

Project AWARE State Educational Agency Program Budget Development Workbook and Narrative Guidance

The purpose of this document and the accompanying workbook is to assist you in the development of your budget and narrative budget justification. The budget workbook and accompanying budget justification narrative should be submitted to your GMO and GPO within 30 days after the date of award. Please read all the instructions and guidance (!!!) before you begin to develop your budget. And be sure to contact your GPO if you have any questions.

General Guidance

1. Component 1 costs cannot exceed 87 percent of the total grant award. Of that amount, not more than 15 percent can be used by the SEA, not more than 10 percent can be used for project evaluation, and not less than 75 percent can be used by the LEA.
2. Component 2 costs (MHFA/YMHFA) cannot exceed 13 percent of the total grant award. The SEA can retain the full amount of Component 2 costs for implementing MHFA/YMHFA training activities.
3. A 1.0 FTE Project Coordinator must be designated by SEA and the costs for this position must be included in the SEA budget.
4. Do not enter any numbers or other information in cells that are blocked in blue. These cells contain formulas to assist you in correctly calculating the costs. These cells have also been "locked" to prevent you from mistakenly deleting or changing the cell content.
5. Grant funds cannot be used for the following:
 - Meals, sporting events, entertainment. NOTE: Grant funds can be used for light snacks, not to exceed \$2.50 per person.
 - Making direct payments to individuals to encourage attendance and/or attainment of prevention or treatment goals. NOTE: Grant funds can be used for non-cash incentives of up to \$30 to encourage attendance and/or attainment of prevention/treatment goals when the incentives are built into the program design and when the incentives are the minimum amount necessary to meet program goals.
 - Making direct payments to individuals to induce them to enter prevention or treatment services.

6. There should be a detailed breakdown of all costs so it can be easily determined how they were calculated.

7. All budgeted costs must be allowable, reasonable, and allocable. The following defines each of these terms:

- **Allowable Costs**

- The costs must be necessary and reasonable for proper and efficient performance and administration of federal awards;

- Be authorized or not prohibited under State or local laws or regulations;

- Conform to any limitations or exclusions set forth in these principles, Federal laws, terms and conditions of the Federal award, or other governing regulations as to types or amounts of cost items;

- Be consistent with policies, regulations, and procedures that apply uniformly to both Federal awards and other activities of the governmental unit;

- Be accorded consistent treatment. A cost may not be assigned to a Federal award as a direct cost if any other cost incurred for the same purpose in like circumstances has been allocated to the Federal award as an indirect cost.

- Except as otherwise provided for in this Circular, be determined in accordance with generally accepted accounting principles;

- Not be included as a cost or used to meet cost sharing or matching requirements of any other Federal award in either the current or a prior period, except as specifically provided by Federal law or regulation.

- Be the net of all applicable credits.

- Be adequately documented.

- **Reasonable Costs** – A cost is reasonable if, in its nature and amount, it does not exceed that which would be incurred by a prudent person under the circumstances prevailing at the time the decision was made to incur the cost. The question of reasonableness is particularly important when governmental units or components are predominately federally funded. In determining reasonableness of a given cost, consideration shall be given to:

- Whether the cost is of a type generally recognized as ordinary and necessary for the operation of the governmental unit or the performance of the Federal award.
- The restraints or requirements imposed by such factors as: sound business practices; arms-length bargaining; Federal, State and other laws and regulations; and, terms and conditions of the Federal award.
- Market prices for comparable goods or services.
- Whether the individuals concerned acted with prudence in the circumstances considering their responsibilities to the governmental unit, its employees, the public at large, and the Federal Government.
- Significant deviations from the established practices of the governmental unit which may unjustifiably increase the Federal award's cost.

- **Allocable Costs**

- A cost is allocable to a particular cost objective if the goods or services involved are chargeable or assignable to such cost objective in accordance with relative benefits received.
- All activities which benefit from the governmental unit's indirect cost, including unallowable activities and services donated to the governmental unit by third parties, will receive an appropriate allocation of indirect costs.
- Any cost allocable to a particular Federal award or cost objective under the principles provided for in this Circular may not be charged to other Federal awards to overcome fund deficiencies, to avoid restrictions imposed by law or terms of the Federal awards, or for other reasons.

8. If indirect costs are being claimed, documentation to support the negotiated cost rate must be submitted with the budget documents. If the negotiated indirect cost rate changes, you will need to submit documentation to support the new rate.

Budget Spreadsheet Workbook Instructions

An electronic budget spreadsheet workbook has been provided to assist you in developing these revised budgets. The budget workbook has eight “tabbed” spreadsheets and the following provides detailed information about each:

1. **SUMMARY Tab:** The only information that needs to be entered into this spreadsheet is the name of SEA, your city and state, the SAMHSA grant number, the budget year (e.g., Year 1, Year 3), and the fiscal fund year (e.g., FY 2014, FY 2015). The remaining fields will be automatically updated as you develop the other “tabbed” spreadsheets.

