

**CARL C. PERKINS VOCATIONAL AND TECHNICAL  
EDUCATION ACT OF 1998**

**Public Law 105-332**

**LOCAL APPLICATION  
FOR  
IMPROVEMENT FUNDS**

**One Year Continuance for  
Fiscal Year 2007**

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**FY 2007 IMPROVEMENT APPLICATION COVER SHEET**

Local Education Agency Name \_\_\_\_\_

USD Number \_\_\_\_\_

Stand Alone Grant Application

Consortium Grant Application

**I understand that if funds become unavailable, this application may be terminated. If satisfactory progress and documentation are not made regarding the intended outcomes of the application, this application becomes null and void and all funds must be returned. I further understand that supplanting of funds is not allowed under the Carl D. Perkins Vocational and Technical Education Act of 1998.**

Superintendent  
(Original Signature) \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Institution Contact  
(Original Signature) \_\_\_\_\_

Title \_\_\_\_\_

Date \_\_\_\_\_

Phone Number \_\_\_\_\_

FAX Number \_\_\_\_\_

E-mail Address \_\_\_\_\_

**STATE USE ONLY  
DO NOT WRITE BELOW THIS LINE**

**FY 2007 IMPROVEMENT FUNDING CATEGORIES**

\$ \_\_\_\_\_ Administration  
\$ \_\_\_\_\_ Academic, Vocational and Technical Activities  
\$ \_\_\_\_\_ Curriculum Development Activities  
\$ \_\_\_\_\_ Technology Development Activities  
\$ \_\_\_\_\_ Professional Development Activities  
\$ \_\_\_\_\_ Business and Industry Activities  
\$ \_\_\_\_\_ Postsecondary Activities  
\$ \_\_\_\_\_ Assessment and Evaluation Activities  
  
\$ \_\_\_\_\_ Total Allocation

KSDE Authorized Administrator \_\_\_\_\_

Date \_\_\_\_\_

## LOCAL ASSURANCES

We, as an eligible recipient for funds under the Carl D. Perkins Vocational and Technical Education Act of 1998, hereby grant the following assurances:

- *To administer each program, service or activity covered in this application in accordance with all applicable statutes and regulations governing the Carl D. Perkins Vocational and Technical Education Act of 1998, and*
- *To be in compliance with Executive Order 12246; Title VI of the Civil rights Act of 1964, as amended; Title IX Regulations; Section 504 of the Rehabilitation Act of 1973, as amended; Individuals with Disabilities Education Act and any other federal or state laws, regulations and policies which apply to the operation of the programs.*

We will not discriminate on the basis of sex, race, color, national origin or handicap in the educational programs, services or activities being provided.

---

Name of Institution

assures the Kansas State Board of Education it's intent to comply with these Local Assurances as outlined in this document. Further, we are willing to explain, in writing, how we intend to comply with each of these assurances.

---

Original Signature of Superintendent

---

Date

KANSAS STATE DEPARTMENT OF EDUCATION  
Career and Technical Education

**FY 2007**  
**TRANSFER OF SECONDARY IMPROVEMENT FUNDS**

This form supports the acknowledgement of P.L. 105-392 Carl D. Perkins Secondary Improvement funds being transferred from one eligible recipient to another qualified recipient providing service on behalf of the initial recipient. An original copy for each eligible recipient transferring funds to another eligible recipient must be submitted to the Kansas State Department of Education, Career and Technical Education with submission of the grant application.

I certify that \_\_\_\_\_  
LEA Number and Name

is transferring all of the allocated secondary improvement funds made available under Carl D. Perkins Vocational and Technical Education Act of 1998 for Fiscal Year 2007 to

\_\_\_\_\_  
LEA Number and Name

To be in compliance with the Local Assurances provided by the Kansas State Board of Education, the funds will be utilized as described in the final application.

