# R10 logo

# TITLE III, PART A—EL STUDENTS

## Report of Project Expenditures and Request for Reimbursement

**2018-2019**

***July 1, 2018 – September 30, 2019***

**\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**

### Name of LEA CDN# Date of Request

**Please indicate the expenditure amounts by activity number under correlating fund code. Expenditures must be placed into one of these categories to be reimbursed.**

|  |  |  |
| --- | --- | --- |
| **Fund Code** | **Funds Expended This Period** | **Specify Amount for** **Activity No.** |
| **6100** | $$$ |  |
| **6200** | $$$ |  |
| **6300** | $$$ |  |
| **6400** | $$$ |  |
| TOTAL | $ |  |

|  |  |
| --- | --- |
| 1. Provide supplemental upgrades to program objectives and effective instructional strategies | 7. Professional Development--which includes the following:>Supplemental staff development through Region 10 for administrators that promote EL success>Supplemental staff development through Region 10 for BE/ESL teachers and related to EL success>Supplemental staff development offered by TEA, universities, and/or professional and non-profit organizations that assist with newcomer and educational connections related to EL>Supplemental staff development offered by state or nationally known speakers to improve overall content area instruction for EL>Book Study for current research on best practices for EL students |
| 2. Provide/upgrade supplemental curricula, instructional materials, educational software and/or assessment procedures |
| 3. Provide supplemental tutorials and academic or career and technical education and intensified instruction |
| 4. Develop/Implement supplemental effective preschool, elementary, or secondary language instruction educational programs that are coordinated with other programs and services |
| 5. Provide supplemental community participation program, family literacy services, and/or parent and family outreach and training activities |
| 6. Provide/Incorporate supplemental resources into curricula and educational programs |

**My LEA has considered the following requirements when determining the eligibility of the above expenditures:**

(check the boxes that apply)

[ ]  The expenditure is reasonable, necessary, and allocable to carry out the intent and purpose of the program.

[ ]  The expenditure addresses a need previously identified in a comprehensive needs assessment.

[ ]  The activity/resource is in the DIP/CIP, and addresses how the activity/resource will be evaluated to measure a positive impact on student achievement.

[ ]  The expenditure is **supplemental** to other federal and non-federal programs.

[ ]  The expenditure follows district purchase policies and meets all EDGAR requirements.

[ ]  Time & effort is being recorded for all payroll split funded.

[ ]  Meals are reimbursed for actual expenses and not per diem.

[ ]  Travel to conferences, in or out of state, must be part of the staff person’s long term professional development plan. According to EDGAR, LEAs must confirm that these are ‘not stand-alone, 1-day, or short term workshops’, but are ‘intensive, collaborative, job-embedded, data-driven, and classroom-focused’ trainings.

By signing this report, I hereby certify to the best of my knowledge and belief that the report is true, complete, and accurate, and the expenditures, disbursements and cash receipts are for the purposes and objectives set forth in the terms and conditions of the Federal award and **appropriate supporting documentation is enclosed**. I am aware that any false, fictitious, or fraudulent information, or the omission of any material fact, may subject me to criminal, civil or administrative penalties for fraud, false statements, false claims or otherwise.

Typed Name of Authorized Fiscal Officer Telephone Number Date

**A reimbursement request must be submitted by January 31, 2019. The final request must be submitted by October 4, 2019. Requests after October 4, 2019 will not be honored.**

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 Authorized Signature

Send one copy of the report to: Davonda Oliver, Phone: 972-348-1338

400 E. Spring Valley Road, Richardson, TX 75081-5101 E-Mail: reimbursements@region10.org