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# REQUEST FOR PROGRAM APPROACH CHANGE AND/OR BUDGET MODIFICATION

**Delegate/Partner:** Sacramento Citv Unified School Di

**Funding Source:** Head Start Early Head Start Both

**Agreement Nu** 23C5551S0

**Date:** 05/07/2024

**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 2023-2024*

*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

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*(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:**

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

[Redacted content]

REQUEST FOR PROGRAM APPROACH CHANGE AND/OR BUDGET MODIFICATION

.(Continued)

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

SCUSD has reviewed the current cost allocation and requesting a 50%-50% due to the amount of requirements for each funding. In addition, all employees received a salary increase that was determined by the District and Labor Partners.

**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*

Program Year 2023-2024

Grant #: 09CH011763

Cost Category/Item Description	Current Budget	Budget Modification	Updated Budget
Personnel	\$2,913,474.00	\$690,000.00	\$3,603,474.00
Fringe Benefits	\$2,490,368.00	\$(690,000.00)	\$2,490,368.00
Travel	\$21,026.00		\$21,026.00
Equipment	\$189,396.00		\$189,396.00
Supplies	\$978,542.06		\$288,542.06
Contractual	\$227,650.94		\$0.00
Construction	\$0.00		\$0.00
Other	\$390,376.00		\$390,376.00
Indirect			\$227,650.94
<b>TOTAL</b>	<b>\$7,210,833.00</b>	<b>\$0.00</b>	<b>\$7,210,833.00</b>

**IV. I am authorizing that this request be submitted to SETA on behalf of the program referenced above and do so pursuant to the Resolution Authority of the Department of Education in agreement contract.**

DATE: 05/07/2024

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Aida Buelna Valenzuela

(Typed Name)

ELC Consultant Assistant Superintendent

(Title)

**APPROVED BY POLICY COMMITTEE** (See instruction if required):

DATE OF MEETING

DATE

(Signature of Chairperson, Policy Committee)

(Typed Name)

**APPROVED BY GOVERNING BODY** (See instructions if required):

DATE OF MEETING:

DATE

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**APPROVED BY GRANTEE:**

DATE: \_\_\_\_\_

\_\_\_\_\_  
(Karen Griffith, Head Start Deputy Director)

*For Internal Use Only*

Date Received:

(~~Melanie Mirelar~~)

Date Approved:

CFS Program Officer/Administration)

Date Approved:

(Victor Han, Fiscal Manager)