

# GRANT AWARD APPROVAL FORM

## 1. SOURCE OF GRANT FUNDS RECEIVED

SBE Grant Criteria Approval Date (meeting date):  
1) 10/13/09; 2) 5/8/12; 3) 10/9/12; 4) 5/8/12

Official Name Of Grant Program:

2013--2014 Mandated Activities Under the Individuals with Disabilities Education Act (IDEA 2004), Part C  
(year) (year) (title)

Grant Type:  Initial  Amendment  Continuation

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

Federal Grant: CFDA Number 84.181A  State Aid Grant: Section Number \_\_\_\_\_  Other (specify) \_\_\_\_\_

## 2. SBE Priorities, Policies, and Programs that this Grant Supports:

These grants support the Board's expectation of successful outcomes for all students by providing the early intervention support needed to achieve improved outcomes for children and families, and also addresses the Board's goal by providing timely and accurate information for intervention services to support children's development. All activities of the *Early On*<sup>®</sup> system address the tenets of universal education and promote early childhood literacy and school/community relationships.

## MDE DISTRIBUTION OF GRANT FUNDS

### 3. Background/Purpose of Grant Program:

To provide assistance and support to the Office of Great Start/Early Childhood Education and Family Services in conducting the regulatory activities required under IDEA, providing information for federal evaluation activities, providing activities and information aimed at supporting parents of children with disabilities, providing personnel development and technical assistance, and developing and distributing public awareness referral materials.

### Type of Distribution: (check one)

- Competitive  
 Formula  
 Other: (specify below)  
Interagency Agreement

### 4. Target Population to be Served by Grant:

Service providers, intermediate school districts, and children who have disabilities and their families.

### Type of Award: (check all applicable)

- Initial (Exhibit A)  
 Revised (Exhibit A)  
 Conditional (Exhibit A)  
 Denial (Exhibit B)

### 5. Eligible Applicants:

Grantees currently holding the awards.

### Type of Notification: (check one)

- Letter  
 Mail-merge Letter  
 MEGS/MEGS+  
 Other: (specify below)

### 6. Award Information:

Original Award Date: <u>10/1/2013</u>	Amendment Date(s): _____	Amendment Amount(s): \$ _____	Total Recommended Award to Date: _____
Original Award Amount: <u>\$1,525,262</u>	_____	\$ _____	<u>\$1,525,262</u>
	_____	\$ _____	

### 7. Responsible Program Office:

Office Name	Unit Name	Contact Name	Phone Number
Office of Great Start/Early Childhood Education and Family Services	Infant/Toddler and Family Services	Vanessa Winborne	335-4862

This Form Was Prepared by: Cheryl Najm

Phone Number: 335-1580

<b>8. OFFICE</b>	
Office Director Approval Signature: <u>Trudy Beek</u>	Date: <u>8.22.13</u>
Phone: 517-241-3592	
Comments:	
<input checked="" type="checkbox"/> Exhibit B Not Required because: <b>Formula grants</b>	
<b>9. GRANTS OFFICE</b>	
Grants Office Approval Signature: <u>JTB</u>	Date: <u>8/23/13</u>
Comments:	
<b>10. DEPUTY SUPERINTENDENT</b>	
Deputy Superintendent Approval Signature: <u>[Signature]</u>	Date: <u>8/23/13</u>
Comments:	
<b>11. SUPERINTENDENT</b>	
Superintendent Approval Signature: <u>[Signature]</u>	Date: <u>8/23/13</u>
Comments:	

### INSTRUCTIONS

- A. Complete items 1-8 on this form. The Grants Coordination and School Support Unit will facilitate completion of items 9-11.
- B. **Attach two (2)** sets of Exhibits A and B (one original and 1 copy). 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. Submit Grant Award Approval Form (pink), attachments, and letters to the **Grants Coordination and School Support Unit**.

**Note:** The approval process takes, on average, one week to receive all approvals after the packet is delivered to the Grants Unit. The time varies depending upon the number of corrections and revisions that are necessary and the availability of all of the signers. Reviews and approvals can take longer, up to two weeks, particularly around holiday times when signers may be out of the office.

Michigan Department of Education  
Office of Great Start/Early Childhood Education and Family Services

2013-2014 Mandated Activities Under the  
Individuals with Disabilities Education Act (IDEA 2004), Part C

Applicants Recommended for Funding

**1. *Early On*<sup>®</sup> Michigan Interagency Collaboration Grant Awards Under the FY 2013-2014 Part C Allocation to Michigan**

<u>Recipient</u>	<u>Amount Requested</u>	<u>Amount Recommended</u>
Inter-Tribal Council of Michigan	\$20,918	\$20,918
Michigan Department of Community Health	\$95,084	\$95,084
Michigan Department of Human Services	\$66,558	\$66,558

**2. Mandated Activities Under the Individuals with Disabilities Education Act (IDEA) - Training and Technical Assistance for Family Involvement**

<u>Recipient</u>	<u>Amount Requested</u>	<u>Amount Recommended</u>
The Arc Michigan/Michigan Alliance for Families	\$88,340	\$88,340

**3. Support to the *Early On* Field Under Part C of the Individuals with Disabilities Education Act (IDEA)**

<u>Recipient</u>	<u>Amount Requested</u>	<u>Amount Recommended</u>
Clinton County RESA	\$947,031	\$947,031

**4. Qualitative Compliance Information Grant Under Part C of the Individuals with Disabilities Education Act (IDEA)**

<u>Recipient</u>	<u>Amount Requested</u>	<u>Amount Recommended</u>
Wayne State University	\$307,331	\$307,331
	<u>Total Amount Requested</u>	<u>Total Amount Recommended</u>
	\$1,525,262	\$1,525,262