

APPENDIX E

THIS FORM MAY NOT BE REPLICATED

PROJECT: CCC Teacher Credentialing Partnership Pilot Program

DISTRICT:

COLLEGE:

RFP #

APPLICATION BUDGET DETAIL SHEET

Object of Expenditure	Classification	FUNDS REQUESTED	
		\$	500,000
1000	1100 Academic Salaries, Instructional, Contract or Regular Status Name/Classification (Days/hours) x (Daily/hourly rate) = \$	\$	-
	1200 Academic Salaries, Noninstructional, Contract or Regular Status Name/Classification (Days/hours) x (Daily/hourly rate) = \$	\$	-
	1300 Instructional Salaries Other, Adjunct or Part-time Name/Classification (Days/hours) x (Daily/hourly rate) = \$	\$	-
	1400 Non-Instructional Salaries, Other Name/Classification (Days/hours) x (Daily/hourly rate) = \$	\$	-
2000	2100 Classified Salaries, Noninstructional (Regular, Full-time) Name/Classification (Days/hours) x (Daily/hourly rate) = \$	\$	-
	2200 Instructional Aides, Regular Status (Regular, Full-time) Name/Classification (Days/hours) x (Daily/hourly rate) = \$	\$	-
	2300 Classified Salaries, Noninstructional (Non-Regular) Name/Classification (Days/hours) x (Daily/hourly rate) = \$	\$	-
	2400 Instructional Aides Salaries (Non-Regular) Name/Classification (Days/hours) x (Daily/hourly rate) = \$	\$	-
3000	Employee Benefits Name / Position Title / Percentage Rate for Benefits Name / Position Title / Percentage Rate for Benefits	\$	-
4000	Supplies and Materials List type and costs: Software; Books, Magazines and Periodicals; Instructional Supplies and Materials; Noninstructional Supplies and Materials	\$	-
5000	Other Operating Expenses and Services		
	Travel Travel and Mileage = \$ Conference Expenses = \$		
	College Dues and Membership		
	Meetings		
	Workshops		
	Training		
	Rents and Leases		
	Postage		
	Equipment repairs and Maintenance		
	Consultant Services		
	Subcontractors Contract Services: Name (daily/hourly rate); Identify specific service to be rendered	\$	-
6000	Capital Outlay List type and costs: 6400 Equipment with a purchase price of at least \$200 and a useful life of more than one year.	\$	-
7000	Other Outgo	\$	-
TOTAL DIRECT COSTS:		\$	
TOTAL INDIRECT COSTS (Not to exceed 4% of Direct Costs):		\$	
TOTAL COSTS:		\$	