Alabama State Dept. of Education
Office of Financial Management
LEA Accounting
IDEA Form 16-2  10/13/2015

BUDGET APPLICATION
IDEA DISCRETIONARY GRANT
INDIVIDUALS WITH DISABILITIES EDUCATION ACT, PART B
AS AMENDED BY P.L. 108-446, CFDA 84.027A

Applicant Agency: ALABAMA STATE DEPT. OF EDUCATION
Contact Person: CLYDE C. McGUIRE
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Fax Number: (334) 242-7781

BUDGETED SUMMARY FOR FISCAL YEAR 10/01/15 - 09/30/2016

<table>
<thead>
<tr>
<th>Itemize in Detail Items of Expense Being Budgeted</th>
<th>Account Codes (ALL 27 DIGITS)</th>
<th>Budget</th>
<th>Changes (+ or -)</th>
<th>Amended Budget</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total</td>
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CERTIFICATION: I have reviewed the attached application/budget. The proposed expenditures appear to be coded properly and will be incorporated into the LEA’s systemwide budget.

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SIGNATURE OF SPECIAL EDUCATION COORDINATOR / DATE

SIGNATURE OF CHIEF SCHOOL FINANCIAL OFFICER / DATE

I am authorized in the minutes of the governing board of this agency to submit this Application/Budget, or Budget Amendment for IDEA, Part B Preschool Funds as amended by P.L. 108-446. This agency is responsible for complying with applicable State and Federal Requirements for maintaining, retaining documentation for three years after the final claim for reimbursement has been submitted, or until the resolution of any Audit Exception, whichever is later. I hereby certify that, to the best of my knowledge, the information contained herein is correct and the program will be/have been implemented as described in this application.

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SIGNATURE OF LEA SUPERINTENDENT / DATE

APPROVED:

Crystal Richardson, Director
Special Education Services

Thomas R. Bice
State Superintendent of Education