



STATE OF VERMONT
JOINT FISCAL OFFICE

MEMORANDUM

To: Joint Fiscal Committee members
From: Sorsha Anderson, Senior Staff Associate
Date: November 23, 2022
Subject: Grant Request – JFO #3132

Enclosed please find one (1) item, which the Joint Fiscal Office has received from the Administration.

JFO #3132: \$2,443,120.00 to the Vermont Agency of Education from the U.S. Department of Education. Funds to provide professional development to VT educators to address student access to high-quality instruction and intervention delivery systems from birth through age 21.
[Received November 14, 2022]

Please review the enclosed materials and notify the Joint Fiscal Office (Sorsha Anderson: sanderson@leg.state.vt.us) if you have questions or would like this item held for legislative review. Unless we hear from you to the contrary by December 9, 2022, we will assume that you agree to consider as final the Governor's acceptance of this request.



State of Vermont
 Department of Finance & Management
 109 State Street, Pavilion Building
 Montpelier, VT 05620-0401

[phone] 802-828-2376
 [fax] 802-828-2428

Agency of Administration

**STATE OF VERMONT
 FINANCE & MANAGEMENT GRANT REVIEW FORM**

Grant Summary:						The State Personnel Development Grant is intended to provide training and other professional development to educators serving students through IDEA Parts B and C.
Date:						11/3/2022
Department:						Agency of Education
Legal Title of Grant:						State Personnel Development Grant
Federal Catalog #:						84.323A
Grant/Donor Name and Address:						US Dept. of Ed., 550 12th St., SW, Rm. 6087, Washington, DC 20202
Grant Period:		From:	10/1/2022	To:	9/30/2027	
Grant/Donation						\$2,443,120
	SFY 1	SFY 2	SFY 3	Total	Comments	
Grant Amount:	\$234,980	\$588,380	\$543,720	\$2,443,120	SFY26 \$543,720 SFY27 \$532,320	
Position Information:		# Positions	Explanation/Comments			
		0				
Additional Comments:			DFM made technical corrections to AA1 following confirmation with agency.			
Department of Finance & Management				Adam Greshin	Digitally signed by Adam Greshin DN: cn=Adam Greshin, o=State of Vermont, ou=Department of Finance & Management, email=agreshin@state.vt.us	(Initial)
Secretary of Administration				Douglas Farham	Digitally signed by Douglas Farham DN: cn=Douglas Farham, o=State of Vermont, ou=Department of Administration, email=dfarham@state.vt.us	(Initial)
Sent To Joint Fiscal Office						Date



STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE (Form AA-1)

BASIC GRANT INFORMATION							
1. Agency:		VT Agency of Education					
2. Department:		Student Support Services Division					
3. Program:		State Program Improvement Grants					
4. Legal Title of Grant:		State Personnel Development Grant					
5. Federal Catalog #:		84.323A					
6. Grant/Donor Name and Address:							
US Dept. of Ed., 550 12 th St., SW, Rm. 6087, Washington, DC 20202							
7. Grant Period:		From:	10/1/2022	To:	9/30/2027		
8. Purpose of Grant:							
Provide training and coaching to VT educators to address students' access to high-quality instruction and intervention delivery systems along the continuum from birth through age 21. Implementing an effective instruction and intervention delivery system will ensure children and students are provided appropriate instruction, intervention and/or services as soon as a need is identified by educators, families, or students.							
9. Impact on existing program if grant is not Accepted:							
Funding would not be available to conduct the professional development activities.							
10. BUDGET INFORMATION							
Expenditures:	SFY 1		SFY 2		SFY 3		Comments
	FY23		FY24		FY25		
Personal Services	\$226,980		\$550,380		\$535,720		FY26 \$538,720 FY27 \$524,320
Operating Expenses	\$8,000		\$8,000		\$8,000		FY26 \$8,000 FY27 \$8,000
Grants	\$0		\$0		\$0		FY26 \$0.00 FY27 \$0.00
Total	\$234,980		\$588,380		\$543,720		FY26 \$543,720 FY27 \$532,320
Revenues:							
State Funds:	\$		\$		\$		
Cash	\$		\$		\$		
In-Kind	\$		\$		\$		
Federal Funds:	\$221,960		\$566,960		\$523,000		FY26 \$523,000 FY27 \$513,000
(Direct Costs)	\$		\$		\$		
(Statewide Indirect)	\$13,020		\$21,420		\$20,720		FY26 \$20,720 FY27 \$19,320
(Departmental Indirect)	\$		\$		\$		
Other Funds:	\$		\$		\$		
Grant (source)	\$		\$		\$		
Total	\$234,980		\$588,380		\$543,720		FY26 \$543,720 FY27 \$532,320

STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE (Form AA-1)

Appropriation No:	5100070000	Amount:	\$234,980
			\$
			\$
			\$
			\$
			\$
		Total	\$

PERSONAL SERVICE INFORMATION

11. Will monies from this grant be used to fund one or more Personal Service Contracts? Yes No
 If "Yes", appointing authority must initial here to ^{DS} intent to follow current competitive bidding process/policy.
 Appointing Authority Name: _____ Agreed by: DF (initial)

12. Limited Service Position Information:	# Positions	Title
Total Positions		

12a. Equipment and space for these positions: Is presently available. Can be obtained with available funds.

13. AUTHORIZATION AGENCY/DEPARTMENT

I/we certify that no funds beyond basic application preparation and filing costs have been expended or committed in anticipation of Joint Fiscal Committee approval of this grant, unless previous notification was made on Form AA-1PN (if applicable):

Signature	Sean Cousins	Date	10/26/2022
Title:	Deputy CEO, Vermont Agency of Education		
Signature	Daniel French	Date:	10/26/2022
Title:	Vermont Secretary of Education		

14. SECRETARY OF ADMINISTRATION

Approved: _____ (Secretary or designee signature) Douglas Farnham **Date:** 11/7/2022

15. ACTION BY GOVERNOR

Check One Box:
 Accepted [Signature] **Date:** 11/10/22
 Rejected

16. DOCUMENTATION REQUIRED

Required GRANT Documentation

<input type="checkbox"/> Request Memo	<input type="checkbox"/> Notice of Donation (if any)
<input type="checkbox"/> Dept. project approval (if applicable)	<input type="checkbox"/> Grant (Project) Timeline (if applicable)
<input type="checkbox"/> Notice of Award	<input type="checkbox"/> Request for Extension (if applicable)
<input type="checkbox"/> Grant Agreement	<input type="checkbox"/> Form AA-1PN attached (if applicable)

STATE OF VERMONT REQUEST FOR GRANT (*) ACCEPTANCE (Form AA-1)

<input type="checkbox"/> Grant Budget	
End Form AA-1	
(*) The term "grant" refers to any grant, gift, loan, or any sum of money or thing of value to be accepted by any agency, department, commission, board, or other part of state government (see 32 V.S.A. §5).	



WORKSPACE FORM

1-800-518-4726
SUPPORT@GRANTS.GOV

This Workspace form is one of the forms you need to complete prior to submitting your Application Package. This form can be completed in its entirety offline using Adobe Reader. You can save your form by clicking the "Save" button and see any errors by clicking the "Check For Errors" button. In-progress and completed forms can be uploaded at any time to Grants.gov using the Workspace feature.

When you open a form, required fields are highlighted in yellow with a red border. Optional fields and completed fields are displayed in white. If you enter invalid or incomplete information in a field, you will receive an error message. Additional instructions and FAQs about the Application Package can be found in the Grants.gov Applicants tab.

OPPORTUNITY & PACKAGE DETAILS:

Opportunity Number:	ED-GRANTS-061022-001
Opportunity Title:	Office of Special Education and Rehabilitative Services (OSERS): Office of Special Education Programs (OSEP): State Personnel Development Grants (SPDG) Program, Assistance Listing Number 84.323A
Opportunity Package ID:	PKG00275052
CFDA Number:	84.323
CFDA Description:	Special Education - State Personnel Development
Competition ID:	84-323A2022-1
Competition Title:	Office of Special Education and Rehabilitative Services (OSERS): Office of Special Education Programs (OSEP): State Personnel Development Grants (SPDG) Program, Assistance Listing Number 84.323A
Opening Date:	06/10/2022
Closing Date:	07/25/2022
Agency:	Department of Education
Contact Information:	Jennifer Coffey U.S. Department of Education 400 Maryland Avenue, SW Room 5161, Potomac Center Plaza Washington, DC 20202-5076 Telephone: (202) 245-6673 Email: Jennifer.Coffey@ed.gov

APPLICANT & WORKSPACE DETAILS:

Workspace ID:	WS00936538
Application Filing Name:	Vermont_spdg_2022
UEI:	GLRKHDJA6WH9
Organization:	VERMONT STATE AGENCY OF EDUCATION
Form Name:	U.S. DEPARTMENT OF EDUCATION BUDGET INFORMATION NON-CONSTRUCTION PROGRAMS
Form Version:	1.4
Requirement:	Mandatory
Download Date/Time:	Jul 17, 2022 09:21:15 AM EDT
Form State:	No Errors

FORM ACTIONS:



**U.S. DEPARTMENT OF EDUCATION
BUDGET INFORMATION
NON-CONSTRUCTION PROGRAMS**

OMB Number: 1894-0008
Expiration Date: 09/30/2023

Name of Institution/Organization

Applicants requesting funding for only one year should complete the column under "Project Year 1." Applicants requesting funding for multi-year grants should complete all applicable columns. Please read all instructions before completing form.

