

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Allen County Schools Street Address 238 Bowling Green Rd City, State Zip Scottsville, KY 42164	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1454	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016
4 Grant Authority (Source): State General Assembly	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Bardstown Street Address 308 North 5th Street City, State Zip Bardstown, KY 40004	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1466	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016
4	Grant Authority (Source): State General Assembly		Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Boone County Street Address 8330 US 42 City, State Zip Florence, KY 41042	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1470	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016
4	Grant Authority (Source): State General Assembly		Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Bourbon County Street Address 3343 Lexington Road City, State Zip Paris, KY 40361	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1471	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits Date: July 1, 2015	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Boyle County Street Address 352 North Danville Bypass City, State Zip Danville, KY 40422	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1474	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4	Grant Authority (Source): State General Assembly		
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Carter County Schools Street Address 228 S Carol Malone Blvd City, State Zip Grayson, KY 41143	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1478	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Christian County Street Address 200 Glass Street City, State Zip Hopkinsville, KY 42240	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1480	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Cumberland County Schools Street Address PO Box 420 City, State Zip Burkesville, KY 42717	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1486	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Floyd County Schools Street Address 106 N Front Ave City, State Zip Prestonsburg, KY 41653	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1491	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016
4 Grant Authority (Source): State General Assembly	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Franklin County Street Address 916 East Main Street City, State Zip Frankfort, KY 40601	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1492	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4	Grant Authority (Source): State General Assembly		
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Garrard County Street Address 322 West Maple City, State Zip Lancaster, KY 40444	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1494	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Grant County Schools Street Address 820 Arnie Risen Boulevard City, State Zip Williamstown, KY 41097	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1495	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Graves County Schools Street Address 2290 State Route 121 North City, State Zip Mayfield, KY 42066	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1496	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4	Grant Authority (Source): State General Assembly		
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Harlan County Schools Street Address 251 Ball Park Road City, State Zip Harlan, KY 40831	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1500	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Harrison County Schools Street Address 308 Webster Ave City, State Zip Cynthiana, KY 41031	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1501	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits Date: July 1, 2015	

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Henderson County Schools Street Address 1805 Second Street City, State Zip Henderson, KY 42420	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1502	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Jackson County Schools Street Address PO Box 217 City, State Zip McKee, KY 40447	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1504	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Jackson Independent Street Address 940 Highland Avenue City, State Zip Jackson, KY 41339	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1505	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016
4 Grant Authority (Source): State General Assembly	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Jessamine County Schools Street Address 871 Wilmore Road City, State Zip Nicholasville, KY 40356	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1507	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016
4	Grant Authority (Source): State General Assembly		Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Johnson County Schools Street Address 253 N Mayo T City, State Zip Paintsville, KY 41240	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1508	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4	Grant Authority (Source): State General Assembly		
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Letcher County Schools Street Address 224 Park St City, State Zip Whitesburg, KY 41858	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1518	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016
4	Grant Authority (Source): State General Assembly		Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Livingston County Schools Street Address PO Box 219 City, State Zip Smithland, KY 42081	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1520	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Marion County Schools Street Address 755 E Main St City, State Zip Lebanon, KY 40033	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1524	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Metcalfe County Schools Street Address 109 Sartin Dr City, State Zip Edmonton, KY 42129	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1530	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4	Grant Authority (Source): State General Assembly		
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Monroe County Schools Street Address 309 Emberton Street City, State Zip Tompkinsville, KY 42167	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1533	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4	Grant Authority (Source): State General Assembly		
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Murray Independent Schools Street Address 208 S 13th St City, State Zip Murray, KY 42071	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1537	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4	Grant Authority (Source): State General Assembly		
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Owen County Schools Street Address 1600 Hwy 22 E City, State Zip Owenton, KY 40359	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1539	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Perry County Schools Street Address 315 Park Ave City, State Zip Hazard, KY 41701	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1542	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016
4	Grant Authority (Source): State General Assembly		Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Pike County Schools Street Address 316 S Mayo Tr City, State Zip Pikeville, KY 41502	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1543	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016
4	Grant Authority (Source): State General Assembly	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____	
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date:	July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Powell County Schools Street Address PO Box 430 City, State Zip Stanton, KY 40380	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
		2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1544	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016
			Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4	Grant Authority (Source): State General Assembly		
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date:	July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Pulaski County Schools Street Address PO Box 1055 City, State Zip Somerset, KY 42502	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1545	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits Date: July 1, 2015	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Robertson County Street Address 1760 Sardis Road City, State Zip Mt. Olivet, KY 41064	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor	
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1546	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016	
4	Grant Authority (Source): State General Assembly	11		
5	Award Amount: \$ 20,000			Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016			
12	Consortia/Partnership Members: NA			
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.			
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Rockcastle County Schools Street Address 245 Richmond St City, State Zip Mount Vernon, KY 40456	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1547	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4	Grant Authority (Source): State General Assembly		
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Russell County Schools Street Address 404 S. Main St. City, State Zip Jamestown, KY 42629	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1549	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016
4 Grant Authority (Source): State General Assembly	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Washington County Schools Street Address PO Box 72 City, State Zip Springfield, KY 40069	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1558	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits	Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Wolfe County Schools Street Address PO Box 160 City, State Zip Campton, KY 41301	7	Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8	Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3	Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1561	9	Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4	Grant Authority (Source): State General Assembly		
5	Award Amount: \$ 20,000	11	Evaluations: Annual data collected plus narrative to program progress
6	Period of Award: July 1, 2015 – June 30, 2016		
12	Consortia/Partnership Members: NA		
13	Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.		
14	Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits		Date: July 1, 2015

**Kentucky Department of Education
Award Notification**

1 Name and Address of Recipient: Agency Name Woodford County Schools Street Address 330 Pisgah Pike City, State Zip Versailles, KY 40383	7 Fund Type: <input checked="" type="checkbox"/> State <input type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2 KDE Contact Information: Program Consultant – Brigette Stacy-502-5641473 x4072 Street Address 500 Mero St., 8 th Fl. CPT Budget Contact – Phone Kristin Burton – 502-564-1979 x 4358 Street Address 500 Mero St., 16 th Fl. CPT City, KY Zip Frankfort, Kentucky 40601	8 Method of Payment: <input type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input checked="" type="checkbox"/> Automatic Payment <input type="checkbox"/> Lump Sum <input type="checkbox"/> Receipt of Invoice from Vendor
3 Description/Fund Source of Award and Fiscal Year: Description FY 2016 Community Education Grant Fund Source State CFDA# N/A MUNIS Project Number 110B MOA Number PON2 540 15*1562	9 Reimbursement Frequency: <input type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input checked="" type="checkbox"/> Other 50% upon approval of contract with balance to be paid in fourth quarter 2016 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission <input type="checkbox"/> Other _____
4 Grant Authority (Source): State General Assembly	
5 Award Amount: \$ 20,000	11 Evaluations: Annual data collected plus narrative to program progress
6 Period of Award: July 1, 2015 – June 30, 2016	
12 Consortia/Partnership Members: NA	
13 Special Instructions/Conditions: Only the final expenditure report needs to be posted to CDIP.	
14 Authorized By (Name/Title): Donna Tackett, Director Division of Consolidate Planning and Audits Date: July 1, 2015	



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