

Direct questions regarding this form to 373-1806.

# GRANT AWARD APPROVAL FORM

SBE Grant Criteria Approval Date (meeting date):  
8/14/12

### 1. SOURCE OF GRANT FUNDS RECEIVED

Official Name Of Grant Program:

2014--2015 Great Start Readiness Program Evaluation Grant  
(year) (year) (title)

Grant Type:  Initial  Amendment  Continuation

Legislation Authorizing This Grant Program: State School Aid Act, PA 196 of 2014

Federal Grant: CFDA Number \_\_\_\_\_  State Aid Grant: Section Number 32d(3)  Other (specify) \_\_\_\_\_

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

The Michigan State Board of Education adopted two priorities to achieve its mission of all students graduate ready for careers, college and community. The Great Start Readiness Program (GSRP) supports Priority 2: Advocate for and impact policies and legislation that address preK-12 education issues, including but not limited to, educator evaluations, Common Core Standards and Assessments, Next Generation Science Standards, low performing schools, and early learning.

### MDE DISTRIBUTION OF GRANT FUNDS

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

GSRP grants enable eligible recipients to establish or expand high-quality preschool programs designed to improve the readiness and subsequent achievement of children at risk of school failure. GSRP is in its 30th year. Since 1994, HighScope Educational Research foundation has conducted a longitudinal study of the effectiveness of the program.

Type of Distribution: (check one)

- Competitive  
 Formula  
 Other: (specify below)

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

GSRP grants will serve four-year-old children with factors which may place them at risk of educational failure. All grantees are included in portions of the evaluation.

Type of Award: (check all applicable)

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

#### 5. Eligible Applicants:

Organizations with longitudinal research experience are eligible for competition.

Type of Notification: (check one)

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

#### 6. Award Information:

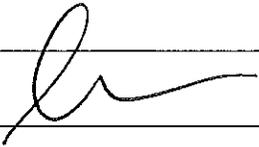
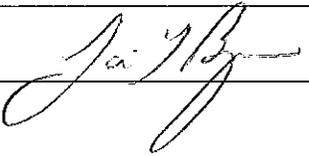
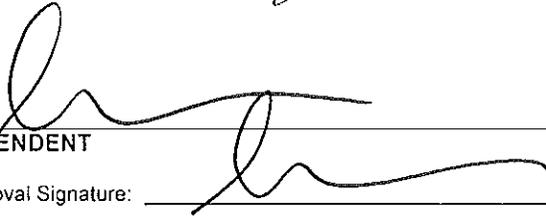
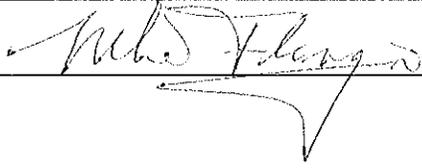
Original Award Date: <u>10/1/14</u>	Amendment Date(s): _____	Amendment Amount(s): \$ _____	Total Recommended Award to Date:
Original Award Amount: <u>\$300,000</u>	_____	\$ _____	<u>\$300,000</u>
	_____	\$ _____	
	_____	\$ _____	

#### 7. Responsible Program Office:

<u>Office Name</u>	<u>Unit Name</u>	<u>Contact Name</u>	<u>Phone Number</u>
Office of Great Start/ ECE&FS	Preschool/Early Elementary	Richard Lower	38512

This Form Was Prepared by: Richard Lower

Phone Number: 38512

<b>8. OFFICE</b>	
Office Director Approval Signature: _____ 	Date: <u>9/15/2014</u>
Phone: _____	
Comments: _____	
<input checked="" type="checkbox"/> Exhibit B Not Required because: this competitive grant has a five year grant cycle and this is year three of the cycle.	
<b>9. GRANTS OFFICE</b>	
Grants Office Approval Signature: _____ 	Date: <u>9/17/14</u>
Comments: _____	
<b>10. DEPUTY SUPERINTENDENT</b>	
Deputy Superintendent Approval Signature: _____ 	Date: <u>9/15/2014</u>
Comments: _____	
<b>11. SUPERINTENDENT</b>	
Superintendent Approval Signature: _____ 	Date: <u>9-22-14</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  
Great Start Readiness Program Evaluation Grant  
2014-2015**

**Applicants Recommended for Funding**

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