The summary page will automatically calculate the percentage of funds for Component 1 (SEA, LEAs, and project evaluation) costs and Component 2 (MHFA/YMHFA costs). Be sure that the percentage amounts do not exceed the indicated amounts.

2. **SEA Costs Tab:** All state-level costs should be entered into this spreadsheet. The total for each of the 8 cost categories will be pasted automatically into the summary at the top of the spreadsheet as well as entered into the SUMMARY tab spreadsheet. Please do not enter any numbers into cells that are shaded as these cells contain formulas.

4. **LEA 1 COSTS Tab:** Please enter the name of the LEA 1 at the top of the spreadsheet in the Budget Title cell. All costs for LEA 1 should be entered into this spreadsheet. The total for each of the 8 cost categories will be pasted automatically into the summary at the top of the spreadsheet as well as in the summary tab spreadsheet

5. **LEA 2 COSTS Tab:** Please enter the name of the LEA 2 at the top of the spreadsheet in the Budget Title cell. All costs for LEA 2 should be entered into this spreadsheet. The total for each of the 8 cost categories will be pasted automatically into the summary at the top of the spreadsheet as well as in the summary tab spreadsheet.

6. **LEA 3 COSTS Tab:** Please enter the name of the LEA 3 at the top of the spreadsheet in the Budget Title cell. All costs for LEA 3 should be entered into this spreadsheet. The total for each of the 8 cost categories will be pasted automatically into the summary at the top of the spreadsheet as well as in the summary tab spreadsheet

3. **PROJECT EVALUATION COSTS Tab:** All project evaluation costs should be entered into this spreadsheet. The total for each of the 8 cost categories will be pasted automatically into the summary at the top of the spreadsheet as well as in the summary tab spreadsheet.

2. **YMHFA Costs Tab:** All Youth Mental Health First Aid costs should be entered into this spreadsheet. The total for each of the 8 cost categories will be pasted automatically into the summary at the top of the spreadsheet as well as entered into the SUMMARY tab spreadsheet. Please do not enter any numbers into cells that are shaded as these cells contain formulas.

7. **IN-KIND COSTS Tab:** Any in-kind costs should be entered into this spreadsheet. The total for each of the 8 cost categories will be pasted automatically into the summary at the top of the spreadsheet as well as in the summary tab spreadsheet

Cost Categories Guidance

You must submit a budget that is sufficiently detailed to show how the costs were calculated. For example, if \$220 thousand has been budgeted for project evaluation, you must show all the costs that equal the total amount. It is not sufficient to just enter \$220 thousand in the contract cost category.

Each of the “tabbed” spreadsheets has eight cost categories – Personnel, Fringe Benefits, Travel, Equipment, Supplies, Consultants/Contracts, Other, and Indirect. The annual costs for each category will be automatically calculated and the total will appear at the top of each spreadsheet and on the SUMMARY tab spreadsheet.

The following provides guidance on the level of detail needed for each cost category:

1. **PERSONNEL Cost Category:** Please enter the position, the name of the person filling that position (if known) the annual salary or hourly rate, and the level of effort for each person who is being paid for with grant funds.
2. **FRINGE BENEFITS Cost Category:** Please enter the position, the name of the person filling the position, the personnel cost the rate is being applied against, and the fringe benefit rate.
3. **TRAVEL Cost Category:** Please enter the travel purpose, travel item, the per unit cost, the number of days/units needed, and the number of persons who will be traveled (if needed). The number 1 has already been entered in the “# Days/Units Needed” and “# Persons” columns. If you need more than 1 unit, please enter the new number in the column. Never change the number to 0 (zero) or the cost will not calculate correctly.
5. **SUPPLIES Cost Category:** Please enter the purpose, the name of the item, the per unit cost, and the number needed. The number 1 has already been entered in the “# Units” column. If you need more than 1 unit, please enter the new number in the column. Never change the number to 0 (zero) or the cost will not calculate correctly.

6. **CONTRACTS & CONSULTANTS Cost Category:** For each contract or consultant you must enter the purpose, the actual item for which there is a cost, the per unit cost or rate, the # days or units needed, and the # of persons (if needed).

If a contract has more than one cost component, you must provide detail for each. For example, you cannot simply enter a dollar amount for project evaluation - you must identify all costs associated with project evaluation and list them in the spreadsheet.

The number 1 has already been entered in the “#Days/Units Needed” and “# Persons” columns. If you need more than 1 unit, please enter the new number in the column. Never change the number to 0 or the cost will not calculate correctly.

7. **OTHER DIRECT Cost Category:** Please enter any costs not covered in any of the previous budget categories. You must enter the purpose, the name of the item, the per unit cost, and the number of units needed.

