

**RENEWAL #:** 1

**DCF Program** may request a Renewal if they would like to **renew a grant for an additional grant year**. This form must be submitted to your DCF OGC Grant & Contract Specialist for submission through concurrence.

Between **Kansas Department for Children and Families &**

<b>Grantee Agency:</b>	Kansas Child Care Training Opportunities, Inc.		
<b>Street Address*</b>	2323 Anderson Ave, Suite 151	<b>Grant Number</b>	EES-2021-ITSN-01
<b>City, State, Zip*</b>	Manhattan, KS 66502-2912	<b>Grant Year (from/to)</b>	
<b>E-Mail</b>	pkeating@ksu.edu	7/1/2021	6/30/2022
<b>Phone Number</b>	785-532-7197	<b>Fiscal Year</b>	SFY 2022
<b>Fax Number</b>		<b>CFDA # (if applicable)</b>	93.575

**\*\*A copy of any previously approved Renewal(s) and/or Amendment(s), as well as a NEW FFATA form, NEW Debarment Memorandum and NEW Tax Clearance Certificate must be included with this request\*\***

Line Item	New Budget
Personnel	194,306.00
Fringe Benefits	56,663.16
Travel	6,900.00
Equipment	0.00
Supplies	9,600.00
Contractual	1,116,436.00
Building	2,400.00
Training	2,000.00
Other (Quality Improvement)	121,000.00
Other (Web-based Software)	5,700.00
Other (specify)	
Indirect Costs**	21,003.00
<b>Total Grant Budget:</b>	<b>\$1,536,008.16</b>

Speed Chart	Fund	Budget Unit	Account	New Budget Amount
ISD25710	3028	522	555900	1,536,008.16
<b>Total</b>				<b>\$1,536,008.16</b>

**Additional Information:**

\*physical address required, including 9-digit zip code

\*\*Indirect Costs may not exceed 10% of the Grant Budget.

**This grant shall remain in effect, subject to the terms and conditions stated in the original Notification of Grant**



**RENEWAL #:** 2

DCF Program may request a Renewal if they would like to renew a grant for an additional grant year. This form must be submitted to your DCF OGC Grant & Contract Specialist for submission through concurrence.

**Between Kansas Department for Children and Families &**

<b>Grantee Agency:</b>	Kansas Child Care Training Opportunities, Inc.		
<b>Street Address*</b>	2323 Anderson Ave, Suite 151	<b>Grant Number</b>	EES-2021-ITSN-01
<b>City, State, Zip*</b>	Manhattan, KS 66502-2912	<b>Grant Year (from/to)</b>	
<b>E-Mail</b>	pkeating@ksu.edu	7/1/2022	6/30/2023
<b>Phone Number</b>	785-532-7197	<b>Fiscal Year</b>	SFY2023
<b>Fax Number</b>		<b>CFDA # (if applicable)</b>	93.575

**\*\*A copy of any previously approved Renewal(s) and/or Amendment(s), as well as a NEW FFATA form, NEW Debarment Memorandum and NEW Tax Clearance Certificate must be included with this request\*\***

Line Item	New Budget
Personnel	1,053,820.00
Fringe Benefits	375,285.00
Travel	166,500.00
Equipment	0.00
Supplies	31,880.00
Contractual	1,281,866.00
Building	7,000.00
Training	12,000.00
Other: QIP, Pro Res, PD Dev	245,275.00
Other: Web-based	19,000.00
Other Evaluation	30,000.00
Indirect Costs**	98,004.00
<b>Total Grant Budget:</b>	<b>\$3,320,630.00</b>

Speed Chart	Fund	Budget Unit	Account	New Budget Amount
ISD 25710	3028	0522	555900	\$1,536,008.16
ISD 25721	3028	0528	555900	\$1,784,621.84
<b>Total</b>				<b>\$3,320,630.00</b>

**Additional Information:**

See Detailed Budget Narrative - Includes Recovery Projects

\*physical address required, including 9-digit zip code

\*\*Indirect Costs may not exceed 10% of the Grant Budget.

**This grant shall remain in effect, subject to the terms and conditions stated in the original Notification of Grant**