

GRANT AWARD APPROVAL FORM

1. OFFICIAL NAME OF GRANT PROGRAM:

Date of SBE Approval of Grant Criteria 6/15/2010

2012--2013 Individuals with Disabilities Education Act Preschool Indicators Grant
(year) (year) (title)

Type: Initial Amendment Continuation

Legislation Authorizing This Grant Program: P.L. 105-17 Individuals with Disabilities Education Act (IDEA)

Federal Grant: CFDA Number 84.173A 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.): The Individuals with Disabilities Education Act (IDEA), Part B, Section 619 Preschool grant to Michigan serves the purpose of providing special education programs and services to children with disabilities ages three through five. Federal IDEA legislation requires each state to report annually on performance for children with disabilities ages three through 21 receiving special education services in the SPP/APR. Three indicators apply exclusively to children three to five years of age and this grant supports the identification, development, and implementation of improvement strategies for children served in the early childhood special education system.

3. Background/Purpose of Grant Program: The Individuals with Disabilities Education Act (IDEA) Preschool Indicators Grant will annually collect and analyze information and performance data necessary for special education services for preschool children with disabilities. Data collected and analyzed by the grantee(s) will provide direction for, and improvement of, targets for preschool children with disabilities ages three through five. This is year three of a five-year grant cycle.

Type of Grant Program: (check one)

Competitive
 Formula
 Other: (specify below)

4. Target Population to be Served by Grant:

Preschool children with disabilities and providers of special education services comprise the target population.

5. Eligible Applicants:

Eligible applicants include local and intermediate school districts, human service agencies, public or private organizations and agencies, advocacy organizations, institutions of higher learning, and others with appropriate expertise and experience.

6. Award Information:

Original Award Date: <u>10/24/12</u>	Amendment Date(s): _____	Amendment Amount(s): \$ _____	Total Recommended Award to Date: <u>\$225,000</u>
Original Award Amount: <u>\$225,000</u>	_____	\$ _____	
	_____	\$ _____	
	_____	\$ _____	

7. Program Office Responsible:

Office	Unit	Contact	Phone
Office of Great Start/ Early Childhood Education and Family Services	Preschool and Early Elementary Programs	Lisa Wasacz	517-241-4520

This Form Was Prepared by: Laura Meisel

Phone Number: 517-241-4252

8. OFFICE	
Office Director Approval Signature: <u>Andy Bueh</u>	Date: <u>10-17-12</u>
Phone: <u>13592</u>	Comments:
9. GRANTS OFFICE	
Grants Office Approval Signature: <u>[Signature]</u>	Date: <u>10-19-12</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>[Signature]</u>	Date: <u>10-23-12</u>
Comments:	
11. SUPERINTENDENT	
Superintendent Approval Signature: <u>[Signature]</u>	Date: <u>10-24-12</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
Individuals with Disabilities Education Act Preschool Indicators Grant
2012-2013**

Recommended for Funding

a) Data Analysis and Reporting

<u>Applicant</u>	<u>Amount Requested</u>	<u>Amount Recommended</u>
HighScope Educational Research Foundation	\$ 80,000	\$ 80,000

b) Professional Development and Technical Assistance

<u>Applicant</u>	<u>Amount Requested</u>	<u>Amount Recommended</u>
Clinton County RESA	\$145,000	\$145,000

Total:
\$225,000