The number 1 has already been entered into the “# Units Needed” column. If you need more than 1 unit, please enter the new number in the column. Never change the number to 0 (zero) or the cost will not calculate correctly.

8. **INDIRECT Cost Category:** Indirect costs can only be claimed if your organization has a negotiated indirect cost rate agreement. It is applied only to direct costs to the agency as allowed in the agreement. The indirect cost rate can be applied against the base costs included in your negotiated indirect cost rate agreement. For indirect costs, you must enter the cost category, the total cost for that category, and the rate.

9. **IN-KIND Cost Category:** If you included in-kind costs in your application budget, you will need to include those costs in this spreadsheet.

Narrative Budget Justification Instructions

In addition to the SS/HS State Program spreadsheet workbook, you must also submit a written narrative that fully describes and justifies all budgeted expenses. Be sure that all costs meet the allowability, allocability, and reasonableness factors detailed in the General Guidance section of these instructions.

It is recommended that you develop separate narratives for the state, project evaluation, and three LEA cost spreadsheets. The Narrative Budget Justification for each should address the following:

Personnel: The role and responsibilities for each position you are funding.

Fringe Benefits: A listing of all the components that make up the fringe benefit rate.

Travel: A detailed description of and justification for all travel costs and how each relates to the overall project.

Supplies: A detailed description of the need and an adequate justification for all supply costs and how they relate to the overall project.

Contracts/Consultants: A detailed description of and justification for the need for each contract and/or consultant and how each relates to the overall project. Also, provide a detailed justification for all costs in each cost category as it relates to each contract. For example, if costs to attend a professional conference has been included in the project evaluation contract, please explain why the evaluator would need to attend this conference as it relates to the grant.

Other: A detailed description of the need and justification for any expenses not covered in the other budget categories and how each relates to the overall project.

IN-KIND: A detailed description of any in-kind costs that will be used to support the project

Project AWARE for State Educational Agencies Budget Workbook

Applicant Name:	Montana Office of Public Instruction
City/State	Helena, Mt.
Application #:	1H79SM061869-01
Budget Year:	9/30/14-9/29/15
Fiscal Fund Year:	

Summary of Project AWARE-SEA Program Costs

SUMMARY						
Category	Component 1 - State Educational Agency Costs	Component 1 - Local Educational Agencies Cost	Component 1 - Project Evaluation Costs	Component 1 - Total Costs	Component 2 - MHFA - YMHA Total Costs	Total
Personnel	\$ 127,501	\$ 621,261	\$ -	\$ 748,762	\$ 77,945	\$ 826,707
Fringe	\$ 45,046	\$ 243,352	\$ -	\$ 288,399	\$ 23,109	\$ 311,508
Travel	\$ 12,154	\$ 116,682	\$ -	\$ 128,837	\$ 33,824	\$ 162,661
Supplies	\$ 6,610	\$ 47,832	\$ -	\$ 54,442	\$ 20,546	\$ 74,988
Consultant/Contract	\$ 29,502	\$ 190,740	\$ 169,650	\$ 389,892	\$ 35,000	\$ 424,892
Other	\$ -	\$ 34,370	\$ -	\$ 34,370	\$ 59,276	\$ 93,646
Total Direct	\$ 220,814	\$ 1,254,238	\$ 169,650	\$ 1,644,702	\$ 249,700	\$ 1,894,402
Total Indirect	\$ 33,564	\$ 18,235	\$ -	\$ 51,799	\$ 3,800	\$ 55,599
TOTAL	\$ 254,378	\$ 1,272,473	\$ 169,650	\$ 1,696,500	\$ 253,500	\$ 1,950,000
Required % of Funds	15%*	75%*	10%*	87%**	13%**	
<i>Actual % of Funds</i>	<i>0.149942509</i>	<i>0.75005754</i>	<i>10.00%</i>	<i>87.00%</i>	<i>13.00%</i>	

In-Kind Costs \$ -

* % of total Component 1 funds

** % of total Grant funds

Applicant Name:	Montana Office of Public Instruction
City/State	Helena, Mt.
Application #:	1H79SM061869-01
Budget Year:	9/30/14-9/29/15
Fiscal Fund Year:	0
Budget Title	State Educational Agency Costs (Component 1)

SUMMARY	
Category	
Personnel	\$ 127,501
Fringe	\$ 45,046
Travel	\$ 12,154
Supplies	\$ 6,610
Consultant/Contract	\$ 29,502
Construction	\$ -
Other	\$ -
Total Direct	\$ 220,814
Total Indirect	\$ 33,564
TOTAL	\$ 254,378

