

GRANT AWARD APPROVAL FORM

SOURCE OF GRANT FUNDS RECEIVED

1. Official Name of Grant Program:
2015--2016 ISD Collaboration Grant
 (year) (year) (title)

Use of Funding Source: Initial Amendment Continuation Multiple Years: Year ____ of ____

Legislation Authorizing This Grant Program: Elementary and Secondary Education Act of 1965 (P.L. 89-10)

Federal Grant: CFDA Number Multiple State Aid Grant: Section Number ____ Other (specify) ____

2. **Grant Criteria Approval:** SBE Approval Date: 2/9/2010 through Life of Grant
 (select type and add date)

SBE Priorities, Policies, and Programs that this Grant Supports:

This grant supports the State Board Strategic Goal by providing assistance through ISD/RESAs to provide technical assistance designed to improve the achievement levels of students in high priority schools so that they can meet the state's academic standards.

<p>MDE DISTRIBUTION OF GRANT FUNDS</p> <p>3. Background/Purpose of Grant Program:</p> <p>The ISD Collaboration Grant will expand the state's compliance with legislative requirements and enhance the capacity at the Intermediate School District level to assist local school districts.</p>	<p>Type of MDE Grant Distribution: (check one)</p> <p><input checked="" type="checkbox"/> Competitive <input type="checkbox"/> Formula <input type="checkbox"/> Other: (specify below)</p>
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<p>4. Eligible Applicants:</p> <p>Intermediate school districts in Michigan.</p>	<p><input checked="" type="checkbox"/> Initial (Exhibit A) <input checked="" type="checkbox"/> Revised (Exhibit A) <input type="checkbox"/> Conditional (Exhibit A) <input type="checkbox"/> Denial (Exhibit B)</p>
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Type of Award from MDE: (check all applicable)

<p>5. Target Population Served by this Grant:</p> <p>The programs and services are designed to improve the achievement of students in schools most in need of technical assistance, to provide curricular support for those schools, and to improve the technical programs across the state.</p>	<p>Type of Notification from MDE: (check one)</p> <p><input checked="" type="checkbox"/> Letter <input type="checkbox"/> Mail-merge Letter <input type="checkbox"/> MEGS+ <input type="checkbox"/> Other: (specify below)</p>
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<p>6. Award Information:</p> <p>Original Award Date: <u>10/1/2015</u></p> <p>Original Award Amount: <u>\$634,700</u></p>	<p>Amendment Date(s):</p> <p><u>10/22/15</u></p> <p><u>05/23/16</u></p> <p>_____</p> <p>_____</p>	<p>Amendment Amount(s):</p> <p><u>\$(44,500)</u></p> <p><u>\$20,000</u></p> <p>\$ _____</p> <p>\$ _____</p>	<p>Total Recommended Award to Date:</p> <p><u>\$610,200</u></p>
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<p>7. Responsible Office: Education Improvement & Innovation</p>	<p>Contact Name Rob Bendall</p>	<p>Phone Number 241-2651</p>
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This Form Was Prepared by: Rob Bendall **Phone Number:** 241-2651

**Michigan Department of Education
Office of Education Improvement and Innovation**

2015-16 ISD Collaboration Grant

Applicants Recommended for Funding

<u>Applicant</u>	<u>Previous Award</u>	<u>Amended Amount</u>	<u>Total Recommended Award</u>
Wayne County RESA	590,200	20,000	610,200