

## FINANCIAL REPORT / EVALUATION FORM (FP01-SD)

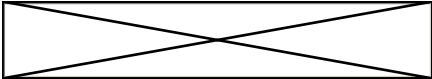
School Year	<input style="width: 80%;" type="text"/>	/	School District #	<input style="width: 80%;" type="text"/>	School District's Name	<input style="width: 90%;" type="text"/>
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### A. FINANCIAL REPORT - DISTRICT GRANTS BASED ON STUDENT LEVEL DATA COLLECTION

Categories	Funding Balance carried over from Previous Years <b>(A)</b>	Current Year Federal Funding by Category <b>(B)</b>	Available Funding in Current Year <b>(F) = (A)+(B)</b>	School District's Current Year Expenditure <b>(E)</b>	Funding to Spending Variance <b>(V) = (F)-(E)</b>
Learning Assistance Grant	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
E-Learning Technology Grant	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Learning Resources Grant	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Core French Grant	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
French Immersion Grant	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Teacher Pro-D Grant	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
Cultural Activities Grant	\$ _____	\$ _____	\$ _____	\$ _____	\$ _____
<b>TOTAL</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>	<b>\$ _____</b>

**TOTAL CUMULATIVE FEDERAL FUNDING CARRIED-FORWARD: \$ \_\_\_\_\_**

**Other School District's Funding allocated to support French as a Second Official Language: \$ \_\_\_\_\_**

<b>SIGNING OFFICER CERTIFICATION</b>	Name _____	Title _____
I agree with the information outlined above and have the authority to certify that all expenditures have been made in accordance with applicable statutes and standards.	E-Signature 	Validation Code _____

**B. EVALUATION FORM - FRENCH FEDERAL GRANTS' FUNDED ACTIVITIES**

1. Please fill out all appropriate boxes.

**LEARNING ASSISTANCE: \$**

Learning Assistance Staff	Spending	Number of Staff
<input type="checkbox"/> Educator(s)	\$	
<input type="checkbox"/> Assistant(s)	\$	

Other Learning Assistance \$ \_\_\_\_\_ (Number of staff is optional for this line)

Please provide comments or clarification on other Learning assistance staffing or activities:

**E-LEARNING: \$**

E-Learning technology	Spending	Item listing
<input type="checkbox"/> Hardware for FSL classrooms	\$	
<input type="checkbox"/> French Software	\$	

Other E-Learning \$ \_\_\_\_\_

Please provide listing, comments or clarification on other E-Learning expenditures or activities:

**LEARNING RESOURCES: \$**

E-Learning technology	Spending	Item listing
<input type="checkbox"/> Printed resources	\$	
<input type="checkbox"/> Electronic resources and E-books	\$	

Other Learning Resources \$ \_\_\_\_\_

Please provide listing, comments or clarification on other Learning Resources expenditures:

**CORE FRENCH: \$**

	Spending	Funded positions
<input type="checkbox"/> Salary (under funding guidelines)	\$	
<input type="checkbox"/> Other Core-French expenditures	\$	

Please provide listing, comments or clarification on Core-French expenditures:

**FRENCH PROGRAMS FINANCIAL REPORT / EVALUATION FORM**

FP01-SD #

**FRENCH IMMERSION: \$**

	Spending	Funded positions	
<input type="checkbox"/> Salary (under funding guidelines)	\$		
<input type="checkbox"/> Other French Immersion expenditures	\$		
Please provide listing, comments or clarification on French Immersion expenditures:			

**Program expansion**

1. Please describe any significant program expansion that took place in your district during the <u>current</u> school year.	Estimated Cost	\$
2. Please describe any significant program expansion that is planned in your district in the <u>next</u> school year.	Estimated Cost	\$

**TEACHERS PRO-D: \$**

- |   |   |   |
|---|---|---|
| <input type="checkbox"/> Conferences                | <input type="checkbox"/> Workshops            | <input type="checkbox"/> Postsecondary Training |
| <input type="checkbox"/> Mentorship programs        | <input type="checkbox"/> Orientation Sessions | <input type="checkbox"/> In-Service Training    |
| <input type="checkbox"/> Others as specified below: |   |   |