PERSONNEL					
Position	Name	Annual Salary/Rate	Level of Effort	# of Persons	Total
SEA Project Coordinator (1.0 FTE)	TBD	\$61,636	100.00%	1	\$ 61,636
Administrative Assistant (.1 FTE)	Leona Wetherall	\$ 28,940	10.00%	1	\$ 2,894
Administrator (.1 FTE)	Karin Billings	\$ 81,310	10.00%	1	\$ 8,131
YRBS Data Coordinator (.1 FTE)	Susan Court	\$ 50,780	10.00%	1	\$ 5,078
Supervisor (.20 FTE)	Tracy Moseman	\$ 64,760	20.00%	1	\$ 12,952
MBI Coordinator .1 FTE	Susan Bailey Anderson	-	0.00%	1	-
OPI School Mental Health Coordinator	Erin Butts	\$ 52,132	25.00%	1	\$ 13,033
Indian Education Liaison with Title I	Donnie Wetzel	\$ 71,856	25.00%	1	\$ 17,964
Title 1 Coordinator (.1 FTE)	Heather Denney	\$ 58,130	10.00%	1	\$ 5,813
TOTAL					\$ 127,501

FRINGE					
Position	Name	Fringe Rates	Salary/Benefit	% to Grant	Total
SEA Project Coordinator (1.0 FTE)	TBD	37.16%	\$ 22,906	100.00%	\$ 22,906
Administrative Assistant (.1 FTE)	Leona Wetherall	52.87%	\$ 15,301	10.00%	\$ 1,530
Administrator (.1 FTE)	Karin Billings	29.91%	\$ 24,320	10.00%	\$ 2,432
YRBS Data Coordinator (.1 FTE)	Susan Court	37.53%	\$ 19,058	10.00%	\$ 1,906
Supervisor (.20 FTE)	Tracy Moseman	32.89%	\$ 21,300	20.00%	\$ 4,260
MBI Coordinator .1 FTE	Susan Bailey Anderson		-		-
OPI School Mental Health Coordinator	Erin Butts	35.69%	\$ 18,606	25.00%	\$ 4,652
Indian Education Liaison with Title I	Donnie Wetzel	30.62%	\$ 22,002	25.00%	\$ 5,501
Title 1 Coordinator (.1 FTE)	Heather Denney	32.01%	\$ 18,607	10.00%	\$ 1,861
TOTAL					\$ 45,046

TRAVEL					
Purpose	Item	Per Unit Cost	#Days/Units	# Persons	Total
Project AWARE annual conference	airfare \$1653, motel \$180	\$2,713	1	2	\$ 5,426
Travel for SEA staff to provide Trauma Informed Care	3 sites x 4 days each motel	\$1,071.33	3	1	\$ 3,214
SEA project coordinator travel to provide trainings outline in timing including school counselors, superintendents, educators, and probation	motel: 2 nights x \$88, per	\$ 395.00	4	1	\$ 1,580
SEA Project coordinator travel to LEA's for quarterly site visits	motel: \$88, per diem @3,	\$161	12	1	\$ 1,934
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
TOTAL					\$ 12,154

SUPPLIES				
Purpose	Item	Per Unit Cost	# Units	Total
SEA General Office Supplies in		\$ 100.00	12	\$ 1,200
office set up for SEA Coordinator	computer (\$1,000), desk (\$500) , chair (\$20	\$2,540	1	\$ 2,540
postage	daily office support and YRBS shipments f	\$171	12	\$ 2,055
SEA Color Printer for MBI Initiative	HP 4005 Series	\$815	1	\$ 815
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
TOTAL				\$ 6,610

CONSULTANT/CONTRACT					
Name	Item	Per Unit Cost	#Days/Units	# Persons	Total
Coordinator to develop Montana School Resource Officer Association	contractor to organize and support the set up of a statewide SRO association including recruitment, organizational infrastrucutre design, meeting coordination and logistics, and communication with members	\$100	275	1	\$ 27,500

Equipment agreement for Scanmark Machine for YRBSsurveys	annual quote for machine to scan the YRBS scantrons	\$2,002	1	1	\$ 2,002
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
TOTAL			1	1	\$ 29,502

OTHER				
Purpose	Item	Per Unit Cost	# Units	Total
Evaluation		\$ -	1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
TOTAL				\$ -

INDIRECT COSTS			
Cost Category	Total Cost	Rate %	Total
	\$ 220,814	15.20%	\$ 33,564
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL			\$ 33,564

Applicant Name:	Montana Office of Public Instruction
City/State	Helena, Mt.
Application #:	1H79SM061869-01
Budget Year:	9/30/14-9/29/15
Fiscal Fund Year:	0
Budget Title	LEA 1 (Component 1 Costs) - Browning

SUMMARY	
Category	
Personnel	\$ 240,762
Fringe	\$ 117,232
Travel	\$ 36,745
Supplies	\$ 12,305
Consultant/Contract	\$ 21,900
Other	\$ 6,720
Total Direct	\$ 435,664
Total Indirect	\$ -
TOTAL	\$ 435,664

