MEASURE N COMMISSION
1000 Broadway, Suite 680
Oakland, CA 94607-4099

OAKLAND UNIFIED SCHOOL DISTRICT
Community Schools, Thriving Students

Measure N - College & Career Readiness - Commission

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Board Office Use: **Legislative File Info.**	
File ID Number	22-1929
Introduction Date	8-23-2022
Enactment Number	
Enactment Date	

Memo

To	Measure N Commission
From	Vanessa Sifuentes, High School Network Superintendent
Board Meeting Date	_____
Subject	2022-23 Measure N Budget Modification Forms Services For: All High Schools

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Action Requested and Recommendation	Presentation to and discussion by Measure N Commission of 2022-23 Measure N Budget Modification Forms and Budget Modification Form Approval Process.

Background

(Why do we need these services? Why have you selected this vendor?)

Competitively Bid

Was this contract competitively bid? No

If no, exception: N/A

Fiscal Impact

Funding resource(s): Measure N

Attachments

- 2022-23 Measure N Budget Modification Form – OUSD Single Modification
- 2022-23 Measure N Budget Modification Form – OUSD Multiple Modifications
- 2022-23 Measure N Budget Modification Form – Charter Single Modification
- 2022-23 Measure N Budget Modification Form – Charter Multiple Modifications
- Measure N Budget Modification Form Approval Process

2022-23 Measure N
Budget Modification Form
OUSD Schools

Date:		Principal:	
School Name:		Site #:	
Pathway(s): (required for multiple use of programs)		Requested By:	

Step 1:

a. Add the Original Approved Strategic Action from the Measure N EIP:

Directions: Copy & paste the original strategic action below. The original strategic action is where you plan to take money from and use it for a new purpose.

Measure N Plan & Pathway	Budget Action - Line Item #	Original Amount Approved	*Measure N Budget Original Strategic Action (proper & full justification)*	Total Amount Transferred

b. What will be the impact on your Measure N plan, pathway development, and students for not doing your original strategic action? *(*Do not insert links or use Acronyms)*

c. Enter the Account String for the Original Approved Strategic Action:

Fund	Resource	Year	Goal	Function	Object	Site	Manager	Program	LCAP	Optional
	9333									

d. Total amount being transferred: $_____

- ❏ **Please check this box if this is a *NEW* expenditure and it's not in the approved Measure N EIP.**
- ❏ **Please check this box if this is an *EXISTING* expenditure and you're only amending the approved amount.**
- ❏ **Please check this box if this request is to create a new position or change the FTE of an existing position. If so, please attach the Measure N Duty Statement form to the Budget Modification Form.**

Step 2.

a. Enter the New or Revised Strategic Action (Explicitly state the expenditure type and how it supports pathway development?):

This will become the new proper justification for this expenditure. *Only one justification is allowed. *You'll use this new or revised justification for all future applicable requests connected to this modification.

Measure N Plan & Pathway	Budget Action - Line Item #	Original Amount Approved	New or Revised Measure N Strategic Action *Enter one to two sentences to create a Proper Justification using the questions below. No acronyms or hyperlinks.* -What is the specific expenditure or service type? Please provide a brief description - (no vague language) and quantify when applicable. -How does the specific expenditure impact students in the pathway and support your 2022-23 pathway goals and strategic actions? -Please also answer the additional questions by Object Code linked in this **document** to provide a proper justification for your new or revised strategic action.	New or Amended Amount

b. Enter the New or Revised Account String:

Fund	Resource	Year	Goal	Function	Object	Site	Manager	Program	LCAP	Optional
	9333									

Signature of Approvals: *(Please insert the team member's name below the signature line)*

_____   _____

Name: Date
Teacher Leader/Pathway Director Signature

_____   _____

Name: Date
Principal Signature Required

FOR MEASURE N STAFF USE ONLY

Date BMF Received: _____

Escape Budget Transfer or Journal Entry Link No.: _____

Program Manager, Approval Signature: _____   Date: _____

H.S. Network Superintendent, Approval Signature: _____   Date: _____

2022-23 Measure N
Budget Modification Form
OUSD Schools

OAKLAND UNIFIED SCHOOL DISTRICT
Community Schools, Thriving Students

College & Career for All Fund
Established by Measure N

Date:		Principal:	
School Name:		Site #:	
Pathway(s): (required for multiple use of programs)		Requested By:	

Step 1:

a. Enter the Original Approved Strategic Action from the Measure N EIP:

Directions: Copy & paste the original strategic action below. The original strategic action is where you plan to take money from and use it for a new purpose.

