Michigan Department of Education
OFFICE OF SCHOOL SUPPORT SERVICES

Rev. 10/2014

GRANT AWARD APPROVAL FORM

Direct questions regarding this form to 373-1806.

1. SOURCE OF GRANT FUNDS RECEIVED

Grant Criteria Approval (select type and add date)
SBE Approval Date: 8/14/2014 _____

Official Name Of Grant Program:
2014--2015 Title I Statewide System of Support Technical Assistance Grant
(year) (year) (title)

Grant Type: ☐ Initial ☒ Amendment ☐ Continuation Multiple Years: Year _____ of _____

Legislation Authorizing This Grant Program: Elementary and Secondary Education Act, Title I, Section 1003(a)

☒ Federal Grant: CFDA Number 84.010A ☐ State Aid Grant: Section Number _____ ☐ Other (specify) _____

2. SBE Priorities, Policies, and Programs that this Grant Supports:
This grant supports MDE's Priority 1 in the 2013-2015 Michigan State Board of Education/Department of Education Mission and Priorities approved June 18, 2013, which states: MDE PRIORITY 1: "Close achievement gaps in reading and math, with an initial focus on African-American young men for whom data show are Michigan's persistently lowest achieving student group."

MDE DISTRIBUTION OF GRANT FUNDS

3. Background/Purpose of Grant Program:
To coordinate the multiple components of the Michigan Statewide System of Support (SSoS) for Title I, Priority and Focus Schools and to expand and enhance Michigan's SSoS and technical assistance for Title I schools with the greatest need to improve student achievement.

Type of Distribution: (check one)

☒ Competitive
☐ Formula
☐ Other: (specify below)

4. Target Population to be Served by Grant:
The target population to be served is students in the lowest achieving schools (i.e., African-American young men, high schools, alternative education, special education, and limited English proficiency) that are attending schools identified as a Title I Priority or Focus school.

Type of Award: (check all applicable)

☐ Initial (Exhibit A)
☒ Revised (Exhibit A)
☐ Conditional (Exhibit A)
☐ Denial (Exhibit B)

5. Eligible Applicants:
Grant applicants must be a Michigan Local Educational Agency (LEA), which may include an intermediate school district (ISD), regional educational service agency (RESA), or consortia of ISDs/RESAs.

Type of Notification: (check one)

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

6. Award Information:

Original Award Date: 10/01/2014

Original Award Amount: $3,398,810

Amendment Date(s):	Amendment Amount(s):
01/01/2015	$5,841,004
01/01/2015	$242,194
03/20/2015	$-0-
_____	$_____

Total Recommended Award to Date: $9,482,008

7. Responsible Program Office:

Office Name	Unit Name	Contact Name	Phone Number
Education Improvement and Innovation	School Improvement Support	Bill Witt	335-2957

This Form Was Prepared by: Greg Olszta **Phone Number:** 1-4715

8. OFFICE

Office Director Approval Signature: _____ A.P. Date: 3/26/17
Phone: 241-3147

Comments:

☒ Exhibit B Not Required because: **Only one applicant submitted an application for this grant award.**

9. GRANTS OFFICE

Grants Office Approval Signature: _____ Date: 3/27/15

Comments:

10. DEPUTY SUPERINTENDENT

Deputy Superintendent Approval Signature: Linda Forward Date: 3/27/15

Comments:

11. SUPERINTENDENT

Superintendent Approval Signature: _____ Date: 3-27-15

Comments:

INSTRUCTIONS

A. Complete items 1-8 on this form. The Grants Coordination and School Support Unit in the Office of School Support Services will facilitate completion of items 9-11. Follow instructions in the checklist instructions for producing all parts of the Grant Award Approval request packet.

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 is a list of applicants or agencies recommended for funding, and Exhibit B is a list of those Not recommended for funding.

C. If notifying by letter, attach grant award letters for the Superintendent's signature, a Grant Award Notification form (yellow sheet) for each award, and any non-award letters prepared for the Program Area Director's signature. Provide these in the same order as in Exhibit A and/or B. If using MEGS+ to general grant award notifications, then no letters need be attached to the packet because they will be generated in MEGS+.

D. Submit this Grant Award Approval form on pink paper, with all attachments, to the **Grants Coordination and School Support Unit.**

Note: The approval process takes, on average, one week to review and then 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 the signers. Reviews and approvals can take longer, up to two weeks, particularly around holiday times when signers may be out of the office.

Exhibit A

Michigan Department of Education
Office of Education Improvement and Innovation
2014-2015 Title I Statewide System of Support Technical Assistance Grant

Applicants Recommended for Funding

Applicant	Previous Award	Amended Amount	Total Recommended Award
Gogebic-Ontonagon Intermediate School District	$6,083,198	$899,440	$6,982,638
Michigan Association of Intermediate School Administrators	$3,398,810	($899,440)	$2,499,370
Total Amended Amount:	**$9,482,008**	**$0**	**$9,482,008**