PERSONNEL					
Position	Name	Annual Salary/Rate	Level of Effort	# of Persons	Total
Project Coordinator	TBD	\$ 56,328	75.00%	1	\$ 42,246
Medicaid Clerk	TBD	\$ 30,252	100.00%	1	\$ 30,252
Therapists	TBD	\$ 42,066	100.00%	4	\$ 168,264
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
TOTAL					\$ 240,762

FRINGE					
Position	Name	Salary/Benefit	Fringe Rate		Total
Project Coordinator	TBD	\$ 42,246	42.97%		\$ 18,153
Medicaid Clerk	TBD	\$ 30,252	58.65%		\$ 17,743
Therapists	TBD	\$ 168,264	48.34%		\$ 81,336
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
TOTAL					\$ 117,232

TRAVEL					
Purpose	Item	Per Unit Cost	#Days/Units	# Persons	Total
travel to Helena for monthly meeting	344 miles round trip mileage	234.00	12	1	\$ 2,808
annual conference	airfare(\$857), motel (\$180)	1,917.00	1	1	\$ 1,917
Mbi Summer Institute 7 buildings with 5 people per team	registration (\$425 x 35), h	772.00	1	35	\$ 27,020
Browning transportation	transportation from rural s	0.55	9090	1	\$ 5,000
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
TOTAL					\$ 36,745

SUPPLIES				
Purpose	Item	Per Unit Cost	# Units	Total
general office supplies		\$ 80.00	12	\$ 960
office set up LEA coordinator	computer (\$800), printer (\$400), chair (\$105)	\$ 1,305.00	1	\$ 1,305
postage	postage for daily office management	\$ 100.00	12	\$ 1,200
Snacks for Crisis Center	2.00 per student x 300 days x 10 students per day	\$ 20.00	300	\$ 6,000
SSBD Behavioral Screener	quote given by product developer	\$ 355.00	8	\$ 2,840
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
TOTAL				\$ 12,305

CONSULTANT/CONTRACT					
Purpose	Item	Per Unit Cost	#Days/Units	# Persons	Total
Monthly cell and internet for crisis center		\$ 200.00	12	1	\$ 2,400
facility utilities and janitorial services for crisis center		\$ 375.00	12	1	\$ 4,500
Mental Health Stipend Allotments for gap kids	Paying for clinical services for identified students who have gaps in insurance coverage resulting in financial barrier to community treatment	\$ 1,300.00	8	1	\$ 10,400

Trauma Informed Care Training	\$1,000 per day consulting fee x 4 days plus travel for trainers including ChildWise to train staff and community in Trauma Informed Care practices	\$4,600	1	1	\$ 4,600
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
TOTAL			1	1	\$ 21,900

OTHER				
Purpose	Item	Per Unit Cost	# Units	Total
MBI substitute teacher costs	7 buildings x 4 days x 3 people	\$ 80.00	84	\$ 6,720
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
TOTAL				\$ 6,720

INDIRECT COSTS			
Cost Category	Total Cost	Rate %	Total
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL			\$ -

Applicant Name:	Montana Office of Public Instruction
City/State	Helena, Mt.
Application #:	1H79SM061869-01
Budget Year:	9/30/14-9/29/15
Fiscal Fund Year:	0
Budget Title	LEA2 (Component 1 Costs) - Butte

SUMMARY	
Category	
Personnel	\$ 174,999
Fringe	\$ 62,082
Travel	\$ 51,610
Supplies	\$ 30,502
Consultant/Contract	\$ 52,880
Other	\$ 20,930
Total Direct	\$ 393,003
Total Indirect	\$ 10,532
TOTAL	\$ 403,535

PERSONNEL					
Position	Name	Annual Salary/Rate	Level of Effort	# of Persons	Total
Project Coordinator (.75)	TBD	39,549		1	\$ 39,549
Case Manager or Social Worker	TBD	\$ 45,150		1	\$ 45,150
Case Manager or Social Worker	TBD	\$ 45,150		1	\$ 45,150
Case Manager or Social Worker	TBD	\$ 45,150		1	\$ 45,150
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
TOTAL					\$ 174,999

FRINGE					
Position	Name	Salary/Benefit	Fringe Rate		Total
Project Coordinator (.75 of 52730)	TBD	\$ 39,548	17.81%		\$ 7,043
Case Manager or Social Worker	TBD	\$ 45,150	17.81%		\$ 8,041
Case Manager or Social Worker	TBD	\$ 45,150	17.81%		\$ 8,041
Case Manager or Social Worker	TBD	\$ 45,150	17.81%		\$ 8,041
Project Coordinator Insurance (.75)	TBD	\$ 6,183			\$ 6,183
Case Manager or Social Worker Ins.	TBD	\$ 8,244			\$ 8,244
Case Manager or Social Worker Ins.	TBD	\$ 8,244			\$ 8,244
Case Manager or Social Worker Ins.	TBD	\$ 8,244			\$ 8,244
					\$ -
					\$ -
					\$ -
TOTAL					\$ 62,082

