SCOE requests that a total of \$47,458 be designated to 'Supplies', \$13,576 to Travel, and \$24,050 to 'Other'. In the original agreement the funds are dispersed only between Supplies and Other.

From "Other":

\$13,576 to Travel

\$20,956.28 to Supplies

Updated Budget for "Other" is \$24,050.14

Updated Budget for "Supplies" is \$47,458

Revised 6/8/2022

REQUEST FOR PROGRAM APPROACH CHANGE AND/OR BUDGET MODIFICATION
(Continued)

III. The requested changes are justified based on the following:

The requested changes are based off changes in program and staff needs. The addition of travel funds allows staff the opportunity to attend a Parents As Teachers Conference. This enables SCOE's Home Educators to take this gained knowledge and apply to their home visits and families. In addition, the increase in supply funds will allow for the necessary supplies to enhance curriculum experiences, and technology supplies which may include computers, tablets, monitors and stands.

IV. Budget Modification -- Please complete this section if: 1) there are revisions in the budget as a result of the program approach change or 2) the request is specific to a Budget Modification.

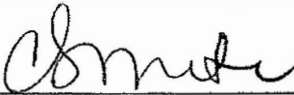
NOTE: A Budget Narrative is required to be submitted with the updated Budget Worksheet

GRANT # <u>694E000671</u>			
Cost Category/Item Description	Current Budget	Budget Modification	Updated Budget
Personnel			
Fringe Benefits			
Travel	0	13,576	13,576
Equipment			
Supplies	26,501.72	20,956.28	47,458
Contractual			
Construction			
Other	58,582.42	-34,532.28	24,050.14
TOTAL	85,084.14		85,084.14

Revised 6/8/2022

IV. I am authorizing that this request be submitted to SETA on behalf of the program referenced above and do so pursuant to the Resolution Authorizing Execution of Service Provider Subgrant/Delegate Agency Agreement/Service Contract from the Sacramento Employment and Training Agency included in this agreement contract.

DATE: 9/12/22


(Authorized Signature)

Christine Smith
(Typed Name)

Director
(Title)

IV. I am authorizing that this request be submitted to SETA on behalf of the program referenced above and do so pursuant to the Resolution Authorizing Execution of Service Provider Subgrant/Delegate Agency Agreement/Service Contract from the Sacramento Employment and Training Agency included in this agreement contract.

DATE: _____

(Authorized Signature)

Brent Malicote

(Typed Name)

Assistant Superintendent, Educational Services

(Title)

☐ **APPROVED BY POLICY COMMITTEE** (See instruction if required):

DATE OF MEETING: _____

DATE: _____

SETA

(Signature of Chairperson, Policy Committee)

SETA

(Typed Name)

☐ **APPROVED BY GOVERNING BODY** (See instructions if required):

DATE OF MEETING: _____

DATE: _____

(Signature of Chairperson, Board of Trustee or Board of Directors)

Paul A. Keefer, Board President

(Typed Name)



REQUEST FOR PROGRAM APPROACH CHANGE AND/OR BUDGET MODIFICATION

Delegate/Partner: Sacramento County Office of Education

Funding Source: Federal - CRRSA

Agreement Number: 21C9651H0ARP-CR

Date: 9/8/22

I. I/We are requesting the following exhibit(s), attached to the agreement contract referenced above, be modified:

*Please check the type of request

- a) Program Options (requires ACF approval) ☐
- b) Budget (within current year) (requires ACF approval for equipment or fixed assets) ☒
- c) Budget Carryover (requires ACF approval) ☐
- d) Calendar (requires Notification only) ☐
- e) Change in Centers/Temporary closure ☐
- f) Summary of Federal Funds ☐
- g) Other: _____

II. The requested changes are:

Requested Changes (Please identify what is in the original agreement and describe the change being requested):

Sacramento County Office of Education (SCOE) would like to request the reallocation of current funds due to changes in program need. SCOE requests that a total of \$23,543 be designated to 'Supplies.' From "Other", the amount of \$1,924 will be moved to "Supplies".