**SECTION A - BUDGET SUMMARY
U.S. DEPARTMENT OF EDUCATION FUNDS**

Budget Categories	Project Year 1 (a)	Project Year 2 (b)	Project Year 3 (c)	Project Year 4 (d)	Project Year 5 (e)	Project Year 6 (f)	Project Year 7 (g)	Total (h)
1. Personnel	0.00	0.00	0.00	0.00	0.00			0.00
2. Fringe Benefits	0.00	0.00	0.00	0.00	0.00			0.00
3. Travel	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00			20,000.00
4. Equipment	0.00	0.00	0.00	0.00	0.00			0.00
5. Supplies	0.00	0.00	0.00	0.00	0.00			0.00
6. Contractual	213,960.00	558,960.00	533,960.00	533,960.00	523,960.00			2,364,800.00
7. Construction	0.00	0.00	0.00	0.00	0.00			0.00
8. Other	4,000.00	4,000.00	4,000.00	4,000.00	4,000.00			20,000.00
9. Total Direct Costs (lines 1-8)	221,960.00	566,960.00	541,960.00	541,960.00	531,960.00			2,404,800.00
10. Indirect Costs*	13,020.00	21,420.00	20,720.00	20,720.00	19,320.00			95,200.00
11. Training Stipends								
12. Total Costs (lines 9-11)	234,980.00	588,380.00	562,680.00	562,680.00	551,280.00			2,500,000.00

***Indirect Cost Information (To Be Completed by Your Business Office):** If you are requesting reimbursement for indirect costs on line 10, please answer the following questions:

- (1) Do you have an Indirect Cost Rate Agreement approved by the Federal government? Yes No
- (2) If yes, please provide the following information:
 Period Covered by the Indirect Cost Rate Agreement: From: To: (mm/dd/yyyy)
 Approving Federal agency: ED Other (please specify):
 The Indirect Cost Rate is %.
- (3) If this is your first Federal grant, and you do not have an approved indirect cost rate agreement, are not a State, Local government or Indian Tribe, and are not funded under a training rate program or a restricted rate program, do you want to use the de minimis rate of 10% of MTDC? Yes No If yes, you must comply with the requirements of 2 CFR § 200.414(f).
- (4) If you do not have an approved indirect cost rate agreement, do you want to use the temporary rate of 10% of budgeted salaries and wages?
 Yes No If yes, you must submit a proposed indirect cost rate agreement within 90 days after the date your grant is awarded, as required by 34 CFR § 75.560.
- (5) For Restricted Rate Programs (check one) -- Are you using a restricted indirect cost rate that:
 Is included in your approved Indirect Cost Rate Agreement? Or, Complies with 34 CFR 76.564(c)(2)? The Restricted Indirect Cost Rate is %.
- (6) For Training Rate Programs (check one) -- Are you using a rate that:
 Is based on the training rate of 8 percent of MTDC (See EDGAR § 75.562(c)(4))? Or, Is included in your approved Indirect Cost Rate Agreement, because it is lower than the training rate of 8 percent of MTDC (See EDGAR § 75.562(c)(4))?

Name of Institution/Organization	Applicants requesting funding for only one year should complete the column under "Project Year 1." Applicants requesting funding for multi-year grants should complete all applicable columns. Please read all instructions before completing form.
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**SECTION B - BUDGET SUMMARY
NON-FEDERAL FUNDS**

Budget Categories	Project Year 1 (a)	Project Year 2 (b)	Project Year 3 (c)	Project Year 4 (d)	Project Year 5 (e)	Project Year 6 (f)	Project Year 7 (g)	Total (h)
1. Personnel								
2. Fringe Benefits								
3. Travel								
4. Equipment								
5. Supplies								
6. Contractual								
7. Construction								
8. Other								
9. Total Direct Costs (lines 1-8)								
10. Indirect Costs								
11. Training Stipends								
12. Total Costs (lines 9-11)								

SECTION C - BUDGET NARRATIVE (see instructions)

Name of Institution/Organization	Applicants requesting funding for only one year should complete the column under "Project Year 1." Applicants requesting funding for multi-year grants should complete all applicable columns. Please read all instructions before completing form.
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IF APPLICABLE: SECTION D - LIMITATION ON ADMINISTRATIVE EXPENSES