TRAVEL					
Purpose	Item	Per Unit Cost	#Days/Units	# Persons	Total
MBI Summer Institute Travel	Lodging	\$88 per night	5 Nights	30	\$ 13,200
MBI Summer Institute Travel	Registration	\$425 per person	1	30	\$ 12,750
MBI Summer Institute Travel	Mileage	.56 per mile	162 Miles	10	\$ 910
MBI Summer Institute Travel	Per Diem	\$41	5	30	\$ 6,150
					\$ -
PAX Train the Trainer	Lodging	\$125	4	5	\$2,500
PAX Train the Trainer	Airfare	\$600	1	5	\$ 3,000
PAX Train the Trainer	Per Diem	\$30	4	5	\$ 600
PAX Train the Trainer	Workshop	\$2,500	1	5	\$ 12,500
			1	1	\$ -
			1	1	\$ -
TOTAL					\$ 51,610

SUPPLIES				
Purpose	Item	Per Unit Cost	# Units	Total
Butte General Office Supplies	Monthly Office Supplies	\$100	12	\$ 1,200
FACE Center (Family & Comm Engage)	Costs for Family/Community Engagement Center			
	Computers for Center for Parent Resources	\$1,000	5	\$ 5,000
	Printers to develop brochures, etc.	\$1,800	2	\$ 3,600
	Signage for FACE Program	\$2,000	3	\$ 6,000
	Tables for FACE Center	\$500	4	\$ 2,000
	Chairs for FACE Center	\$50	24	\$ 1,200
	Other Office Supplies (paper, etc.)	\$7,500	1	\$ 8,302
	Printer Cartridges	\$200	16	\$ 3,200
TOTAL				\$ 30,502

CONSULTANT/CONTRACT					
Purpose	Item	Per Unit Cost	#Days/Units	# Persons	Total
Mental HealthTeam (Non Medicare Stdnts)	Therapist and Behavioralist	\$50,000	1	2	\$ 50,000
Monthly Cell Service	4 Cell Phones for Staff	\$ 60.00	12 months	4	\$ 2,880
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
TOTAL					\$ 52,880

OTHER				
Purpose	Item	Per Unit Cost	# Units	Total
Mental Health Promotion in Elementary Grades	PAX Good Behavior Game Teacher Kits (K-3)	\$299	70	\$ 20,930
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
				\$ -
TOTAL				\$ 20,930

INDIRECT COSTS			
Cost Category	Total of Cost	Rate %	Total
	\$ 403,535	2.61%	\$ 10,532
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL			\$ 10,532

Applicant Name:	Montana Office of Public Instruction
City/State	Helena, Mt.
Application #:	1H79SM061869-01
Budget Year:	9/30/14-9/29/15
Fiscal Fund Year:	0
Budget Title	LEA 3 (Component 1 Costs) - Kalispell

SUMMARY	
Category	
Personnel	\$ 205,500
Fringe	\$ 64,038
Travel	\$ 28,328
Supplies	\$ 5,025
Consultant/Contract	\$ 115,960
Other	\$ 6,720
Total Direct	\$ 425,571
Total Indirect	\$ 7,703
TOTAL	\$ 433,274

PERSONNEL					
Position	Name	Annual Salary/Rate	Level of Effort	# of Persons	Total
Project Coordinator		\$ 50,000	75%	1	\$ 37,500
Administrative Assistant		\$ 10,000	80%	1	\$ 8,000
Social Worker		\$ 40,000	100%	1	\$ 40,000
Social Worker		\$ 40,000	100%	1	\$ 40,000
Social Worker		\$ 40,000	100%	1	\$ 40,000
Social Worker		\$ 40,000	100%	1	\$ 40,000
				1	\$ -
				1	\$ -
TOTAL					\$ 205,500

FRINGE					
Position	Name	Salary/Benefit	Fringe Rate		Total
Project Coordinator		\$ 37,500	29.20%		\$ 10,950
Administrative Assistant		\$ 8,000	16.60%		\$ 1,328
Social Worker		\$ 40,000	32.35%		\$ 12,940
Social Worker		\$ 40,000	32.35%		\$ 12,940
Social Worker		\$ 40,000	32.35%		\$ 12,940
Social Worker		\$ 40,000	32.35%		\$ 12,940
					\$ -
					\$ -
					\$ -
					\$ -
TOTAL					\$ 64,038