REQUEST FOR PROGRAM APPROACH CHANGE AND/OR BUDGET MODIFICATION
(Continued)

III. The requested changes are justified based on the following:

The increase in supply funds will allow for the necessary supplies to enhance curriculum experiences, and technology supplies which may include computers, tablets, monitors and stands.

IV. Budget Modification – Please complete this section if: 1) there are revisions in the budget as a result of the program approach change or 2) the request is specific to a Budget Modification.

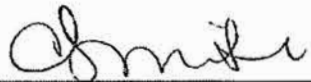
NOTE: A Budget Narrative is required to be submitted with the updated Budget Worksheet

GRANT # <u>09HE000671</u>			
Cost Category/Item Description	Current Budget	Budget Modification	Updated Budget
Personnel			
Fringe Benefits			
Travel			
Equipment			
Supplies	21,619	1,924	23,543
Contractual			
Construction			
Other	1,924	-1,924	0
TOTAL	23,543		23,543

Revised 6/8/2022

IV. I am authorizing that this request be submitted to SETA on behalf of the program referenced above and do so pursuant to the Resolution Authorizing Execution of Service Provider Subgrant/Delegate Agency Agreement/Service Contract from the Sacramento Employment and Training Agency included in this agreement contract.

DATE: 9/12/22


(Authorized Signature)

Christine Smith
(Typed Name)

Director
(Title)

IV. I am authorizing that this request be submitted to SETA on behalf of the program referenced above and do so pursuant to the Resolution Authorizing Execution of Service Provider Subgrant/Delegate Agency Agreement/Service Contract from the Sacramento Employment and Training Agency included in this agreement contract.

DATE: _____

(Authorized Signature)

Brent Malicote

(Typed Name)

Assistant Superintendent, Educational Services

(Title)

☐ **APPROVED BY POLICY COMMITTEE** (See instruction if required):

DATE OF MEETING: _____

DATE: _____

SETA

(Signature of Chairperson, Policy Committee)

SETA

(Typed Name)

☐ **APPROVED BY GOVERNING BODY** (See instructions if required):

DATE OF MEETING: _____

DATE: _____

(Signature of Chairperson, Board of Trustee or Board of Directors)

Paul A. Keefer, Board President

(Typed Name)



REQUEST FOR PROGRAM APPROACH CHANGE AND/OR BUDGET MODIFICATION

Delegate/Partner: Sacramento County Office of Education

Funding Source: ☐ Head Start ☒ Early Head Start ☐ Both

Agreement Number: 23C9651H0 Date: 8/10/22

I. I/We are requesting the following exhibit(s), attached to the agreement contract referenced above, be modified:

Please check the type of request(s):

☐ **Program Options**

☒ **Budget Modification** (changing the dollar amount between cost categories)

For Program Year: 2020-2021 (Year 1)

*Does this involve the purchase of a fixed asset? ☐ Yes ☒ No
(ACF approval required for all fixed asset purchases)*

*Will the project be over \$250,000? ☐ Yes ☒ No
(1303 Facilities Renovation/Repair Application will be required)*

☒ **Budget Carryover**

*From Program Year: 2020-2021 to Program Year 2022-23
(Requires ACF approval)*

☐ **Change in service days / Calendar Change**

☐ **Change in Centers / Temporary Closure**

☐ **Class-size Waiver Request** (to enroll up to 24 children in a class(es)
(Requires ACF approval)

☐ **One-time Health and Safety Program Improvement Funding Request** (pending available funds)

☐ **Other:** _____

II. Please identify what is in the original agreement and describe the change being requested.

Sacramento County Office of Education is requesting a budget modification (from "Other" cost category to "Supplies") and carryover from Year 1 (20/21) of \$23,756 to Year 3 (2022-23).

