

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Adair County Schools Street Address 1204 Greensburg St City, State Zip Columbia, KY 42728 DUNS# 170128839	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$109,785.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Barren County Schools Street Address 202 W Washington St City, State Zip Glasgow, KY 42141 DUNS# 100026863	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$163,898.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Bourbon County Schools Street Address 3343 Lexington Rd City, State Zip Paris, KY 40361 DUNS# 072865298	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		
5	Award Amount: \$274,365.00	10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13	11	Evaluations:
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.		
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits	Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Bowling Green Independent Schools Street Address 1211 Center St City, State Zip Bowling Green, KY 42101 DUNS# 059838557	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$137,280.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Caldwell County Schools Street Address PO Box 229 City, State Zip Princeton, KY 42445 DUNS# 193088861	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		
5	Award Amount: \$73,808.00	11	Evaluations:
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13		
12	Consortia/Partnership Members: Trigg County \$45,338		
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.		
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Casey County Schools Street Address 1922 N US 127 City, State Zip Liberty, KY 42539 DUNS# 966666505	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$69,518.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Christian County Schools Street Address PO Box 609 City, State Zip Hopkinsville, KY 42241 DUNS# 079674529	7 Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8 Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9 Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .	
5	Award Amount: \$152,703.00	10 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13	
12	Consortia/Partnership Members:	
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.	
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits	Date: July 1, 2016

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Clark County Schools Street Address 1600 W Lexington Ave City, State Zip Winchester, KY 40391 DUNS# 029786142	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$234,683.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Clinton County Schools Street Address 2353 N Hwy 127 City, State Zip Albany, KY 42602 DUNS# 082318049	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$89,505.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Danville Independent Schools Street Address 152 E Martin Luther King Blvd City, State Zip Danville, KY 40422 DUNS# 003777497	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$107,153.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members: Boyle County \$21,645			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Daviess County Schools Street Address PO Box 21510 City, State Zip Owensboro, KY 42304 DUNS# 077868156	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$179,303.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members: Owensboro Independent \$5,363			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits	Date: July 1, 2016		

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Fayette County Schools Street Address 701 E Main St City, State Zip Lexington, KY 40505 DUNS# 079676854	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$407,336.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Garrard County Schools Street Address 322 W Maple St City, State Zip Lancaster, KY 40444 DUNS# 946819760	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$47,093.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Graves County Schools Street Address 2290 State Rt 121 N City, State Zip Mayfield, KY 42066 DUNS# 174150748	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		
5	Award Amount: \$82,290.00	11	Evaluations:
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.		
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Hardin County Schools Street Address 65 W A Jenkins Rd City, State Zip Elizabethtown, KY 42701 DUNS# 040426629	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$77,703.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**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 DUNS# 060930468	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$53,820.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Hart County Schools Street Address 25 Quality Street City, State Zip Munfordville, KY 42765 DUNS# 100027366	7 Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8 Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9 Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .	
5	Award Amount: \$62,595.00	10 Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13	11 Evaluations:
12	Consortia/Partnership Members:	
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.	
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits	Date: July 1, 2016

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Lincoln County Schools Street Address 305 Danville Ave City, State Zip Stanford, KY 40484 DUNS# 074094707	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$162,240.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Logan County Schools Street Address PO Box 417 City, State Zip Russellville, KY 42276 DUNS# 079663845	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$154,343.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members: Russellville Independent \$49,043			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Madison County Schools Street Address PO Box 768 City, State Zip Richmond, KY 40475 DUNS# 074070632	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$205,238.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members: Berea Independent \$13,065			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**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 DUNS# 100027572	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$98,573.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Mayfield Independent Schools Street Address 914 East College St City, State Zip Mayfield, KY 42066 DUNS# 051889434	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$109,980.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**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 DUNS# 808927383	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		
5	Award Amount: \$51,870.00	11	Evaluations:
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.		
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits	Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Monroe County Schools Street Address 309 Emberton St City, State Zip Tompkinsville, KY 42167 DUNS# 097266787	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$184,275.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Montgomery County Schools Street Address 640 Woodford Dr City, State Zip Mt Sterling, KY 40353 DUNS# 030954341	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		
5	Award Amount: \$210,210.00	11	Evaluations:
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.		
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Nicholas County Schools Street Address 395 W Main St City, State Zip Carlisle, KY 40311 DUNS# 037499043	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$175,013.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits	Date: July 1, 2016		