\_\_\_\_\_  
Original Signature of Superintendent  
Transferring Funds

\_\_\_\_\_  
Original Signature of Superintendent  
Receiving Funds

Date \_\_\_\_\_

Date \_\_\_\_\_

**FY 2007  
Improvement Planning Page  
Administration**

**1. Administration**

**(Not to exceed five percent of total dollars available and may be used at the discretion of the eligible recipient.)**

Total Dollars \$ \_\_\_\_\_

Up to 5% of Total Dollars \$ \_\_\_\_\_

FY 2007  
Improvement Planning Page  
Academic, Vocational and Technical Activities

<b>GOAL: To strengthen the academic, vocational and technical activities of all students.</b>
---

1. List no more than three (3) goals to support academic, vocational and technical activities.
  
2. Mark all programs that will be improved, expanded, and or enhanced through the projects, services and/or activities identified to support the academic, vocational and technical activities.

- |   |   |
|---|---|
| <input type="checkbox"/> Agricultural Education<br><input type="checkbox"/> Family and Consumer Sciences<br><input type="checkbox"/> Marketing Education<br><input type="checkbox"/> Trade and Industry | <input type="checkbox"/> Business and Computer Technology<br><input type="checkbox"/> Health Science Education<br><input type="checkbox"/> Technology Education<br><input type="checkbox"/> Occupational FACS |
|---|---|

3. Mark the strategies that will be used to accomplish the established goal(s). A complete list of equipment, materials, supplies, resources and tools must be attached. (Refer to page 12, Breakdown of Expenses.) Revisions for equipment, supplies and materials will not be accepted until September 1, 2006.

- |  |   |
|--|---|
| <input type="checkbox"/> Advisory Committees<br><input type="checkbox"/> Guidance Counseling Services<br><input type="checkbox"/> Curriculum Development<br><input type="checkbox"/> Materials and Supplies<br><input type="checkbox"/> Communication Materials<br><input type="checkbox"/> Technology (equipment)<br><input type="checkbox"/> Resources/Tools<br><input type="checkbox"/> CTE Student Organizations<br><input type="checkbox"/> Instructor Training<br><input type="checkbox"/> Other _____ | <input type="checkbox"/> Assessments<br><input type="checkbox"/> Consultant(s)<br><input type="checkbox"/> Salary<br><input type="checkbox"/> Professional Membership(s)<br><input type="checkbox"/> Professional Development<br><input type="checkbox"/> Hardware/Software<br><input type="checkbox"/> Travel Expenses<br><input type="checkbox"/> Internships<br><input type="checkbox"/> Substitutes |
|--|---|

4. Mark who will be responsible for carrying out the identified goals.

- |   |   |
|---|---|
| <input type="checkbox"/> Grant Contact Person(s)<br><input type="checkbox"/> Guidance Counselor(s)<br><input type="checkbox"/> Classroom Teacher(s) | <input type="checkbox"/> Administrator(s)<br><input type="checkbox"/> CTE Coordinator |
|---|---|

5. How will each goal be evaluated for completion/success?

6. Funding for the goal(s):
 

\$ _____	Perkins
\$ _____	Local
\$ _____	Other

FY 2007  
Improvement Planning Page  
Curriculum Development Activities

**Goal: To initiate, improve, expand and modernize quality career and technical education programs that are of sufficient size, scope, and quality to be effective.**

**Note:** Prior to improving, expanding and modernizing career and technical education programs, consider initiatives that will promote high skill, high wage career opportunities. Strategies may include but are not limited to teaching higher level math and reading skills, developing career plans of study, assessment instruments including industry assessments, and exploring and/or implementing Career Clusters and High Schools That Work practices.

1. List no more than three (3) goals to support the improvement, expansion, and modernization of quality career and technical education programs.
  
2. Mark all programs that will be directly impacted through the projects, services and/or activities identified to support the improvement, expansion, and modernization of quality career and technical education programs.

- |   |   |
|---|---|
| <input type="checkbox"/> Agricultural Education<br><input type="checkbox"/> Family and Consumer Sciences<br><input type="checkbox"/> Marketing Education<br><input type="checkbox"/> Trade and Industry | <input type="checkbox"/> Business and Computer Technology<br><input type="checkbox"/> Health Science Education<br><input type="checkbox"/> Technology Education<br><input type="checkbox"/> Occupational FACS |
|---|---|

3. Mark the strategies that will be used to accomplish the established goal(s). A complete list of equipment, materials, supplies, resources and tools must be attached. (Refer to page 12, Breakdown of Expenses.) Revisions for equipment, supplies and materials will not be accepted until September 1, 2006.

