

GRANT OFFICE USE ONLY

Notification to ITS:  
Initials:

# GRANT AWARD APPROVAL FORM

<b>1. Official Name of Grant Program:</b>		Date of SBE approval of grant criteria 06/08/2004
2004 - 2005 Projects funding. (years)	Competitive Mini-Grants to Complete the Healthy School Action Tool under the Centers for Disease Control and Prevention Special (title)	<input checked="" type="checkbox"/> Initial (type) <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Continuation
Legislation Authorizing this Grant Program: Public Act Section 301(a) and 311(b) (c) as amended; 42 U.S.C. 241 as amended; 42 U.S.C. 243(b)		
<input checked="" type="checkbox"/> Federal Grant CFDA Number 93.938	<input type="checkbox"/> State Grant	<input type="checkbox"/> Other (Private, Foundation)
<b>2. Type and Purpose of Grant Program: (check one)</b> To enable recipients to establish or expand a Coordinated School Health Team/Council; to use the Healthy School Action Tool to assess the school's nutrition, physical activity and tobacco environment, and create a three-year action plan; to implement at least one action item listed on their three-year action plan; and if a Sun Safety Mini-Grant recipient, to use funding to implement at least one action that is sun safety related.		<input checked="" type="checkbox"/> Competitive <input type="checkbox"/> Formula <input type="checkbox"/> Other  (specify)
<b>3. SBE Priorities and Policies that this Grant Program Supports: (check all that apply)</b>		
<u>Priorities</u> <input checked="" type="checkbox"/> Integrating Communities and Schools <input type="checkbox"/> Elevating Educational Leadership <input type="checkbox"/> Embracing the Information Age <input type="checkbox"/> Ensuring Early Childhood Literacy <input type="checkbox"/> Ensuring Excellent Educators	<u>Policies</u> <input type="checkbox"/> Bullying <input type="checkbox"/> Character Education <input checked="" type="checkbox"/> Creating Effective Learning Environments <input checked="" type="checkbox"/> Family Involvement <input type="checkbox"/> Safe Schools	<input type="checkbox"/> Other  (specify)
<b>4. Grant Categories (if not described in Item 2):</b> <input checked="" type="checkbox"/> NOT APPLICABLE		
<b>5. Target Population to be Served by Grant:</b> Administrators, teachers, parents, students, and the community at a specified building level.		
<b>6. Total Funds Awarded:</b> \$31,500		
<b>7. Eligible Applicants:</b> School buildings that have a history of collaboration, a health promotion team in place, a willingness to implement Healthy School Action Tool during the 2004-2005 school year, and an interest in improving the nutrition, physical activity and tobacco-free school environment.		
<b>8. Description of Priorities Given to Any Specific Population or Location:</b> <input checked="" type="checkbox"/> NOT APPLICABLE		
<b>9. Grant Administration:</b>		
<u>Office</u> Grants Coordination & School Support	<u>Unit</u> Coordinated School Health & Safety Programs Unit	<u>Contact</u> Elizabeth C. Haller  <u>Phone</u> 517-335-0565

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<b>10. OFFICE</b>	Office Director Approval Signature: <u>Mary Ann Chart</u>	Date: <u>9/9/04</u>
	Phone: _____	Comments: _____
<b>11. BUDGET OFFICE</b>	Budget Office Approval Signature: _____	Date: _____
	Comments: _____	
<b>12. GRANTS OFFICE</b>	Grants Office Approval Signature: <u>Mary Ann Chart</u>	Date: <u>9/9/04</u>
	Comments: <u>Exhibit B is not required</u>	
<b>13. DEPUTY SUPERINTENDENT</b>	Deputy Superintendent Approval Signature: <u>Carl Wrenberg</u>	Date: <u>9-15-04</u>
	Comments: _____	
<b>14. SUPERINTENDENT</b>	Superintendent Approval Signature: <u>dw</u>	Date: <u>9-16-04</u>
	Comments: _____	

**INSTRUCTIONS:**

- A. Complete items 1-10 on this form. The Grants Administration Unit will facilitate completion of items 11-14.
- B. Attach three (3) sets of Exhibits A, B, and C.  
 Exhibit A---List of applicants (alphabetical order) recommended for funding, the amount requested, the amount recommended, and a three to five sentence abstract of the proposal.  
 Exhibit B---List of applicants (alphabetical order) not recommended for funding and the amount each requested.  
 Exhibit C---Map of Michigan indicating the location of recommended applicants.
- C. Attach the grant award letters for the Superintendent's signature and the non-award letters for the Service Area Director's signature. The letters should be submitted in the same order given in Exhibit A and/or B. For each final Grant Award Notification letter, a Grant Award Notification form (yellow sheet) also needs to be submitted for the Superintendent's signature.
- D. Transmit Grant Award Approval Form (pink), attachments, and letters to the Grant Administration Unit.

**Competitive Mini-Grants to Complete the Healthy School Action Tool  
under the Centers for Disease Control and Prevention  
Special Projects funding for Fiscal Year 2004-2005**

<b><u>Applicants Recommended for Funding</u></b>	<b><u>Amount Requested</u></b>	<b><u>Amount Recommended</u></b>
Adrian Public Schools	\$ 1,000	\$ 1,000
Alma Public Schools	1,000	1,000
Bad Axe Public Schools	1,000	1,000
Bath Community Schools	1,000	1,000
Bendle Public Schools/Bendle High School	1,000	1,000
Bendle Public Schools/Bendle Middle School	1,000	1,000
Bendle Public Schools/South Bendle Elementary	1,000	1,000
Bendle Public Schools/West Bendle Elementary	1,000	1,000
Breitung Township Schools	1,000	1,000
Cass City Public Schools	500	500
Clarenceville School District/Botsford Elementary	500	2,500
Clarenceville School District/Grandview Elementary	1,000	2,500
Detroit Public Schools/Redford High School	1,000	1,000
East Detroit Public Schools	500	500
Fitzgerald Public Schools/Schofield Elementary	1,000	1,000
Genesee Schools	1,000	1,000
Houghton Lake Community Schools	1,000	1,000
Lakeview School District	500	500
Redford Union School District/Hilbert Middle School	1,000	1,000
Romulus Community Schools/Barth Elementary	1,000	1,000
Romulus Community Schools/Cory Elementary	1,000	1,000
Romulus Community Schools/Halecreek Elementary	1,000	1,000
Romulus Community Schools/Merriman Elementary	1,000	1,000
Romulus Community Schools/Romulus Elementary	1,000	1,000
Romulus Community Schools/Wick Elementary	1,000	1,000
Saugatuck Public Schools/Douglas Elementary	1,000	1,000
Saugatuck Public Schools/Saugatuck Middle/High School	500	500
St. Johns Public Schools	1,000	1,000
Suttons Bay School District	1,000	1,000
Taylor School District/Truman High School	500	500
Utica Community Schools/Switzer Elementary	<u>1,000</u>	<u>1,000</u>
<b>Total</b>	<b>\$28,000</b>	<b>\$31,500</b>

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under the Centers for Disease Control and Prevention Special Projects  
funding for Fiscal Year 2004-2005**

**Exhibit C**

