



To: Dr. Loden, Superintendent
Tupelo Public School District

From: Evet Topp, Vocational Director

Date: March 27, 2014

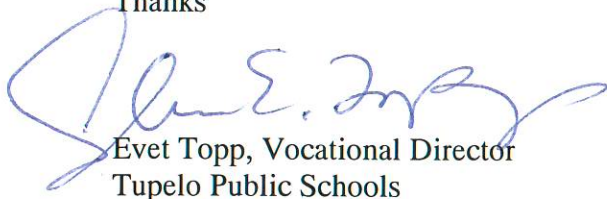
Re: Signature Page for Local Plan Update for Fiscal Year 2015 for
Career-Technical Center

Dr. Loden, attached, you will find the Local Plan Update for Fiscal Year 2015 for the Career-Technical Center. The signature page is in need of signatures from the Superintendent, Board President, Chief Financial Officer and the Vocational Director. In order for us to receive Federal Carl Perkins funds for the FY2015, the signature page must be returned to MDE by April 25, 2014.

I am also attaching documentation of the funds that have been allocated for the FY2015. Once the document is signed, I am requesting it be sent back to me, so I may mail it to MDE in order to meet the April 25, 2014 deadline.

If you have questions, please do not hesitate to call. Thanks for your time.

Thanks



Evet Topp, Vocational Director
Tupelo Public Schools

LOCAL PLAN UPDATES FOR FISCAL YEAR (FY) 2015
AND PROGRAM CHANGE FORM
REQUIRED SIGNATURES

Directions: All applicable signatures are REQUIRED. This form with ORIGINAL signatures (signed in BLUE ink) must be submitted within five (5) working days of submitting the Local Plan Update, Program Change Application, and 40 Day Extended Contract Request in Lotus Notes. If a section does not apply to the Local Educational Agency (LEA) or the junior/community College, please indicate with "NOT APPLICABLE" in the signature line. Signatures on this form provide for certification requirements on the actual application which is submitted through Lotus Notes. The certifications shall be evidence of material representation of fact upon which reliance will be placed when the Mississippi Department of Education (MDE), Office of Vocational Education and Workforce Development (OVE&WD) determines to award the Local Plan Budget, Vocational Teacher Budget, Short Term Adult Program, Financial Responsibility, Program Change application, Forty (40) Day Extended contract, or grant.

District #: 4120 District Name: Tupelo Public Schools
 Contact Person: Evet Topp Telephone Number: 662-841-8990

I. Local Plan Update Witness:

I certify that the purpose, objectives, activities, and budget represented in the Local Plan Updates (LPU) submitted through Lotus Notes are true and correct to the best of my knowledge and belief, and that funds have been budgeted and will be utilized for the successful operation of Career Technical Education (CTE) programs.

LEA SUPERINTENDENT (Secondary) or PRESIDENT (Post Secondary):

1. Dr. Gearl Loden, Superintendent
 Printed Name & Title Signature Date

LOCAL SCHOOL BOARD CHAIRPERSON:

2. Rob Hudson, Board President
 Printed Name & Title Signature Date

VOCATIONAL DIRECTOR or CONTACT PERSON:

3. Evet Topp, Vocational Director  3/27/2014
 Printed Name & Title Signature Date

II. Teacher Budget:

I certify that the statements and budget data for the ongoing vocational programs represented on the Teacher Budget submitted through MSIS for the Local Plan Update, are true and correct to the best of my knowledge and belief, and that adequate funds have been budgeted and will be utilized to maintain instructional equipment and to provide instructional supplies and other support essential to the successful operation of these programs. I hereby pledge full cooperation with the State Board of Education (SBE) in maintaining these vocational classes so as to comply with policies and other requirements for state and federal aid as provided by law. I therefore request the maximum reimbursement for which the district qualifies.