- |  |   |
|--|---|
| <input type="checkbox"/> Advisory Committees<br><input type="checkbox"/> Guidance Counseling Services<br><input type="checkbox"/> Curriculum Development<br><input type="checkbox"/> Materials and Supplies<br><input type="checkbox"/> Communication Materials<br><input type="checkbox"/> Technology (equipment)<br><input type="checkbox"/> Resources/Tools<br><input type="checkbox"/> CTE Student Organizations<br><input type="checkbox"/> Instructor Training<br><input type="checkbox"/> Other _____ | <input type="checkbox"/> Assessments<br><input type="checkbox"/> Consultant(s)<br><input type="checkbox"/> Salary<br><input type="checkbox"/> Professional Membership(s)<br><input type="checkbox"/> Professional Development<br><input type="checkbox"/> Hardware/Software<br><input type="checkbox"/> Travel Expenses<br><input type="checkbox"/> Internships<br><input type="checkbox"/> Substitutes |
|--|---|

4. Mark who will be responsible for carrying out the identified goals.

- |   |   |
|---|---|
| <input type="checkbox"/> Grant Contact Person(s)<br><input type="checkbox"/> Guidance Counselor(s)<br><input type="checkbox"/> Classroom Teacher(s) | <input type="checkbox"/> Administrator(s)<br><input type="checkbox"/> CTE Coordinator<br><input type="checkbox"/> Advisory Committees |
|---|---|

5. How will each goal be evaluated for completion/success?

6. Funding for the goal(s):
 

\$ _____	Perkins
\$ _____	Local
\$ _____	Other

FY 2007  
Improvement Planning Page  
Technology Development Activities

**Goal: To develop, improve or expand the use of technology in career and technical education programs.**

**Note:** Important to the inclusion of technology is the need to provide equipment that will provide high skill, high wage preparation/opportunities for the students. Funds may not be used to replace outdated equipment or to establish new programs. Advisory Committees should be used as a valuable resource while completing this portion of the application.

1. List no more than three (3) goals to support the development, improvement or expansion of career and technical education programs through the use of technology.

2. Mark all programs that will demonstrate the development, improvement or expansion of career and technical education through the use of technology.

- |   |   |
|---|---|
| <input type="checkbox"/> Agricultural Education       | <input type="checkbox"/> Business and Computer Technology |
| <input type="checkbox"/> Family and Consumer Sciences | <input type="checkbox"/> Health Science Education         |
| <input type="checkbox"/> Marketing Education          | <input type="checkbox"/> Technology Education             |
| <input type="checkbox"/> Trade and Industry           | <input type="checkbox"/> Occupational FACS                |

3. Mark the strategies that will be used to accomplish the established goal(s). A complete list of equipment, materials, supplies, resources and tools must be attached. (Refer to page 12, Breakdown of Expenses.) Revisions for equipment, supplies and materials will not be accepted until September 1, 2006.

- |   |   |
|---|---|
| <input type="checkbox"/> Advisory Committees          | <input type="checkbox"/> Assessments                |
| <input type="checkbox"/> Guidance Counseling Services | <input type="checkbox"/> Consultant(s)              |
| <input type="checkbox"/> Curriculum Development       | <input type="checkbox"/> Salary                     |
| <input type="checkbox"/> Materials and Supplies       | <input type="checkbox"/> Professional Membership(s) |
| <input type="checkbox"/> Communication Materials      | <input type="checkbox"/> Professional Development   |
| <input type="checkbox"/> Technology (equipment)       | <input type="checkbox"/> Hardware/Software          |
| <input type="checkbox"/> Resources/Tools              | <input type="checkbox"/> Travel Expenses            |
| <input type="checkbox"/> CTE Student Organizations    | <input type="checkbox"/> Internships                |
| <input type="checkbox"/> Instructor Training          | <input type="checkbox"/> Substitutes                |
| <input type="checkbox"/> Other _____                  |   |

4. Mark who will be responsible for carrying out the identified goals.

- |  |  |
|--|--|
| <input type="checkbox"/> Grant Contact Person(s) | <input type="checkbox"/> Administrator(s)    |
| <input type="checkbox"/> Guidance Counselor(s)   | <input type="checkbox"/> CTE Coordinator     |
| <input type="checkbox"/> Classroom Teacher(s)    | <input type="checkbox"/> Advisory Committees |