**CULTURAL ACTIVITIES: \$**

- |   |                                       |  |
|---|---------------------------------------|--|
| <input type="checkbox"/> Concerts                   | <input type="checkbox"/> Theatre      | <input type="checkbox"/> Concours Oratoire |
| <input type="checkbox"/> Festivals                  | <input type="checkbox"/> Exchanges    | <input type="checkbox"/> Films             |
| <input type="checkbox"/> French Authors             | <input type="checkbox"/> Entertainers | <input type="checkbox"/> Field Trips       |
| <input type="checkbox"/> Others as specified below: |                                       |  |

2.

A large, empty rectangular box with a thin black border, occupying most of the page. It is intended for the user to provide details for item 2.

3.

\$

Learning Assistance

Allocation \$

[Empty box for Learning Assistance details]

E-Learning Technology

Allocation \$

[Empty box for E-Learning Technology details]

Learning Resources

Allocation \$

[Empty box for Learning Resources details]

Core French

Allocation \$

[Empty box for Core French details]

French Immersion

Allocation \$

[Empty box for French Immersion details]

Teacher Pro-D

Allocation \$

[Empty box for Teacher Pro-D details]

Cultural Activities

Allocation \$

[Empty box for Cultural Activities details]

**PROGRAM COORDINATOR CERTIFICATION**

I agree with the evaluation outlined above and certify, to the best of my ability, that all activities have either been carried out or will be undertaken as described.

Name

Title

E - Signature:

[Signature box with an X]

**FUNDING NOTES**

For description of categories and funding guidelines, please refer to the most recent version of the French Funding Guide that is posted on the Ministry of Education website at <http://www.bced.gov.bc.ca/frenchprograms/>.

Form FP01-SD is to be submitted **on or before July 31** immediately following the end of the school year.

**FORM FILLING NOTES****A. Financial Report**

**Column (A) - Funding Balance carried over from Previous Years:** For **2014-15** enter the allocation to activities planned for the appropriate category from your total funding carried-forward reported under section B.3 of the previous year's FP01-SD. **MUST BE ZERO FOR 2017-18.**

**Column (B) - Current Year Federal Funding by Category:** Enter funding allocations by category as identified in the annual grant allocation table which can be accessed at <http://www.bced.gov.bc.ca/frenchprograms/>. Any additional funding received, in the spring, from the ministry must be included.

**Column (F) - Available funding in Current Year:** This column is auto calculated by adding (A) and (B) for each category.

**Column (E) - School District's Current Year Expenditure:** Enter the total amount spent for each category. The amount reported should be limited to **additional costs** directly attributable to the provision of French as Second Language; and, must exclude any activity that would normally be covered under the provincial's operating grant funding.

**Column (V) - Funding to Spending Variance:** This column is auto calculated by subtracting (E) from (F) for each category.

**Cumulative Carry-forward and Other School district funding:** These mutually exclusive cells are auto calculated by comparing total available funding to total expenditures in the current year. **CARRY FORWARD BEYOND 2015-16 WILL NOT BE ALLOWED.**

**B. Evaluation Form**

**B.1** Check all applicable boxes for categories with spending (identified by a red text beside the title); and provide details such as position name for staffing or high level listing of items purchased. Where applicable, category's spending breakdown must equal the category's reported expenditure (an approximated amount may be used where detail breakdown amounts are not available). French Immersion expansion plan must reflect activities and projects completed in the current year, currently underway or expected to begin next school year. In all cases they should be expected to be completed by 2017-18.

**B.2** Complete this section to highlight innovative ways that your district employs to deliver French as Second Language.

**B.3** Provide an allocation by category for your carried-forward fund and a spending plan for each category; or provide the nature of expenditures that required additional school district funding by category.

**CONTACT INFO**

For assistance with this form, please contact:

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Ministry of Education

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