

SACRAMENTO CITY UNIFIED SCHOOL DISTRICT
BOARD OF EDUCATION

Agenda Item# 13.1p

Meeting Date : August 8, 2024

Subject : Approve SETA Early Head Start for Start No-Cost Extension Basic/COLA/QI
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Conference/First Reading (Action Anticipated: _____)
Conference/Action
Action
Public Hearing

Division : Early Learning and Care

Recommendation : Approve the remaining FY23-24 SETA Early Head Start No-Cost Extension Basic/COLA/QI in the amount of \$114,000 and the T&TA budget of \$7,500 into the 2024-25 budget.

Background/Rationale : SETA Head Start has provide a No-Cost Extension for the 2024-2025 school year.

Financial Considerations : Request to submit the No-Cost Extension for the 2024-2025 school year.

LCAP Goal(s) :
SETA Early Head Start funds will support the implementation of high-quality services to families and their infant and toddler.

Documents Attached:
1. Request to accept the SETA EHS No-Cost Extension Basic/COLA/QI Program Budget Modification.

Estimated Time of Presentation : N/A



REQUEST FOR PROGRAM APPROACH CHANGE AND/OR BUDGET MODIFICATION

Delegate/Partner: Sacramento City Unified School District

Funding Source Head Start Early Head Start Both

Agreement Nu 23C5551S0

Date: 06/06/2024

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:

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

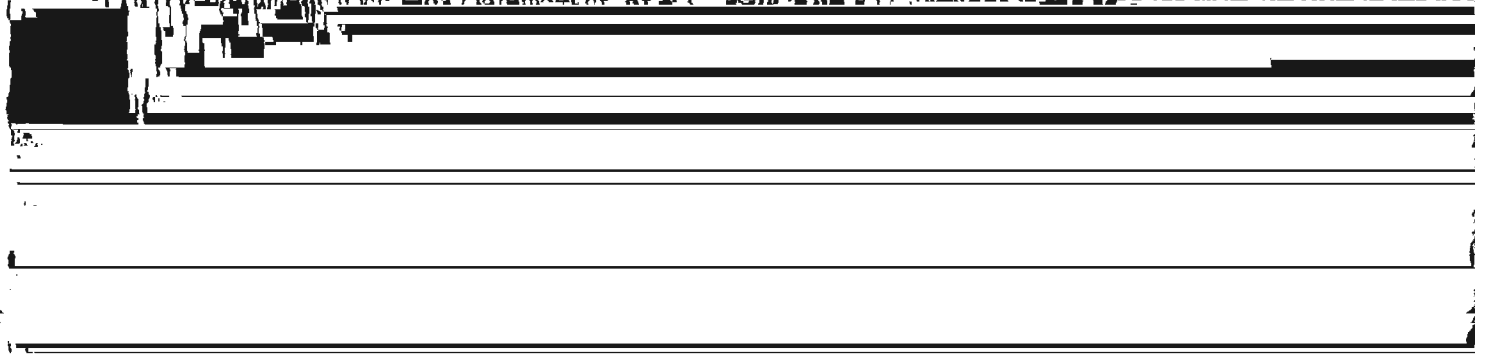
From Program Year: _____ to Program Year _____

(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:** No-Cost Extension

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

SCUSD is requesting a No-Cost Extension of the remaining EHS-FY23-24 funds in the amount of \$136,000. SCUSD has



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

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

The program will support the following program objectives: [REDACTED]

Cost Category/Item Description	Current Budget	Budget Modification	Updated Budget
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]
[REDACTED]	[REDACTED]	[REDACTED]	[REDACTED]

infant/toddler that are enrolled in the program.

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

	Current Budget	Budget Modification	Updated Budget
Personnel			
Fringe Benefits			
Travel			
Equipment			
Supplies			
Contractual			
Construction			
Other			

IV. I am authorizing that this request be submitted to SETA on behalf of the program referenced above and

development to the Resolution Authorizing Execution of Service Provider Contract / Selection Agreement

[Redacted signature area with handwritten text: 10/1/2021, Mary Hardin Young, 4/17]

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[Redacted signature area]

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Agreement/Service Contract from the Sacramento Employment and Training Agency included in this agreement contract.

DATE: 06

(Authorized Signature
Mary Hardin Young
(Typed Name) (Title)
Deputy Superintendent

APPROVED BY POLICY COMMITTEE (See instruction if required):

DATE OF MEETING:

DATE

(Signature of Chairperson, Policy Committee)

APPROVED BY GRANTEE:

DATE:

(Karen Griffith, Head Start Deputy Director)

For Internal Use Only

Date Received:

(Melanie Nicolas,

Date Approved:

CFS Program Officer/Administration)

Date Approved:

(Victor Han, Fiscal Manager)

Comments