5. How will each goal be evaluated for completion/success?

6. Funding for the goal(s):

\$ _____	Perkins
\$ _____	Local
\$ _____	Other

FY 2007  
Improvement Planning Page  
Professional Development Activities

**Goal: To provide professional development opportunities for administrators, teachers, and guidance counselors in career and technical education programs.**

**Note:** Professional development activities should be relevant to current initiatives surrounding career and technical education. Examples include but are not limited to: integration of academic activities, exploring and/or implementing High Schools That Work and Career Clusters, implementing program standards, developing and implementing assessments, identifying internship opportunities, and exploring high school reform.

1. List no more than three (3) goal(s) to support professional development activities.
  
2. Mark all programs that will be improved, expanded, and enhanced through professional development opportunities.

- |   |   |
|---|---|
| <input type="checkbox"/> Agricultural Education<br><input type="checkbox"/> Family and Consumer Sciences<br><input type="checkbox"/> Marketing Education<br><input type="checkbox"/> Trade and Industry | <input type="checkbox"/> Business and Computer Technology<br><input type="checkbox"/> Health Science Education<br><input type="checkbox"/> Technology Education<br><input type="checkbox"/> Occupational FACS |
|---|---|

3. Mark the strategies that will be used to accomplish the established goal(s). A complete list of conferences, workshops, in-services and/or trainings must be attached. (Refer to page 12, Breakdown of Expenses.) Revisions for equipment, supplies and materials will not be accepted until September 1, 2006.

- |  |   |
|--|---|
| <input type="checkbox"/> Advisory Committees<br><input type="checkbox"/> Guidance Counseling Services<br><input type="checkbox"/> Curriculum Development<br><input type="checkbox"/> Materials and Supplies<br><input type="checkbox"/> Communication Materials<br><input type="checkbox"/> Technology (equipment)<br><input type="checkbox"/> Resources/Tools<br><input type="checkbox"/> CTE Student Organizations<br><input type="checkbox"/> Instructor Training<br><input type="checkbox"/> Other _____ | <input type="checkbox"/> Assessments<br><input type="checkbox"/> Consultant(s)<br><input type="checkbox"/> Salary<br><input type="checkbox"/> Professional Membership(s)<br><input type="checkbox"/> Professional Development<br><input type="checkbox"/> Hardware/Software<br><input type="checkbox"/> Travel Expenses<br><input type="checkbox"/> Internships<br><input type="checkbox"/> Substitutes |
|--|---|

4. Mark who will be responsible for carrying out the identified goals.

- |   |   |
|---|---|
| <input type="checkbox"/> Grant Contact Person(s)<br><input type="checkbox"/> Guidance Counselor(s)<br><input type="checkbox"/> Classroom Teacher(s) | <input type="checkbox"/> Administrators<br><input type="checkbox"/> CTE Coordinator<br><input type="checkbox"/> Advisory Committees |
|---|---|

5. How will each goal be evaluated for completion/success?

6. Funding for the goal(s):
 

\$ _____	Perkins
\$ _____	Local
\$ _____	Other

FY 2007  
Improvement Planning Page  
Business and Industry Activities

**Goal: To provide students with strong experience in and an understanding of all aspects of an industry in career and technical education programs.**

**Note:** Crucial to securing a sound foundation with business and industry is the development of partnerships. Initiatives to consider include but are not limited to: exploring, designing, and/or implementing integration of academics; High Schools That Work; Career Clusters; program standards; assessments; internships; and high school reform.

1. List no more than three (3) goals to support business and industry involvement.

2. Mark all programs that will be improved, expanded, and enhanced through the projects, services and/or activities identified to support the business and industry involvement.

- |   |   |
|---|---|
| <input type="checkbox"/> Agricultural Education       | <input type="checkbox"/> Business and Computer Technology |
| <input type="checkbox"/> Family and Consumer Sciences | <input type="checkbox"/> Health Science Education         |
| <input type="checkbox"/> Marketing Education          | <input type="checkbox"/> Technology Education             |
| <input type="checkbox"/> Trade and Industry           | <input type="checkbox"/> Occupational FACS                |

3. Mark the strategies that will be used to accomplish the established goal(s). A complete list of conferences, workshops, in-services and/or trainings must be attached if applicable. Revisions for equipment, supplies and materials will not be accepted until September 1, 2006.

