The University of the State of New York

THE STATE EDUCATION DEPARTMENT

Rate Setting Unit, Room 302 EB Albany, New York 12234

Provider Information				
Funding Source:	Private School Teacher Certification Funds			
	FINAL EXPENDITURE REPORT			
School Year:	2012-13 [7/1/12 - 6/30/13]			
Agency Name:				
Federal ID Number:				
School Code:				
Mailing Address:				
Name of Preparer				
Phone # of Preparer	County:			
Email address:				

Instructions

- 1. Submit one signed original report and one copy directly to: Rate Setting Unit, New York State Education Department, Room 302 EB, Albany, NY 12234.
- 2. Category subtotals must be reported in whole dollar amounts.
- 3. To be in compliance with applicable audit requirements, complete and accurate records must be maintained at the local level.
- 4. Certification on last page must be signed by Chief Administrative Officer or designee.
- 5. High-quality computer-generated reproductions of this form may be used.
- 6. For specific Consolidated Fiscal Reporting (CFR) questions, please contact your assigned RSU accountant.

TUITION FOR PROFESSIONAL STAFF:

Include all tuition for professional staff approved for reimbursement in budget.

		Certification	Fee Per	# Of	
Teacher Name	Course Name	Discipline	Credit Hr.	Credit Hrs	Total Expenses
			0		
			Subtotal		

TEST PREPARATION EXPENSES:

Include all course expenses for teachers approved for test preparation in budget.

		Certification	Course Work	# Of	
Teacher Name	Course Name	Discipline	Fee Per Hour	Credit Hrs	Total Expenses
			Subtotal		

TEST FEES PAID:

		Certification		
Teacher Name	Course Name	Discipline	Test Required	Total Expenses
Teacher Name	Course Manile	Discipilite	rest Nequired	Total Expelises
		ı		
			Subtotal	
			Grand Total	\$0.00
Certification				
I hereby certifiy that these ful				cribed
in the November 2006 James	s P. DeLorenzo Teacher	Certification Funds mer	no.	

Chief Administrative Officer or designee

Signature:	Dated:
Printed Name:	
Title:	