Michigan Department of Education
OFFICE OF SCHOOL SUPPORT SERVICES

GRANT AWARD APPROVAL FORM

SOURCE OF GRANT FUNDS RECEIVED

1. Official Name of Grant Program:
2016--2017 Application for School Bus Inspection Program
(year) (year) (title)

Use of Funding Source: ☒ Initial ☐ Amendment ☐ Continuation Multiple Years: Year _____ of _____

Legislation Authorizing This Grant Program: Public Act 249 of 2016

☐Federal Grant: CFDA Number _____ ☒State Aid Grant: Section Number 74.4 ☐Other (specify) _____

2. Grant Criteria Approval: SBE Approval Date: 11/20/2012 through Life of Grant
(select type and add date)

SBE Priorities, Policies, and Programs that this Grant Supports:
This grant supports the State Board of Education's mission of having all students graduate ready for careers, college, and community by providing pupil transportation support services that get students to and from school safely. An amount of $1,695,600 is appropriated in Sec. 74.4 of the State School Aid Act for the purpose of providing school bus inspection programs in accordance with the requirements of Sec. 39 of the Pupil Transportation Act (MCL 257.1839).

MDE DISTRIBUTION OF GRANT FUNDS

3. Background/Purpose of Grant Program:
This grant will provide school bus inspection funding that will be forwarded to the Department of State Police for the inspections of the approximate 17,000 school buses that transport students to and from school and school related events.

Type of MDE Grant Distribution: (check one)

☐ Competitive
☒ Formula
☐ Other: (specify below)

4. Eligible Applicants:
Intermediate school districts and state supported colleges and universities.

Type of Award from MDE: (check all applicable)

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

5. Target Population Served by this Grant:
School bus drivers and persons in charge of school bus operations in intermediate school districts, local school districts, public school academies, nonpublic schools, and contracted carriers.

Type of Notification from MDE: (check one)

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

6. Award Information:

Original Award Date:
10/1/16

Original Award Amount:
$1,695,600

Amendment Date(s):	Amendment Amount(s):
_____	$_____
_____	$_____
_____	$_____
_____	$_____

Total Recommended Award to Date:

$1,695,600

7. Responsible Office:
Office of School Support Services

Contact Name
Kevin Walters

Phone Number
335-0543

This Form Was Prepared by: Ken Micklash **Phone Number:** 373-6388

Exhibit A

Michigan Department of Education
Office of School Support Services
2016-2017 Application for School Bus Inspection Program
Applicant Recommended for Funding

Applicant	**Amount Requested**	**Total Recommended**
Wayne RESA	$1,695,600	$1,695,600

Total Recommended: $1,695,600