

District Name: District 1 Schools of Sptbg. Co.

SCDE Receipt: _____

Financial Flexibility (provide additional forms as necessary)

Quarter: 1 (xx) 2 () 3 () 4 ()

Transfer From (Include Program name and sub-fund *) Current Allocation (include carryover amounts here) Transfer Amount (up to 100%) Transfer to (Include Program name and sub-fund)

(Identify any prior year carryover amounts)

Transfer From (Include Program name and sub-fund *)	Current Allocation (include carryover amounts here)	Transfer Amount (up to 100%)	Transfer to (Include Program name and sub-fund)

* The following appropriations are excluded from this flexibility: Teacher Salary Supplement/Fringe, National Board Certification Teacher Supply and Teacher of the Year; Districts should use judicious caution when transferring any funds received through a competitive grant process

Staffing Flexibility/Maximizing Resources (provide additional information as necessary)

- (1) Our district suspended staffing ratios in the following areas: no staffing ratios suspended
- (2) Our district delayed the following number of teacher contracts: 390
- (2)b The following number of contracts were not renewed 3
- (3) Our district negotiated the following number of retiree salaries 44
- (4) Our district furloughed teachers the following number of days 5
- (4)b Our district furloughed administrators the following number of days 10
- (5) Our district has suspended the following noninstructional/nonessential programs for the 2010-2011 school year. no programs suspended

District Approval: The signatures below certify that this action was approved at a regularly scheduled school board meeting.

Board Chair Signature: *Mark C. Rollin* Date: 9-30-2010

Superintendent Signature: *Ronald W. Danner* Date: 10-1-2010

Completed by: (please print) Laura McCraw, Coordinator of Finance Date: 09-30-2010

Contact Phone No: (864) 472-2846