Check One:

This FY Vocational Teacher Budget has Local Board Approval. Board Approval date: 4/15/2014
 This FY Vocational Teacher Budget is tentative, pending Local Board Approval. Board Meeting date: _____

LEA SUPERINTENDENT (Secondary): or PRESIDENT (Post Secondary):

1. Dr. Gearl Loden, Superintendent
 Printed Name & Title Signature Date

Vocational Director or Contact Person:

2. Evet Topp, Vocational Director  3/27/2014
 Printed Name & Title Signature Date

III. Short Term Adult Program Application: If applicable

I certify that the information submitted through Lotus Notes are true and correct to the best of my knowledge and belief for Short Term Adult Programs, funded by State or Perkins IV Federal funds, and to assure accurate electronic reporting of instructional, enrollment, and demographic data that will be submitted when requesting payments to the district for completion of approved Short Term Adult Programs. A signature is required if funds requests are to be made.

LEA Superintendent or Vocational Director or President or Vocational Director (Post Secondary):

Evet Topp, Vocational Director

[Handwritten Signature]

3/27/2014

Printed Name & Title

Signature

Date

IV. Acceptance of Administrative and Financial Responsibility for Electronic and Reimbursement Requests submitted by the District to the MDE/OVTE:

I hereby accept full administrative and financial responsibility for this Fiscal Year electronic data submitted by the district for reimbursement requests for allowable expenditures of state funds allocated to Short Term Adult Programs, and/or Federal Perkins funds budget to "Adult" or "Other Cost", Federal funds budgeted to Tech Prep "Other Cost" line items, or Perkins 85% funds.

I hereby certify that the reimbursement request(s), as submitted, is/are correct and that funds are/have been expended in accordance with state and federal regulations and documentation is on file in the local school district.

BUSINESS MANAGER or SUPERINTENDENT (Secondary) or PRESIDENT (Post Secondary):

Linda Pannell, CFO

Printed Name & Title

Signature

Date

V. New/Conversion Program Request:

This section acknowledges and attests to the submission of a request for a new/conversion program and certifies that the information submitted through Lotus Notes is true and correct to the best of my knowledge and belief.

1. Program Name	CIP Code (Refer to the code on the program request application)	Implementation Date
a. N/A		
b.		
c.		
d.		
e.		

2. Vocational Center Director Printed Name

Signature

Date

The local board of trustees of the district recommended the approval of the proposed program application(s) and agreed to provide adequate supply funds for operation.

3. Chairperson of Local Advisory Committee Printed Name

Signature

Date

4. Local Superintendent of Education Printed Name

Signature

Date

VI. Extended 40 Day Contract Application for Secondary Skills Programs/Teachers:

This section acknowledges and attests to the submission of a request for a 40 Day Extended Contract submitted for approval in Lotus Notes and certifies that the information is true and correct to the best of my knowledge and belief. Eligibility is limited to skill instructors who are already on a 200-day contract and reimbursed at 49%. **No Mississippi Adequate Education Program (MAEP) support is available.**

1. Applicant's Printed Name (Name as listed on the 40-Day Extended Contract request submitted in Lotus Notes)	Signature	Date
a. <u>N/A</u>	_____	_____
b. _____	_____	_____
c. _____	_____	_____
d. _____	_____	_____
e. _____	_____	_____

2. Vocational Director or Immediate Supervisor Printed Name	Signature	Date
_____	_____	_____

The local board of trustees of the district recommended the approval of the proposed 40-Days application(s) and agreed to provide adequate supply funds for operation.

3. Local Superintendent of Education Printed Name	Signature	Date
_____	_____	_____

4. President, Local School Board Printed Name	Signature	Date
_____	_____	_____

VII. Program Termination:

The district wishes to terminate the program name(s) listed below and certifies that the information submitted through Lotus Notes is true and correct to the best of our knowledge and belief.

1. Program name	CIP Code (Refer to the code on the termination request application)	Termination Date
a. <u>N/A</u>	_____	_____
b. _____	_____	_____
c. _____	_____	_____
d. _____	_____	_____
e. _____	_____	_____

2. Vocational Center Director Printed Name	Signature	Date
_____	_____	_____

3. Local Superintendent of Education Printed Name	Signature	Date
_____	_____	_____

**Mail the original form
 Within five (5) working days of submitting documentation in Lotus Notes
 Mail to:
 Sandra Crowley
 Office of Vocational Education and Workforce Development
 Bureau of Compliance and Reporting
 P. O. Box 771
 Jackson, MS 39205-0771
 NO FAXES PLEASE**



FY2015 Funding Notification for Estimated LPU
Mike Mulvihill to: District 4120

03/26/2014 11:23 PM

Office of Career and Technical Education and Workforce Development
District 4120 TUPELO PUBLIC SCHOOL DIST

The estimated funds listed below have been reserved for your district and the Local Plan Updates (LPUs) are now available in Lotus Notes. To receive approval to expend these funds you must follow through with the LPU process. Click on the link at the bottom of this email to begin this process.

