

GRANT AWARD APPROVAL FORM

Date of SBE Approval of Grant Criteria 4/08/2008; 8/12/2008

1. OFFICIAL NAME OF GRANT PROGRAM:

2009--2010 IDEA, Part B Mandated Activities Projects
(year) (year) (title)

Type: Initial Amendment Continuation

Legislation Authorizing This Grant Program: P.L. 108-446 Individuals with Disabilities Education Act (IDEA 2004)

Federal Grant: CFDA Number 84.027A State Aid Grant: Section Number _____ Other (Private, Foundation)

2. SBE Priorities, Policies, and Programs that this Grant Supports (This information can be found on the SBE approved grant criteria form.):

This grant supports the SBE Priorities and the requirements under IDEA by providing information dissemination, training, and technical assistance as well as personnel development for improvement of instruction for students with disabilities, using evidence-based interventions and practices in several areas, including: mathematics, utilizing Universal Design for Learning research and principles, assistive technology, mediation, literacy and behavior interventions, and training and technical assistance for autism, transition services, and family involvement, to improve achievement for students with disabilities.

3. Background/Purpose of Grant Program: To provide assistance/support to the Office of Special Education and Early Intervention Services in conducting the regulatory and administrative activities required under IDEA; provide a web-based system that will provide to local districts a data manager to track required student involvement in special education programs and services; provide statewide mediation, transition services, and assistive technology; provide information, training, and technical assistance; provide improvement in mathematics instruction that benefit all learners; and provide a statewide system of support and information for parents and families.

Type of Grant Program: (check one)

- Competitive
 Formula
 Other: (specify below)

4. Target Population to be Served by Grant:

Infants and toddlers, students with disabilities, and their families

5. Eligible Applicants:

The grantees currently holding the award

6. Award Information:

Amendment Date(s): _____	Amendment Amount(s): \$ _____	Total Recommended Award to Date:
Original Award Date:	\$ _____	\$16,950,000 _____
<u>10/01/09</u>	\$ _____	
Original Award Amount:	\$ _____	
<u>\$16,950,000</u>	\$ _____	

7. Program Office Responsible:

<u>Office</u>	<u>Unit</u>	<u>Contact</u>	<u>Phone</u>
OSE/EIS	Program Finance	John Andrejack	14386

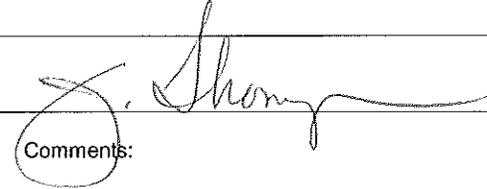
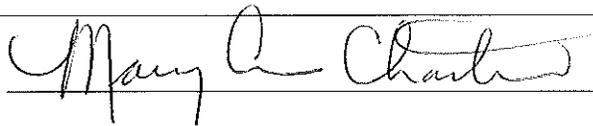
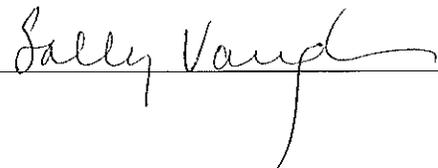
This Form Was Prepared by: Beth Horne

Phone Number: 32949

RECEIVED

SEP 11 2009

DEPUTY SUPERINTENDENT
CHIEF ACADEMIC OFFICER

8. OFFICE	
Office Director Approval Signature: <u></u>	Date: <u>9-2-09</u>
Phone: <u>5-0455</u>	Comments: _____
9. GRANTS OFFICE	
Grants Office Approval Signature: <u></u>	Date: <u>9-11-09</u>
Comments: _____	
<input type="checkbox"/> Exhibit A Not Required	<input checked="" type="checkbox"/> Exhibit B Not Required
10. DEPUTY SUPERINTENDENT	
Deputy Superintendent Approval Signature: <u></u>	Date: <u>9-14-09</u>
Comments: _____	
11. SUPERINTENDENT	
Superintendent Approval Signature: <u></u>	Date: <u>9-15-09</u>
Comments: _____	

INSTRUCTIONS

- A. Complete items 1-8 on this form. The Grants Administration and Coordination Unit will facilitate completion of items 9-11.
- B. **Attach three (3)** sets of Exhibits A and B (one original and 2 copies). Do not staple the pink form nor the originals of Exhibits A and B.
 - Exhibit A---List of applicants (alphabetical order) recommended for funding, the amount requested and the amount Recommended to be funded.
 - Exhibit B---List of applicants (alphabetical order) not recommended for funding and the amount each requested.
- 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 **Grants Administration and Coordination Unit**.

Note: This process takes, on average, two weeks from the time the packet with the Office Director's signature on it is delivered to the Grants Office, until the time the fully signed packet is routed to the person administering the grant program. This time varies depending upon the number of corrections that are necessary and the availability of all of the signers. It can take longer particularly around holiday times when the signers may be out of the office. Proofread and plan accordingly.

**2009-2010 Mandated Activities
Under Individuals with Disabilities Education Act (IDEA 2004), Part B
Applicants Recommended for Funding**

1. Compliance Information System (CIS)

<u>Recipient</u>	<u>Amount Recommended</u>
CORE Education and Consulting Solutions	\$2,350,000
Interagency Information Systems	\$650,000
Total Amount Recommended	\$3,000,000

2. Comprehensive System for Personnel Development (Child Find)

<u>Recipient</u>	<u>Amount Recommended</u>
Clinton Co. RESA	\$200,000

3. Dispute Resolution

<u>Recipient</u>	<u>Amount Recommended</u>
Dispute Resolution Association of Michigan	\$475,000

4. Integrated Behavior and Learning Support

<u>Recipient</u>	<u>Amount Recommended</u>
Macomb ISD (Ottawa ISD and Kalamazoo RESA collaborating ISDs)	\$3,250,000

5. Michigan's Integrated Improvement Initiative

<u>Recipient</u>	<u>Amount Recommended</u>
Marquette-Alger RESA	\$1,600,000

6. Michigan's Integrated Technology Supports

<u>Recipient</u>	<u>Amount Recommended</u>
Central Michigan University	\$1,025,000

7. Michigan's Mathematics Program Improvement

<u>Recipient</u>	<u>Amount Recommended</u>
Central Michigan University	\$600,000

8. State Performance Plan Development and Implementation Grant

<u>Recipient</u>	<u>Amount Recommended</u>
Marquette-Alger RESA	\$3,150,000
The Arc Michigan	\$250,000
Total Amount Recommended	\$3,400,000

9. Statewide Autism Resources and Training (START) Center

<u>Recipient</u>	<u>Amount Recommended</u>
Grand Valley State University	\$1,400,000

10. Technical Assistance for Transition Services

<u>Recipient</u>	<u>Amount Recommended</u>
Ionia ISD	\$1,200,000

11. Training and Technical Assistance for Family Involvement

<u>Recipient</u>	<u>Amount Recommended</u>
The Arc Michigan	\$800,000

Grand Total Amount Recommended
\$16,950,000