

GRANT AWARD APPROVAL FORM

1. OFFICIAL NAME OF GRANT PROGRAM:	Date of SBE Approval of Grant Criteria <u>8/14/12</u>		
<u>2012--2013</u> <u>Great Start Readiness Program Evaluation Grant</u> (year) (year) (title)			
Type: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amendment <input type="checkbox"/> Continuation			
Legislation Authorizing This Grant Program: State School Aid Act, PA 201 of 2012			
<input type="checkbox"/> Federal Grant: CFDA Number _____ <input checked="" type="checkbox"/> State Aid Grant: Section Number <u>32d(3)</u> <input type="checkbox"/> 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.):			
The Great Start Readiness Program is designed to help at-risk four-year-old children enter school safe, healthy, and eager to succeed in school and in life by improving the readiness and subsequent achievement of children at risk of becoming educationally disadvantaged and who have extraordinary need of special assistance. This vision of the Great Start system supports the Board's goal to "continue developing an effective and equitable performance-based system that achieves academic growth and successful outcomes for all students." Evaluating the Great Start Readiness Program and improving its effectiveness are critical activities.			
3. Background/Purpose of Grant Program: The Great Start Readiness Program (previously referred to as the Michigan School Readiness Program) is a state-funded preschool program for four-year-old children at risk of school failure and has been operating in Michigan school districts and private agencies since 1985-86. Since 1994, the HighScope Educational Research Foundation has conducted a longitudinal study of the effectiveness of the program, providing data on the impact of the program on children's development and learning, academic success, and on program quality.			
Type of Grant Program: (check one) <input checked="" type="checkbox"/> Competitive <input type="checkbox"/> Formula <input type="checkbox"/> Other: (specify below)			
4. Target Population to be Served by Grant:			
Four-year-old children at risk of school failure served by Great Start Readiness Program grantees. All grantees are included in portions of the evaluation.			
5. Eligible Applicants:			
Organizations with longitudinal research experience are eligible for competition.			
6. Award Information:			
Amendment Date(s): _____	Amendment Amount(s): \$ _____	Total Recommended Award to Date: <u>\$300,000</u>	
Original Award Date: <u>10/15/12</u>	_____	\$ _____	
Original Award Amount: <u>\$300,000</u>	_____	\$ _____	
_____	_____	\$ _____	
7. Program Office Responsible:			
<u>Office</u>	<u>Unit</u>	<u>Contact</u>	<u>Phone</u>
Office of Great Start/ Early Childhood Ed. & Fam. Services	Preschool & Early Elementary Programs	Lindy Buch/Richard Lower	38512
This Form Was Prepared by: Richard Lower		Phone Number: 38512	

8. OFFICE		
Office Director Approval Signature:	<u><i>Sindy Buck</i></u>	Date: <u>10.4.12</u>
Phone: <u>13592</u>	Comments:	
9. GRANTS OFFICE		
Grants Office Approval Signature:	<u><i>[Signature]</i></u>	Date: <u>10/15/12</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><i>[Signature]</i></u>	Date: <u>10/15/12</u>
Comments:		
11. SUPERINTENDENT		
Superintendent Approval Signature:	<u><i>Michael P. Flanagan</i></u>	Date: <u>10-16-12</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.

**Michigan Department of Education
Office of Great Start/Early Childhood Education and Family Services
2012-2013 Great Start Readiness Program Evaluation Grant**

Recommended for Funding

<u>Applicant</u>	<u>Amount Requested</u>	<u>Amount Recommended</u>
HighScope Educational Research Foundation, Ypsilanti, Michigan	\$300,000	\$300,000
	Total:	<hr/> \$300,000