*You can enter up to 3 different actions below, as long as the New or Revised Strategic Action in Step 2 is the same!

Measure N Plan & Pathway	Budget Action - Line Item #	Original Amount Approved	*Measure N Budget Original Strategic Action (proper & full justification)*	Total Amount Transferred
The total amount being transferred from the (enter # of actions here) different actions above is $(enter amount)				

b. What will be the impact on your Measure N plan, pathway development, and students for not doing your original strategic action? *(*Do not insert links or use Acronyms. *If taking from multiple actions - provide a response for each or the overall impact)*

c. Enter the Account String for the Original Approved Strategic Action:

Fund	Resource	Year	Goal	Function	Object	Site	Manager	Program	LCAP	Optional
	9333									
	9333									
	9333									

d. Total amount being transferred: $_____

❏ **Please check this box if this is a *NEW* expenditure and it's not in the approved Measure N Budget.**

❏ **Please check this box if this is an *EXISTING* expenditure and you're only amending the approved amount.**

❏ **Please check this box if this request is to create a new position or change the FTE of an existing position. If so, please attach a Measure N Duty Statement form to the Budget Modification form.**

Step 2.

a. Enter the New or Revised Strategic Action (Explicitly state the expenditure type and how it supports pathway development?):

*This will become the new proper justification for this expenditure. *Only one justification is allowed. *You'll use this new or revised justification for all future applicable requests connected to this modification.*

Measure N Plan & Pathway	Budget Action - Line Item #	Original Amount Approved	*New or Revised Measure N Strategic Action* *Enter one to two sentences to create a Proper Justification using the questions below. No acronyms or hyperlinks.* -What is the specific expenditure or service type? Please provide a brief description - (no vague language) and quantify when applicable. -How does the specific expenditure impact students in the pathway and support your 2022-23 pathway goals and strategic actions? -Please also answer the additional questions by Object Code linked in this **document** to provide a proper justification for your new or revised strategic action.	New or Amended Amount

b. Enter the New or Revised Account String:

Fund	Resource	Year	Goal	Function	Object	Site	Manager	Program	LCAP	Optional
	9333									

Signature of Approvals: *(Please insert the team member's name below the signature line)*

_____ _____   _____ _____
Name: Date   Name: Date
Teacher Leader/Pathway Director   **Principal Signature Required**
Signature

FOR MEASURE N STAFF USE ONLY
Date BMF Received: _____

Escape Budget Transfer or Journal Entry Link No.: _____

Program Manager, Approval Signature: _____   Date: _____

H.S. Network Superintendent, Approval Signature: _____   Date: _____

2022-23 Measure N Budget Modification Form Charter Schools

Date:		School Name:	
Requested By:			
Pathway(s): (required for multiple use of programs)		Principal Name:	

Step 1:
a. Enter the Original Approved Strategic Action from the Measure N EIP:

Directions: Copy & paste the original strategic action below. The original strategic action is where you plan to take money from and use it for a new purpose.

Measure N Plan & Pathway	Budget Action Item #	Original Amount Approved	*Measure N Budget Original Strategic Action (proper & full justification)*	Total Amount Transferred

b. What will be the impact on your Measure N plan, pathway development, and students for not doing your original strategic action? *(*Do not insert links or use Acronyms)*

c. Enter the Object Code and Expenditure Type for the Original Approved Strategic Action:

d. Total amount being transferred: $_____

- ❏ **Please check this box if this is a *NEW* expenditure and it's not in the approved Measure N Budget.**
- ❏ **Please check this box if this is an *EXISTING* expenditure and you're only amending the approved amount.**
- ❏ **Please check this box if this request is to create a new position or change the FTE of an existing position. If so, please attach a Measure N Duty Statement form to the Budget Modification form.**

Step 2.
a. Enter the New or Revised Strategic Action (Explicitly state the expenditure type and how it supports pathway development?):

*This will become the new proper justification for this expenditure. *Only one justification is allowed. *You'll use this new or revised justification for all future applicable requests connected to this modification.*

Measure N Plan & Pathway	Budget Action Item #	Original Amount Approved	*New or Revised Measure N Strategic Action* *Enter one to two sentences to create a Proper Justification using the questions below. No acronyms or hyperlinks.* -What is the specific expenditure or service type? Please provide a brief description - (no vague language) and quantify when applicable. -How does the specific expenditure impact students in the pathway and support your 2022-23 pathway goals and strategic actions? -Please also answer the additional questions by Object Code linked in this **document** to provide a proper justification for your new or revised strategic action.	New or Amended Amount

b. Enter the Object Code and Expenditure Type for the New or Revised Approved Strategic Action:

Signature of Approvals: *(Please insert the team member's name below the signature line)*

_____   _____   _____   _____
Name: Date   Name: Date
Teacher Leader/Pathway Director   **Principal Signature Required**
Signature

FOR MEASURE N STAFF USE ONLY

Date BMF Received: _____

Quarterly Expenditure: 1st Qtr.: ____ 2nd Qtr.: ____ 3rd Qtr.: ____ 4th Qtr.: ____

Program Manager, Approval Signature: _____   Date: _____

H.S. Network Superintendent, Approval Signature: _____   Date: _____

2022-23 Measure N
Budget Modification Form
Charter Schools

College & Career for All Fund
Established by Measure N

Date:		School Name:	
Requested By:			
Pathway(s): (required for multiple use of programs)		Principal Name:	

Step 1:

a. Enter the Original Approved Strategic Action from the Measure N EIP:

Directions: Copy & paste the original strategic action below. The original strategic action is where you plan to take money from and use it for a new purpose.

*You can enter up to 3 different actions below, as long as the New or Revised Strategic Action in Step 2 is the same!

Measure N Plan & Pathway	Budget Action Item #	Original Amount Approved	*Measure N Budget Original Strategic Action (proper & full justification)*	Total Amount Transferred
The total amount being transferred from the (enter # of actions here) different actions above is $(enter amount)				

b. What will be the impact on your Measure N plan, pathway development, and students for not doing your original strategic action? *(*Do not insert links or use Acronyms. *If taking from multiple actions - provide a response for each action or the overall impact)*

c. Enter the Object Codes and Expenditure Types for the Original Approved Strategic Actions:

d. Total amount being transferred: $_____

- ❏ **Please check this box if this is a *NEW* expenditure and it's not in the approved Measure N Budget.**
- ❏ **Please check this box if this is an *EXISTING* expenditure and you're only amending the approved amount.**
- ❏ **Please check this box if this request is to create a new position or change the FTE of an existing position. If so, please attach a Measure N Duty Statement form to the Budget Modification form.**

Step 2.

a. Enter the New or Revised Strategic Action (Explicitly state the expenditure type and how it supports pathway development?):

*This will become the new proper justification for this expenditure. *Only one justification is allowed. *You'll use this new or revised justification for all future applicable requests connected to this modification.*

Measure N Plan & Pathway	Budget Action Item #	Original Amount Approved	*New or Revised Measure N Strategic Action* *Enter one to two sentences to create a Proper Justification using the questions below. No acronyms or hyperlinks.* -What is the specific expenditure or service type? Please provide a brief description - (no vague language) and quantify when applicable. -How does the specific expenditure impact students in the pathway and support your 2022-23 pathway goals and strategic actions? -Please also answer the additional questions by Object Code linked in this **document** to provide a proper justification for your new or revised strategic action.	New or Amended Amount

b. Enter the Object Code and Expenditure Type for the New or Revised Approved Strategic Action:

Signature of Approvals: *(Please insert the team member's name below the signature line)*

_____   _____   _____   _____
Name: Date   Name: Date
Teacher Leader/Pathway Director   **Principal Signature Required**
Signature

FOR MEASURE N STAFF USE ONLY
Date BMF Received: _____   Quarterly Expenditure: 1st Qtr.: _____ 2nd Qtr.: _____ 3rd Qtr.: _____ 4th Qtr.: _____   Program Manager, Approval Signature: _____   Date: _____   H.S. Network Superintendent, Approval Signature: _____   Date: _____

Budget Modification Form (BMF) Approval Process

Discover a Need	Service & Support	Approved or Denied	Implementation Process	Commission Review & Approval

The school identifies a new need that requires they modify their Measure N EIP.
School staff complete a BMF based on their need and submit it to Nancy Gomez.

Initial Review & Approval
Nancy reviews the BMF for compliance, completeness and supports the school staff with any corrections before approving.

Approval Walk Through
If the New or Modified Action is permissible, it is approved by Measure N staff. An approved copy is forwarded to the school and BOE staff for processing. *If the action is non-permissible, the request is denied.

Ready to take Action
The school can now proceed with the necessary actions to execute their plan. Approved copies are filed for Audit purposes.

Final Review & Approval
Measure N Commissioners review the BMF. If approved, they give their consent. If denied, the school will need to reverse the action and use another funding source.