- |   |  |
|---|--|
| <input type="checkbox"/> Advisory Committees          | <input type="checkbox"/> Assessments             |
| <input type="checkbox"/> Guidance Counseling Services | <input type="checkbox"/> Consultant(s)           |
| <input type="checkbox"/> Curriculum Development       | <input type="checkbox"/> Materials and Supplies  |
| <input type="checkbox"/> Professional Membership(s)   | <input type="checkbox"/> Communication Materials |
| <input type="checkbox"/> Professional Development     | <input type="checkbox"/> Travel Expenses         |
| <input type="checkbox"/> Hardware/Software            | <input type="checkbox"/> Internships             |
| <input type="checkbox"/> Resources/Tools              | <input type="checkbox"/> Substitutes             |
| <input type="checkbox"/> CTE Student Organizations    | <input type="checkbox"/> Instructor Training     |
| <input type="checkbox"/> Other _____                  |  |

4. Mark who will be responsible for carrying out the identified goals.

- |  |  |
|--|--|
| <input type="checkbox"/> Grant Contact Person(s) | <input type="checkbox"/> Administrators      |
| <input type="checkbox"/> Guidance Counselor(s)   | <input type="checkbox"/> CTE Coordinator     |
| <input type="checkbox"/> Classroom Teacher(s)    | <input type="checkbox"/> Advisory Committees |

5. How will each goal be evaluated for completion/success?

6. Funding for the goal(s):

\$ _____	Perkins
\$ _____	Local
\$ _____	Other



FY 2007  
Improvement Planning Page  
Assessment and Evaluation Activities

**Goal: To develop and implement assessment and evaluation activities for career and technical education programs.**

**Note:** Crucial to developing and implementing assessments/evaluations of the current career and technical education programs, is the review of your reported FY 04–05 CaTE data. The CaTE data will provide a base for identifying the strategies to improve the current career and technical education programs. Strategies that can be considered as a means for improvement include but are not limited to: exploring, developing, and/or implementing High Schools That Work; Career Clusters; development of career plans of study that support high skill; high wage career options; development of activities that support higher level reading and math skills; assessment instruments including industry assessments; and high school reform.

1. List no more than three (3) goals to support the development and implementation of assessments and evaluations of the current career and technical education programs.
  
2. Mark all programs that will be improved, expanded, and/or enhanced through projects, services and/or activities identified to support the development and implementation of assessments and evaluations of the current career and technical education programs.

- |   |   |
|---|---|
| <input type="checkbox"/> Agricultural Education<br><input type="checkbox"/> Family and Consumer Sciences<br><input type="checkbox"/> Marketing Education<br><input type="checkbox"/> Trade and Industry | <input type="checkbox"/> Business and Computer Technology<br><input type="checkbox"/> Health Science Education<br><input type="checkbox"/> Technology Education<br><input type="checkbox"/> Occupational FACS |
|---|---|

3. Mark the strategies that will be used to accomplish the established goal(s). A complete list of conferences, workshops, in-services and/or trainings must be attached if applicable. Revisions for equipment, supplies and materials will not be accepted until September 1, 2006.

- |  |  |
|--|--|
| <input type="checkbox"/> Advisory Committees<br><input type="checkbox"/> Guidance Counseling Services<br><input type="checkbox"/> Materials and Supplies<br><input type="checkbox"/> Communication Materials<br><input type="checkbox"/> Hardware/Software<br><input type="checkbox"/> Travel Expenses<br><input type="checkbox"/> Instructor Training<br><input type="checkbox"/> Other _____ | <input type="checkbox"/> Assessments<br><input type="checkbox"/> Consultant(s)<br><input type="checkbox"/> Professional Membership(s)<br><input type="checkbox"/> Professional Development<br><input type="checkbox"/> Resources/Tools<br><input type="checkbox"/> CTE Student Organizations<br><input type="checkbox"/> Substitutes |
|--|--|

4. Mark who will be responsible for carrying out the identified goals.

- |   |   |
|---|---|
| <input type="checkbox"/> Grant Contact Person(s)<br><input type="checkbox"/> Guidance Counselor(s)<br><input type="checkbox"/> Classroom Teacher(s) | <input type="checkbox"/> Administrator(s)<br><input type="checkbox"/> CTE Coordinator |
|---|---|

5. How will each goal be evaluated for completion/success?

6. Funding for the goal(s):
 

\$ _____	Perkins
\$ _____	Local
\$ _____	Other

**FY 2007  
BREAKDOWN OF EXPENSES**

(Note: Round figures to the nearest dollar.)