TRAVEL					
Purpose	Item	Per Unit Cost	#Days/Units	# Persons	Total
monthly travel to Helena	mileage 398 miles x .55 p	219.33	12	1	\$ 2,632
monthly travel to Helena	per diem	41.00	12	3	\$ 1,476
Annual conference	airfare (\$860), hotel (\$180	1,920.00	1	1	\$ 1,920
MBI Summer Institute - 8 sites, 5/site = 40 participants	mileage 4/car . 55 per mile	326.00	10	1	\$ 3,260
MBI Summer Institute	lodging - 2/room	88.00	4	20	\$ 7,040
MBI Summer Institute	registration	300.00	1	40	\$ 12,000
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
TOTAL					\$ 28,328

SUPPLIES				
Purpose	Item	Per Unit Cost	# Units	Total
Proj Coord. Office support	Office Supplies: General office supplies	\$ 78.00	9	\$ 702
Proj Coord. Office set up	Computer	\$ 1,000.00	1	\$ 1,000
Proj Coord. Office set up	Printer	\$ 400.00	1	\$ 400
General postage	mailing	\$ 83.00	1	\$ 83
SSBD Behavior Screener	quote from developer	\$ 355.00	8	\$ 2,840
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
TOTAL				\$ 5,025

CONSULTANT/CONTRACT					
Purpose	Item	Per Unit Cost	#Days/Units	# Persons	Total
Cell phone	stipend	\$ 80.00	12	1	\$ 960
Mental health support for gap students	Paying for clinical services for identified students who have gaps in insurance coverage resulting in financial barrier to community treatment	\$ 1,300.00	1	8	\$ 10,400
Additional CSCT support	2 CSCT teams	\$ 50,000.00	2	1	\$ 100,000
Trauma Informed Care Training	consulting and travel fees for up to 4 days training by an orgnaization including Childwise who specializes in Montana ACE Training.	\$ 4,600.00	1	1	\$ 4,600
			1	1	\$ -
			1	1	\$ -

			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
TOTAL					\$ 115,960

OTHER				
Purpose	Item	Per Unit Cost	# Units	Total
MBI training	Educator subs - 4 days, 24 people	\$ 70.00	96	\$ 6,720
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
TOTAL				\$ 6,720

INDIRECT COSTS			
Cost Category	Total of Cost	Rate %	Total
	\$ 425,573	1.81%	\$ 7,703
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL			\$ 7,703

Applicant Name:	Montana Office of Public Instruction
City/State	Helena, Mt.
Application #:	1H79SM061869-01
Budget Year:	9/30/14-9/29/15
Fiscal Fund Year:	0
Budget Title	Project Evaluation Costs (Component 1)

SUMMARY	
Category	
Personnel	\$ -
Fringe	\$ -
Travel	\$ -
Supplies	\$ -
Consultant/Contract	\$ 169,650
Other	\$ -
Total Direct	\$ 169,650
Total Indirect	\$ -
TOTAL	\$ 169,650

PERSONNEL					
Position	Name	Annual Salary/Rate	Level of Effort		Total
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
TOTAL					\$ -

FRINGE					
Position	Name	Salary/Benefit	Fringe Rate		Total
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
TOTAL					\$ -

TRAVEL					
Purpose	Item	Per Unit Cost	#Days/Units	# Persons	Total
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
TOTAL					\$ -

SUPPLIES				
Purpose	Item	Per Unit Cost	# Units	Total
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
TOTAL				\$ -

CONSULTANT/CONTRACT					
Name	Service	Per Unit Cost	#Days/Units	# Persons	Total
Evaluator Planning, Meetings, and ongoing project Management	Evaluator Planning, Meetings, and Ongoing Project Management	\$ 2,658.33	12	1	\$ 31,900
Review existing data available in communities and state, data currently being collected, and develop data collection infrastructure and comprehensive evaluation plan	Review existing data available in communities and state, data currently being collected, and develop data collection infrastructure and comprehensive evaluation plan	\$ 16,000.00	1	1	\$ 16,000
Development of data collection instruments for SEA and LEA's based on evaluation plan	Development of data collection instruments for SEA and LEA's based on evaluation plan	\$ 12,500.00	1	1	\$ 12,500
Data Collection from SEA and LEA's	Data Collection from SEA and LEA's	\$ 28,500.00	1	1	\$ 28,500

Data Analysis and support to SEA/LEA with data analysis	data analysis and support to SEA/LEA with data analysis	\$ 2,875.00	12	1	\$ 34,500
Reporting: Annual Report due October 30, 2015 Quarterly GPRA, and eval briefs to LEA and SEA as requested	Reporting: annual report due October 30, 2015, Quarterly GPRA, and eval briefs to LEA and Sea as requested	\$ 36,200.00	1	1	\$ 36,200
Travel to SEA and LEA by contractor		\$8,500	1	1	\$ 8,500
Telephone, supplies for contractor		\$1,550	1	1	\$ 1,550
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
TOTAL			1	1	\$ 169,650

OTHER				
Purpose	Item	Per Unit Cost	# Units	Total
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
TOTAL				\$ -