- (1) List administrative cost cap (x%):
- (2) What does your administrative cost cap apply to? (a) indirect and direct costs or, (b) only direct costs

Budget Categories	Project Year 1 (a)	Project Year 2 (b)	Project Year 3 (c)	Project Year 4 (d)	Project Year 5 (e)	Project Year 6 (f)	Project Year 7 (g)	Total (h)
1. Personnel Administrative	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
2. Fringe Benefits Administrative	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
3. Travel Administrative	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
4. Contractual Administrative	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
5. Construction Administrative	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
6. Other Administrative	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
7. Total Direct Administrative Costs (lines 1-6)	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
8. Indirect Costs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
9. Total Administrative Costs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
10. Total Percentage of Administrative Costs	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

H323A220009

Meg Porcella

State of Vermont

Student Support Services

VT Agency of Education 1 National Life Dr.

Davis 5

Montpelier, VT 05620

H323A220009

Daniel French
State of Vermont
Student Support Services
1 National Life Drive
Davis 5
Montpelier, VT 05620



**US Department of Education
Washington, D.C. 20202**

GRANT AWARD NOTIFICATION

1 RECIPIENT NAME State of Vermont Student Support Services 1 National Life Drive Davis 5 Montpelier, VT 05620	2 AWARD INFORMATION PR/AWARD NUMBER H323A220009 ACTION NUMBER 1 ACTION TYPE New AWARD TYPE Discretionary																			
3 PROJECT STAFF RECIPIENT PROJECT DIRECTOR Meg Porcella (802) 578-3717 meg.porcella@vermont.gov EDUCATION PROGRAM CONTACT Anita Vermeer (202) 245-6097 anita.vermeer@ed.gov EDUCATION PAYMENT HOTLINE G5 PAYEE HELPDESK 888-336-8930 obssed@servicenowservices.com	4 PROJECT TITLE 84.323A VT AOE 2022 State Personnel Development Grant Submission																			
5 KEY PERSONNEL <table border="0"> <thead> <tr> <th><u>NAME</u></th> <th><u>TITLE</u></th> <th><u>LEVEL OF EFFORT</u></th> </tr> </thead> <tbody> <tr> <td>Meg Porcella</td> <td>Project Director</td> <td>85 %</td> </tr> </tbody> </table>		<u>NAME</u>	<u>TITLE</u>	<u>LEVEL OF EFFORT</u>	Meg Porcella	Project Director	85 %													
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6 AWARD PERIODS <table border="0"> <tr> <td>BUDGET PERIOD</td> <td>10/01/2022 - 09/30/2023</td> </tr> <tr> <td>PERFORMANCE PERIOD</td> <td>10/01/2022 - 09/30/2027</td> </tr> </table> FUTURE BUDGET PERIODS <table border="0"> <thead> <tr> <th><u>BUDGET PERIOD</u></th> <th><u>DATE</u></th> <th><u>AMOUNT</u></th> </tr> </thead> <tbody> <tr> <td>2</td> <td>10/01/2023 - 09/30/2024</td> <td>\$1.00</td> </tr> <tr> <td>3</td> <td>10/01/2024 - 09/30/2025</td> <td>\$543,720.00</td> </tr> <tr> <td>4</td> <td>10/01/2025 - 09/30/2026</td> <td>\$543,720.00</td> </tr> <tr> <td>5</td> <td>10/01/2026 - 09/30/2027</td> <td>\$532,320.00</td> </tr> </tbody> </table>		BUDGET PERIOD	10/01/2022 - 09/30/2023	PERFORMANCE PERIOD	10/01/2022 - 09/30/2027	<u>BUDGET PERIOD</u>	<u>DATE</u>	<u>AMOUNT</u>	2	10/01/2023 - 09/30/2024	\$1.00	3	10/01/2024 - 09/30/2025	\$543,720.00	4	10/01/2025 - 09/30/2026	\$543,720.00	5	10/01/2026 - 09/30/2027	\$532,320.00
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9 LEGISLATIVE AND FISCAL DATA <table border="0"> <tr> <td>AUTHORITY:</td> <td>PL 108-446 PT.D INDIVIDUALS WITH DISABILITIES EDUCATION ACT</td> </tr> <tr> <td>PROGRAM TITLE:</td> <td>STATE PROGRAM IMPROVEMENT GRANTS</td> </tr> <tr> <td>CFDA/SUBPROGRAM NO:</td> <td>84.323A</td> </tr> </table>		AUTHORITY:	PL 108-446 PT.D INDIVIDUALS WITH DISABILITIES EDUCATION ACT	PROGRAM TITLE:	STATE PROGRAM IMPROVEMENT GRANTS	CFDA/SUBPROGRAM NO:	84.323A													
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**US Department of Education
Washington, D.C. 20202**