TOTAL FUNDS ESTIMATED FOR DISTRICT FOR FY2015

Federal Funds: \$89,035.59

State Equipment Funds: \$0.00

** Remember, the LPU cannot be approved until the district's signature forms have been received by OVTE.

DEADLINES:

- 1) Funds released to the districts must have a Local Plan Update for 'Estimated Funds' submitted to the Office of Career and Technical Education and Workforce Development no later than 04/25/2014.
- 2) All Equipment reimbursement requests must be submitted no later than 03/02/2015.
- 3) Short Term Adult Application requests must be submitted no later than 05/29/2015.
- 4) Final Year End Payment requests must be submitted no later than 07/15/2015.

CONTACT INFORMATION:

Local Plan Update Questions: Sandra Crowley at 601-359-3974

Adult Program Coordinator: Tonya Gipson or Bill McGrew at 601-359-3479

Payment Coordinator: Melissa May at 601-359-3081

A copy of this email message should be printed and given to your Business Management Office.

ALL ALLOCATIONS SUBJECT TO THE AVAILABILITY OF FUNDS.

Click here to view the Local Plan Update documents > >

NOTE: 40-Day Extended Contract Requests and Program Change Requests (New Program, Conversion Program, and Program Termination) are due with the Estimated Local Plan Update. For questions regarding 40-Day Extended Contract Requests or Program Change Requests, contact Bill McGrew at 601-359-3986.

Click here to create an Extended Contract Request > >

Click here to create a New/Conversion Program Request > >

Click here to create a Program Termination Request > >

Click here to access Instructions, Lotus Notes Documentation, and Forms needed for completing your Local Plan Update. >>

LOCAL PLAN UPDATE FOR FY 2015 (Estimated Funds)

LPU Status: In Process

Signature Pages Received? Yes No

District Number:	4120	District Name:	TUPELO PUBLIC SCHOOL DIST
District Type:	Secondary	Notes Contact:	Shandra Topp, Director (Evet) Linda Panell 662 841-8990 662-841-8896

In a Consortium? Yes No

	ESTIMATED
New Federal Funds:	\$89,035.59
State Equipment Funds:	\$0.00
Approved State Salary & Adult Funds:	\$0.00
State Program Adult Funds:	\$0.00

History Information

Action Taken	Performed By	On (Date/Time)
Estimated Funds Distributed	Mike Mulvihill	03/26/2014 11:23:00 PM

Special Comments:

FEDERAL BUDGET SUMMARY FOR FY 2015 (Estimated Funds)

Check When This Section Is Complete

LPU Status: In Process

District Number: 4120	District Name: TUPELO PUBLIC SCHOOL DIST
District Type: Secondary	Contact Person: Shandra Topp, Director (Evet) Linda Panell 662 841-8990 662-841-8896

In Consortium? Yes No

	ESTIMATED TOTAL	BUDGETED	REMAINING BALANCE
New Federal Funds Total (Allocated):	\$89,035.59		
Amount Requested:		\$89,035.59	\$0.00

Funding Need - Federal Salaries (Special Populations/Student Services Coordinators)

Funding Need - Federal Salaries (Special Populations/Student Services Coordinators)

** Note: This amount is automatically updated from the Vocational Teacher Budget reimbursement amount in MSIS.*

Amount Requested: \$45,159.04

Purpose: The salary amount listed above is for the reimbursement to the district for 2 Special Populations personnel. The Special Populations personnel will provide instruction, career guidance, placement services, and any other responsibilities as listed under the job description for special populations personnel.

Federal Capitalized Equipment

Funding Need - Federal Capitalized Equipment

Amount Requested: \$37,876.55

Purpose:

To provide students with state of the art equipment in order to enhance the learning environment and provide students with the best opportunity for success.

