

**Kentucky Department of Education
School Security Funds Request Form FY21**

1	District: <u>Henderson County</u>	District # <u>251</u>	For KDE Internal USE only							
2	District's Allotted School Security Funds									
	a. School Security Funds:	<u>\$196,167</u>								
	b. Previous approved SSR	<u>\$0</u>								
	Total Allowable Funds Per District		<u>\$ 196,167</u>							
3	Retroactive Security Project									
	<input type="checkbox"/> YES	Date: <u>5/28/2020</u>								
	<input checked="" type="checkbox"/> NO									
4	Schedule A.	Description and Location Detail								
	School Name	Description of Expenditures	BG#	Expenditure Amount Requested						
	Bend Gate Elementary	Exterior door access control (5 sets)	20-222	\$18,300						
	Cairo Elementary	Exterior door access control (5 sets)	20-222	\$13,290						
	AB Chandler Elementary	Exterior door access control (5 sets)	20-222	\$17,015						
	East Heights Elementary	Exterior door access control (5 sets)	20-222	\$18,250						
	Niagara Elementary	Exterior door access control (5 sets)	20-222	\$19,745						
	South Heights Elementary	Exterior door access control (5 sets)	20-222	\$23,795						
	Central Academy	Exterior door access control (3 sets)	20-222	\$7,210						
5	Total Schedule A: Current Requested Amount			\$117,605						
6	Remaining School Security Funds			\$ 78,562						
<p>7. I certify to the accuracy and completeness of this School Security Funds Request Form. I attest local board approval has been obtained for this request. I certify the School Security Request form has been properly reviewed and submitted in accordance with the guidelines and instructions promulgated by the Kentucky Department of Education .</p> <p>Local Board Approval Date: <u>9/21/20</u></p> <table style="width:100%;"> <tr> <td>Superintendent Signature: _____</td> <td>Print: <u>Marganna Stanley</u></td> <td>Date: <u>9/21/20</u></td> </tr> <tr> <td>Finance Officer Signature: _____</td> <td>Print: <u>Cindy Cloutier</u></td> <td>Date: <u>9/21/20</u></td> </tr> </table>					Superintendent Signature: _____	Print: <u>Marganna Stanley</u>	Date: <u>9/21/20</u>	Finance Officer Signature: _____	Print: <u>Cindy Cloutier</u>	Date: <u>9/21/20</u>
Superintendent Signature: _____	Print: <u>Marganna Stanley</u>	Date: <u>9/21/20</u>								
Finance Officer Signature: _____	Print: <u>Cindy Cloutier</u>	Date: <u>9/21/20</u>								
FOR KDE INTERNAL USE ONLY - REVIEWED BY THE DIVISION OF DISTRICT SUPPORT										
SSR Tracking # _____		Approval Amount: _____								
DFRB Reviewed By: _____		DATE: _____								
Approved DFRB: _____		DATE: _____								
Approved Facilities Branch: _____		DATE: _____								
Approved Division of District Support Director: _____		DATE: _____								