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Ohio County Schools Street Address PO Box 70 City, State Zip Hartford, KY 42347 DUNS# 098956212	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$93,795.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members: McLean County \$23,595			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**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 DUNS# 879933117	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$95,063.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**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 DUNS# 788959591	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$283,725.00		11	Evaluations:
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members: Somerset Independent \$67,958			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**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 DUNS# 193225422	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$69,323.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Scott County Schools Street Address PO Box 578 City, State Zip Georgetown, KY 40324 DUNS# 072859721	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		
5	Award Amount: \$132,990.00	11	Evaluations:
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13		
12	Consortia/Partnership Members:		
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.		
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Todd County Schools Street Address 205 Airport Rd City, State Zip Elkton, KY 42220 DUNS# 071327191	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$110,078.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Warren County Schools Street Address PO Box 51810 City, State Zip Bowling Green, KY 42102 DUNS# 086194370	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$104,537.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Webster County Schools Street Address 28 State Rt 1340 City, State Zip Dixon, KY 42409 DUNS# 082313958	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$109,688.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	

**Kentucky Department of Education
Award Notification**

1	Name and Address of Recipient: Agency Name Woodford County Schools Street Address 330 Pisgah Pk City, State Zip Versailles, KY 40383 DUNS# 189489057	7	Fund Type: <input type="checkbox"/> State <input checked="" type="checkbox"/> Federal <input type="checkbox"/> Other: _____	
2	KDE Contact Information: Program Consultant Heather Rhorer; (502) 564-3791 Ext. 4003 Street Address 300 Sower Boulevard, 5th Floor Budget Contact Thelma Hawkins; (502) 564-1979 Ext. 4361 Street Address 300 Sower Boulevard, 5th Floor City, KY Zip Frankfort, KY 40601	8	Method of Payment: <input checked="" type="checkbox"/> Federal Cash Request <input type="checkbox"/> Expenditure Reimbursement <input 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 FY17 Migrant Education Fund Source United States Department of Education CFDA# 84.011A PR/AWARD NUMBER (FAIN) S011A160017 MUNIS Project Number 311C MOA Number N/A Pass-through Number 3110002-16	9	Reimbursement Frequency: <input checked="" type="checkbox"/> Monthly <input type="checkbox"/> Quarterly <input type="checkbox"/> Other _____	
4	Grant Authority (Source): NCLB Title I, Part C Migrant Education; 34CFR Part 200 ; the General Provisions regulations in 34 CFR Part 299 and EDGAR in 34 CFR Parts 76 (except for 76.650-76.662 (participation of students enrolled in private schools)), 77, 79, 81, 82, 84, 97, 98, and 99, 2 CFR 3485 and the Uniform Administrative Requirements, Cost Principles, and Audit Requirements for Federal Awards in 2 CFR Part 200 and 3474 .		10	Financial Reporting Method: <input checked="" type="checkbox"/> Electronic Submission CDIP <input type="checkbox"/> Other _____
5	Award Amount: \$65,618.00	11	Evaluations:	
6	Period of Award: July 1, 2016 – September 30, 2018 Contingent upon Special Instructions/Conditions in Box 13			
12	Consortia/Partnership Members:			
13	Special Instructions/Conditions: All funds must be spent down to no more than 15% of awarded amount by September 30, 2017. If more than 15% of award amount remains the district may apply to carry over the funds by August 30, 2017. Carryover amount will be the available budget ending 1 st Quarter FY18, September 30, 2017. Follow the Migrant Carryover Approval Process for carryover request beyond. The request must be submitted to Regional Center at least 30 days prior to September 30, 2017. Any district carrying over less than 15% of the awarded amount must note the carryover amount on a revised budget within the FY17 grant application. Migrant Education suggests at least 25% of awarded amount be used for Summer Program. The final Federal Cash Request must be submitted by December 7, 2018.			
14	Authorized By (Name/Title): Donna Tackett, Acting Director Division of Consolidated Plans and Audits		Date: July 1, 2016	