Activities & Location:

Tupelo Career-Technical Center

Federal Adult Vocational

Funding Need - Federal Adult Vocational

Amount Requested: \$0.00

Purpose:

Activities & Location:

Other Cost

Total Other Cost
Amount Requested: \$6,000.00

Funding Need - Testing Material
Amount Requested: \$0.00

Purpose:

Activities & Location:

Funding Need - Instructional Aids
Amount Requested: \$0.00

Purpose:

Activities & Location:

Funding Need - In-Service Training
Amount Requested: \$0.00

Purpose:

Activities & Location:

Funding Need - Student Organization Travel
Amount Requested: \$6,000.00

Purpose:

To provide funding for 1st place Career-Technical Center students that advance to the national level in vocational competition(s).

Activities & Location:

Tupelo Career-Technical Center

History Information

Action Taken	Performed By	On (Date/Time)

Special Comments:

STATE BUDGET SUMMARY FOR FY 2015 (Estimated Funds)

Check When This Section Is Complete

LPU Status: In Process

District Number: 4120
District Type: Secondary

District Name: TUPELO PUBLIC SCHOOL DIST
Contact Person: Shandra Topp, Director
 (Evet)
 Linda Panell
 662 841-8990
 662-841-8896

In Consortium? Yes No

	ESTIMATED TOTAL	BUDGETED	REMAINING BALANCE
New State Funds Total (Allocated):	\$0.00		
Amount Requested:		\$0.00	\$0.00

Funding Need - State Salaries (Vocational Administration, Guidance Counselors, and Inst...

**Funding Need - State Salaries (Vocational Administration, Guidance Counselors, and Instructors)
 Total State Salaries**

NOTE: This amount is automatically determined from what is listed in MSIS for Vocational Salaries for the current year and is not deducted from the State Allocation listed above. It is listed here for informational purposes only.

Amount Requested: \$439,061.30

History Information

Action Taken	Performed By	On (Date/Time)

Special Comments:

STATE BUDGET SUMMARY FOR FY 2015 (Estimated Funds)

Check When This Section Is Complete

LPU Status: In Process

District Number: 4120

District Type: Secondary

District Name: TUPELO PUBLIC SCHOOL DIST

Contact Person: Shandra Topp, Director
(Evet)

Linda Panell

662 841-8990

662-841-8896

In Consortium? Yes No

	ESTIMATED TOTAL	BUDGETED	REMAINING BALANCE
New State Funds Total (Allocated):	\$0.00		
Amount Requested:		\$0.00	\$0.00

Funding Need - State Salaries (Vocational Administration, Guidance Counselors, and Inst...

Funding Need - State Salaries (Vocational Administration, Guidance Counselors, and Instructors)

Total State Salaries

NOTE: This amount is automatically determined from what is listed in MSIS for Vocational Salaries for the current year and is not deducted from the State Allocation listed above. *It is listed here for informational purposes only.*

Amount Requested: \$439,061.30

History Information

Action Taken	Performed By	On (Date/Time)

Special Comments:

STATE ADULT VOCATIONAL FOR FY 2015 (Estimated Funds)

Check When This Section Is Complete

LPU Status: In Process

District Number: 4120
 District Type: Secondary

District Name: TUPELO PUBLIC SCHOOL DIST
 Contact Person: Shandra Topp, Director
 (Evet)
 Linda Panell
 662 841-8990
 662-841-8896

In Consortium? Yes No

State Adult Vocational

Funding Need - State Adult Vocational

NOTE: The amount entered here will be considered when distributing State Adult Vocational Funds and is not included in the State Allocation listed on the State Budget Summary. If approved, this amount will be included with the Allocation of "Actual" Funds.

Amount Requested: **\$34,596.00**
Applications Budgeted: \$0.00
Amount Remaining: \$0.00

Purpose:

To employ an adult education instructor for the Regional Rehabilitation Center (Ability Works) in order to provide services for adults with disabilities.

Activities & Location:

Mississippi Department of Rehabilitation Services/Adults (Ability Works) re-entering the job market after being rehabilitated.

History Information

Action Taken	Performed By	On (Date/Time)

Special Comments: