|  |  |  |
| --- | --- | --- |
| **INDIANA DEPARTMENT OF EDUCATION** |  | **Fund 6840 series** |
| **Office of Federal Grants and Support** |  |  |  | **Receipt 4990** |
| **Title II-A - Supporting Effective Instruction** |  | **CFDA# 84.367** |
| **115 West Washington Street** |  |   |
| **Indianapolis, IN 46204** |  |   |
|  |  |   |
| **Please submit this request digitally to** **t2a@doe.in.gov****.** |
|  **Title II-A - Supporting Effective Instruction** |
| Project Period: July 1, 2020 - September 30, 2022 |
|  **School Corporation:** |       |
|  **LEA Corp No.:** \_\_\_\_\_\_\_ | **Monetary change:**Choose an item. | **Programmatic change:**Choose an item. |   |  |
| **Person Requesting Amendment:**  |        | **Project No.:** | 20-22 |
| **Transferability Section** |
| Original Title II-A Allocation: | $ |       |
| Final Title II-A Allocation: | $ |       *(applies to Significantly Expanded Charter LEAs only)* |
| Transfer into Title II-A from: N/A  | $ |       |
| Total Title II-A Available to Budget: | $ |       |
|  |  |

|  |
| --- |
|  |

 |   |
| **Title II, Part A Categories** |  | **Original Budget** | **Increase (+) or** **Decrease (-)** | **New Budget** |
| **Category One:**Recruitment, Retention, Incentives,Differentiated Pay |        |        |       |
| **Category Two:** Professional Development |        |        |       |
| **Nonpublic Equitable Share**  |        |        |       |
| **Category Three:**Class Size Reduction |        |        |       |
| **TIIA Funds Transferred to**: Choose an item. |        |        |       |
| Administration (maximum 3%) |       |
| Restricted Indirect  |       |
| **GRAND TOTAL** |       |
| **PLEASE DESCRIBE PROGRAMATIC ACTIVITY CHANGES (USE ADDITIONAL PAGES IF NECESSARY)** |
|       |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**LEA Superintendent Signature** | **Date:** |  Click or tap to enter a date. |
| \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_**LEA Treasurer Signature** | **Date:** |  Click or tap to enter a date. |
|  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ **IDOE Approval** | **Date:** |  |