GRANT AWARD NOTIFICATION

FUND CODE	FUNDING YEAR	AWARD YEAR	ORG. CODE	CATEGORY	LIMITATION	ACTIVITY	CFDA	OBJECT CLASS	AMOUNT
0300A	2022	2022	EH000000	B	K56	000	323	4101C	\$823,359.00

10

PR/AWARD NUMBER: H323A220009
 RECIPIENT NAME: State of Vermont
 Student Support Services
 GRANTEE NAME: VERMONT STATE AGENCY OF EDUCATION
 1 NATL LIFE DR,
 MONTPELIER, VT 05620 - 8802
 PROGRAM INDIRECT COST TYPE: Unrestricted
 PROJECT INDIRECT COST RATE: 14%

TERMS AND CONDITIONS

(1) THE FOLLOWING ITEMS ARE INCORPORATED IN THE GRANT AGREEMENT:

- 1) THE RECIPIENT'S APPLICATION (BLOCK 2);
- 2) THE APPLICABLE EDUCATION DEPARTMENT REGULATIONS: 2 CFR PART 180; NONPROCUREMENT DEBARMENT AND SUSPENSION AS ADOPTED AT 2 CFR PART 3485; 2 CFR PART 200 AS ADOPTED AT 2 CFR 3474 (BLOCK 8), AND 34 CFR PARTS 75, 77, 79, 81, 82, 84, 86, 97, 98, 99; AND THE PROGRAM REGULATIONS SPECIFIED IN BLOCK 8; AND
- 3) THE SPECIAL TERMS AND CONDITIONS SHOWN AS ATTACHMENTS IN BLOCK 8 ON THE INITIAL AWARD APPLY UNTIL CHANGED.

THIS AWARD SUPPORTS ONLY THE BUDGET PERIOD SHOWN IN BLOCK 6. IN ACCORDANCE WITH 34 CFR 75.253, THE SECRETARY CONSIDERS, AMONG OTHER THINGS, CONTINUED FUNDING IF:

- 1) CONGRESS HAS APPROPRIATED SUFFICIENT FUNDS UNDER THE PROGRAM;
- 2) THE DEPARTMENT DETERMINES THAT CONTINUING THE PROJECT WOULD BE IN THE BEST INTEREST OF THE GOVERNMENT;
- 3) THE GRANTEE HAS MADE SUBSTANTIAL PROGRESS TOWARD MEETING THE GOALS AND OBJECTIVES OF THE PROJECT;
- 4) THE SECRETARY ESTABLISHED PERFORMANCE MEASUREMENT REQUIREMENTS FOR THE GRANT IN THE APPLICATION NOTICE, THE PERFORMANCE TARGETS IN THE GRANTEE'S APPROVED APPLICATION;
- 5) THE RECIPIENT HAS SUBMITTED REPORTS OF PROJECT PERFORMANCE AND BUDGET EXPENDITURES THAT MEET THE REPORTING REQUIREMENTS FOUND AT 34 CFR 75.118, 2 CFR 200.328 AND 200.329, AND ANY OTHER REPORTING REQUIREMENTS ESTABLISHED BY THE SECRETARY; AND
- 6) THE GRANTEE HAS MAINTAINED FINANCIAL AND ADMINISTRATIVE MANAGEMENT SYSTEMS THAT MEET THE REQUIREMENTS IN 2 CFR 200.302, FINANCIAL MANAGEMENT, AND 2 CFR 200.303, INTERNAL CONTROLS.

IN ACCORDANCE WITH 2 CFR 200.308(c)(2) CHANGES TO KEY PERSONNEL IDENTIFIED IN BLOCK 5 MUST RECEIVE PRIOR APPROVAL FROM THE DEPARTMENT.

THE SECRETARY ANTICIPATES FUTURE FUNDING FOR THIS AWARD ACCORDING TO THE SCHEDULE IDENTIFIED IN BLOCK 6. THESE FIGURES ARE ESTIMATES ONLY AND DO NOT BIND THE SECRETARY TO FUNDING THE AWARD FOR THESE PERIODS OR FOR THE SPECIFIC AMOUNTS SHOWN. THE RECIPIENT WILL BE NOTIFIED OF SPECIFIC FUTURE FUNDING ACTIONS THAT THE SECRETARY TAKES FOR THIS AWARD.