- 1. **Administration (No more than 5% of total dollars)** \$ \_\_\_\_\_
- 2. **Salaries**
  - a. Positions
    - 1. Professional
      - Wages \$ \_\_\_\_\_
      - Fixed Charges \$ \_\_\_\_\_
    - 2. Support (i.e. Clerical, Paras)
      - Wages \$ \_\_\_\_\_
      - Fixed Charges \$ \_\_\_\_\_
  - b. Substitutes
    - Wages \$ \_\_\_\_\_
    - Fixed Charges \$ \_\_\_\_\_
    - Subtotal \$ \_\_\_\_\_ 0
  - c. Percentage of Total Dollars Used \_\_\_\_\_%
- 3. **Equipment (Complete list must be attached. See format below.)**
  - Subtotal \$ \_\_\_\_\_
  - a. Percentage of dollars used \_\_\_\_\_%
- 4. **Supplies/Materials/Resources/Tools (Complete list must be attached. See format below.)** \$ \_\_\_\_\_
- 5. **Projects/Services/Activities** \$ \_\_\_\_\_
- 6. **Total (Must balance with the Planning Pages)** \$ \_\_\_\_\_ **0**

**List Example:** A landscape format is suggested to provide a listing of all equipment, supplies, materials, resources and tools.

PROGRAM	ITEM	REQUIRED/ RECOMMENDED BY STANDARDS	REQUESTED BY ADVISORY COMMITTEE	NEEDED TO IMPROVE INSTRUCTION	QUANTITY NEEDED	COST PER ITEM	TOTAL COST
Health	Mannequin		X	X	1	\$1800.00	\$1800.00

**FY 2007  
Budget Sheet**

**Institution Name:** \_\_\_\_\_

**Institution Number:** \_\_\_\_\_

<b>Mandated Uses</b>	<b>Administration</b>	<b>Academic, Vocational, &amp; Technical Activities</b>	<b>Curriculum Development Activities</b>	<b>Technology Development Activities</b>	<b>Professional Development Activities</b>	<b>Business &amp; Industry Activities</b>	<b>Post-Secondary Activities</b>	<b>Assessment &amp; Evaluation Activities</b>	<b>Subtotal</b>
Administration	\$								\$ 0
Salaries		\$	\$	\$	\$	\$	\$	\$	\$ 0
Guidance/ Counseling		\$	\$	\$	\$	\$	\$	\$	\$ 0
Curriculum Development		\$	\$	\$	\$	\$	\$	\$	\$ 0
High School Reform		\$	\$	\$	\$	\$	\$	\$	\$ 0
Equipment		\$	\$	\$	\$	\$	\$	\$	\$ 0
Resources		\$	\$	\$	\$	\$	\$	\$	\$ 0
CTSOs		\$	\$	\$	\$	\$	\$	\$	\$ 0
Assessments		\$	\$	\$	\$	\$	\$	\$	\$ 0
Consultants		\$	\$	\$	\$	\$	\$	\$	\$ 0
Memberships		\$	\$	\$	\$	\$	\$	\$	\$ 0
Professional Development		\$	\$	\$	\$	\$	\$	\$	\$ 0
Hardware/ Software		\$	\$	\$	\$	\$	\$	\$	\$ 0
Travel		\$	\$	\$	\$	\$	\$	\$	\$ 0
Substitutes		\$	\$	\$	\$	\$	\$	\$	\$ 0
Advisory Committee		\$	\$	\$	\$	\$	\$	\$	\$ 0
Internships		\$	\$	\$	\$	\$	\$	\$	\$ 0
Other		\$	\$	\$	\$	\$	\$	\$	\$ 0
<b>Subtotal</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>	<b>\$ 0</b>