

**CESA 7 Title III Grant 2009-10
Reimbursement Claim Form**

School:	Phone:
Contact Person:	Email:

Directions:

Please complete this form and submit to Mariah Adnane at CESA 7 for approved expenditures. **All claims must be submitted by May 15, 2010** for 2009-2010 expenses. Please refer to the Title III Allocations to verify individual school amounts.

Contact:

Mariah Adnane – CESA 7
595 Baeten Road, Green Bay, WI 54304
Phone: 920-617-5641 madnane@cesa7.k12.wi.us

Check items for reimbursement on this claim and include documentation for all items.

<ul style="list-style-type: none"> <input type="checkbox"/> Registration fees for ELL professional development <input type="checkbox"/> Substitute teachers for teacher attendance at ELL Staff Development events <input type="checkbox"/> Stipends for ELL after-school teacher collaborations <input type="checkbox"/> ELL student books and instructional materials <input type="checkbox"/> ELL software <input type="checkbox"/> ELL professional books and materials for teachers 	<ul style="list-style-type: none"> <input type="checkbox"/> Tutorials and academic or vocational education for ELLs <input type="checkbox"/> Materials and resources for local ELL meetings <input type="checkbox"/> Community participation programs <input type="checkbox"/> Family literacy services <input type="checkbox"/> Parent outreach and training activities <input type="checkbox"/> Tutorials and academic or vocational education for ELLs <p>Please note: Title III funds cannot be used to pay for the cost of ACCESS tests, or the administration by outside staff of ACCESS tests</p>
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Attach documentation for all claims.

Expenditures Claimed for Substitute Teachers

Item	Number of Teachers	Number of Days	Amount Per Day	Total
TOTAL				

Other Expenditures

Item	Quantity	Unit Cost	Total
TOTAL			

Total Amount Claimed: _____

Administrator Signature

Date

CESA Internal

Date Received: _____ Approved: _____

Budget Code: 96-_____ -382-221-000-609