REQUEST FOR PROGRAM APPROACH CHANGE AND/OR BUDGET MODIFICATION
(Continued)

III. The requested changes are justified based on the following:

Sacramento County Office of Education will use these additional funds for the following: Marketing and Outreach to increase awareness of program benefits and increase enrollment. This would include promotional items such as postcards/brochures, tabling items for outreach events such as magnets or replacements (if needed) for signage, tablecloths, pop up tents, staff shirts; Resources for families which includes children's books, materials to supplement or reinforce PAT curriculum, backpacks/bags, puppets, dolls, etc.; Replacement resources for staff to upgrade technology, provide hot spots or provide replacement for technology that may fail; Training and technical support for staff which may include: software tools to increase efficiency, additional PAT training or support as available; Professional learning for staff and parents in trauma informed care, equity, inclusion and social emotional supports.

IV. For a Budget Modification – Please complete this section if: 1) there are revisions in the budget as a result of the program approach change or 2) the request is specific to a Budget Modification.

NOTE: A Budget Narrative is required to be submitted with the updated Budget Worksheet

Program Year 2020-2021 (Year 1)

Grant #: 09CH010182

Cost Category/Item Description	Original Budget	Budget Modification	Updated Budget
Personnel	436,048		436,048
Fringe Benefits	182,806		182,806
Travel			
Equipment			
Supplies	6,500	23,756	30,256
Contractual			
Construction			
Other	86,954	<23,756>	63,198
TOTAL	712,308	0	712,308

Non-Federal Share (for Carryover Requests Only)

Non-Federal Share	Original Budget	Budget Modification	Updated Budget

Please describe how agency will obtain the Non-Federal Share:

\$5,939 Non-Federal Share (25% of \$23,756) will be obtained by increasing the match in Administrator salary by .08 for August and September, and by .07 for October and November 2022.

IV. I am authorizing that this request be submitted to SETA on behalf of the program referenced above and do so pursuant to the Resolution Authorizing Execution of Service Provider Subgrant/Delegate Agency Agreement/Service Contract from the Sacramento Employment and Training Agency included in this agreement contract.

DATE: _____

(Authorized Signature)

Brent Malicote

(Typed Name)

Assistant Superintendent, Educational Services

(Title)

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SETA

(Signature of Chairperson, Policy Committee)

SETA

(Typed Name)

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DATE OF MEETING: _____

DATE: _____

(Signature of Chairperson, Board of Trustee or Board of Directors)

Paul A. Keefer, Board President

(Typed Name)

REQUEST FOR PROGRAM APPROACH CHANGE AND/OR BUDGET MODIFICATION
(Continued)

III. The requested changes are justified based on the following:

Sacramento County Office of Education will use these additional funds for the following: Marketing and Outreach to increase awareness of program benefits and increase enrollment, training and technical support for staff which may include: software tools to increase efficiency, additional PAT training support, professional learning for staff in trauma informed care, inclusion, and social emotional support and professional learning for parents in trauma informed care.

IV. For a Budget Modification – Please complete this section if: 1) there are revisions in the budget as a result of the program approach change or 2) the request is specific to a Budget Modification.

NOTE: A Budget Narrative is required to be submitted with the updated Budget Worksheet

Program Year <u>2021-2022 (Year 3)</u>		Grant #: 09CH010182	
Cost Category/Item Description	Original Budget	Budget Modification	Updated Budget
Personnel	454,774	<31,049>	423,725
Fringe Benefits	180,393	<6,545>	173,848
Travel			
Equipment			
Supplies	6,157	0	6,157
Contractual			
Construction			
Other	79,674	37,594	117,268
TOTAL	720,998	0	720,998
Non-Federal Share (for Carryover Requests Only)			
Non-Federal Share	Original Budget	Budget Modification	Updated Budget
Please describe how agency will obtain the Non-Federal Share: \$9,398 Non-Federal Share (25% of \$37,594) will be obtained by SCOE increasing the match in Administrator salary by .07 for December-April, and by .06 for May and June.			

IV. I am authorizing that this request be submitted to SETA on behalf of the program referenced above and do so pursuant to the Resolution Authorizing Execution of Service Provider Subgrant/Delegate Agency Agreement/Service Contract from the Sacramento Employment and Training Agency included in this agreement contract.

DATE: _____

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(Typed Name)

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(Signature of Chairperson, Policy Committee)

SETA

(Typed Name)

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Paul A. Keefer, Board President

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