INDIRECT COSTS			
Cost Category	Cost Total	Rate %	Total
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL			\$ -

Applicant Name:	Montana Office of Public Instruction
City/State	Helena, Mt.
Application #:	1H79SM061869-01
Budget Year:	9/30/14-9/29/15
Fiscal Fund Year:	0
Budget Title	MHFA/YMHFA Costs (Component 2)

SUMMARY	
Category	
Personnel	\$ 77,945
Fringe	\$ 23,109
Travel	\$ 33,824
Supplies	\$ 20,546
Consultant/Contract	\$ 35,000
Other	\$ 59,276
Total Direct	\$ 249,700
Total Indirect	\$ 3,800
TOTAL	\$ 253,500

PERSONNEL					
Position	Name	Annual Salary/Rate	Level of Effort	# of Persons	Total
Community Education Coordinator	Kristin Thompson	\$ 36,225	100.00%	1	\$ 36,225
Administrative support - Youth Dynamics		\$ 9,360	100.00%	1	\$ 9,360
Browning Project Coordinator		\$ 10,562	100.00%	1	\$ 10,562
Butte Project Coordinator		\$ 10,798	100.00%	1	\$ 10,798
Kalispell Project Coordinator		\$ 9,000	100.00%	1	\$ 9,000
Kalispell Administrative Support		\$ 2,000	100.00%	1	\$ 2,000
				1	\$ -
TOTAL					\$ 77,945

FRINGE					
Position	Name	Salary/Benefit	Fringe Rate		Total
Community Education Coordinator	Kristin Thompson includes FICA, SUTA, work comp, health, retirement	\$ 10,867	100.00%		\$ 10,867
Administrative support - Youth Dynamics		\$ 1,872	100.00%		\$ 1,872
Browning Project Coordinator		\$ 4,538	100.00%		\$ 4,538
Butte Project Coordinator		\$ 3,572	100.00%		\$ 3,572
Kalispell Project Coordinator		\$ 2,260	100.00%		\$ 2,260
Kalispell Administrative Support					\$ -
					\$ -
					\$ -
TOTAL					\$ 23,109

			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
			1	1	\$ -
TOTAL					\$ 35,000

OTHER				
Purpose	Item	Per Unit Cost	# Units	Total
YMHFA instructor stipends	5 area trainings x 5 areas x 2 trainers per train	\$ 19,350.00	1	\$ 19,350
Browning substitutes for YMHFA training for educators	\$80 per sub x 75 subs	\$ 6,000.00	1	\$ 6,000
Butte substitutes for YMHFA training for educators	\$75 per sub x 85 subs	\$ 6,375.00	1	\$ 6,375
Kalispell substitutes for YMHFA training for educators	\$75 per sub x 100 subs	\$ 7,500.00	1	\$ 7,500
Facilities rental & promotion	45 trainings x \$175 each for facility plus \$44	\$ 9,836.00	1	\$ 9,836
Computer - Community Education Coordinator		\$ 1,000.00	1	\$ 1,000
Laptops for YMHFA trainings	5 laptops x \$1221 each	\$ 1,221.00	5	\$ 6,105
Projectors for YMHFA trainings	5 projectors x 314 each	\$ 314.00	5	\$ 1,570
Printer - Community Education Coordinator		\$ 400.00	1	\$ 400
Desk chair - Community Education Coordinator		\$ 200.00	1	\$ 200
Desk - Community Education Coordinator		\$ 500.00	1	\$ 500
Filing Cabinet - Community Education Coordinator		\$ 440.00	1	\$ 440
TOTAL				\$ 59,276

INDIRECT COSTS			
Cost Category	Cost Total	Rate %	Total
	\$ 25,000	15.20%	\$ 3,800
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL			\$ 3,800

Applicant Name:	Montana Office of Public Instruction
City/State	Helena, Mt.
Application #:	1H79SM061869-01
Budget Year:	9/30/14-9/29/15
Fiscal Fund Year:	0
Budget Title	In-Kind Costs

SUMMARY	
Category	
Personnel	\$ -
Fringe	\$ -
Travel	\$ -
Supplies	\$ -
Consultant/Contract	\$ -
Other	\$ -
Total Direct	\$ -
Total Indirect	\$ -
TOTAL	\$ -

PERSONNEL					
Position	Name	Annual Salary/Rate	Level of Effort	# of Persons	Total
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
				1	\$ -
TOTAL					\$ -

FRINGE					
Position	Name	Salary/Benefit	Fringe Rate		Total
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
					\$ -
TOTAL					\$ -

OTHER				
Purpose	Item	Per Unit Cost	# Units	Total
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
			1	\$ -
TOTAL				\$ -

INDIRECT COSTS			
Cost Category	Cost Total	Rate %	Total
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
			\$ -
TOTAL			\$ -