

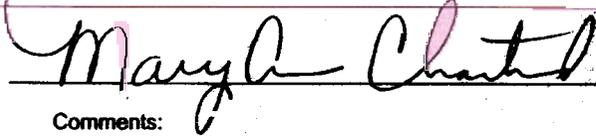
Direct questions regarding this form to 3-1806.

GRANT AWARD APPROVAL FORM

1. OFFICIAL NAME OF GRANT PROGRAM:		Date of SBE Approval of Grant Criteria 9/12/06	
2006--2007 Local Wellness Policy Implementation Grant (years) (years) (title)			
Type: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amendment <input type="checkbox"/> Continuation			
Legislation Authorizing This Grant Program:			
<input checked="" type="checkbox"/> Federal Grant: CFDA Number <u>10.555</u>		<input type="checkbox"/> State Grant	<input type="checkbox"/> Other (Private, Foundation)
2. Purpose of Grant Program: These grants will support student local wellness policy advocacy. MDE will fund a total of 20 high school student local wellness policy implementation teams (\$500/team) to create a road map for future Michigan students to follow when implementing district local wellness policies. The overall goal of this grant is to learn what role students can play in implementing district local wellness policies.		Type of Grant Program: (check one) <input checked="" type="checkbox"/> Competitive <input type="checkbox"/> Formula <input type="checkbox"/> Other: (specify below)	
3. SBE Priorities and Policies That This Grant Program Supports: (check all that apply)			
<u>Priorities</u>		<u>Policies</u>	
<input checked="" type="checkbox"/> Integrating Communities and Schools		<input type="checkbox"/> Bullying	
<input checked="" type="checkbox"/> Elevating Educational Leadership		<input type="checkbox"/> Character Education	
<input type="checkbox"/> Embracing the Information Age		<input checked="" type="checkbox"/> Creating Effective Learning Environments	
<input type="checkbox"/> Ensuring Early Childhood Literacy		<input checked="" type="checkbox"/> Family Involvement	
<input type="checkbox"/> Ensuring Excellent Educators		<input type="checkbox"/> Safe Schools	
<input type="checkbox"/> Other: (specify below)			
4. Grant Categories (if not described in Item 2): <input checked="" type="checkbox"/> NOT APPLICABLE			
5. Target Population to be Served by Grant: Michigan educators, collaborative partner agencies, and school aged youth.			
6. Total Funds Awarded: \$10,000			
7. Eligible Applicants: Public schools, public school academies, and non-public schools operating a school meals program.			
8. Description of Priorities Given to Any Specific Population or Location: <input type="checkbox"/> NOT APPLICABLE Diverse income, racial, ethnic, and geographical representation of secondary schools.			
9. Grant Administration:			
<u>Office</u>	<u>Unit</u>	<u>Contact</u>	<u>Phone</u>
Grants Coordination and School Support	Coord. School Health & Safety Programs	Kyle Guerrant	50565
Prepared by: Nick Drzal		Phone Number: 51730	

10. OFFICE

Office Director Approval Signature:



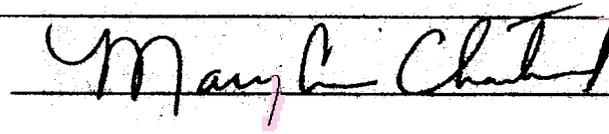
Date: 3/7/07

Phone:

Comments:

11. GRANTS OFFICE

Grants Office Approval Signature:

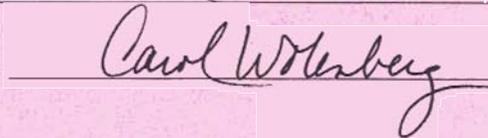


Date: 3/7/07

Comments:

 Exhibit A Not Required Exhibit B Not Required Exhibit C Not Required**12. DEPUTY SUPERINTENDENT**

Deputy Superintendent Approval Signature:



Date: 3-8-07

Comments:

13. SUPERINTENDENT

Superintendent Approval Signature:



Date: 3-12-07

Comments:

INSTRUCTIONS

- A. Complete items 1-10 on this form. The Grants Administration and Coordination Unit will facilitate completion of items 11-14.
- B. Attach three (3) sets of Exhibits A, B, and C.
- Exhibit A---List of applicants (alphabetical order) recommended for funding, the amount requested, the amount recommended, and a three to five sentence abstract of the proposal.
- Exhibit B---List of applicants (alphabetical order) not recommended for funding and the amount each requested.
- Exhibit C---Map of Michigan indicating the location of recommended applicants. Link to: <http://mdeintranet/inside/off/grants/grants.htm> for sample maps.
- 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. Transmit Grant Award Approval Form (pink), attachments, and letters to the Grants Administration and Coordination Unit.

Local Wellness Policy Implementation Grant

Exhibit A

<u>Districts Recommended for Funding</u>	<u>Amount Requested</u>	<u>Amount</u>
Academic and Career Education Academy, Midland	\$500	
Bloomfield Hills Public Schools	\$500	
Comstock Park Public Schools	\$500	
Brighton Area Schools	\$500	\$500
Central Academy, Ann Arbor	\$500	
Chesaning Union Schools	\$500	\$500
Detroit City School District	\$500	
Fennville Public Schools	\$500	
Frankfort-Elberta Area Schools	\$500	
Frontier International Academy, Hamtramck	\$500	
Holt Public Schools	\$1000	\$1000
Lincoln Park Public Schools	\$500	\$500
Pewamo-Westphalia Community Schools	\$500	
Portland Public School District	\$500	\$500
Riverside Academy, Dearborn (6-11)	\$500	\$500
Rudyard Area Schools	\$500	\$500
South Redford School District	\$500	
Suttons Bay Public Schools	\$500	\$500
Tekonsha Community Schools	\$500	\$500
Total Amount Requested	\$10,000	Total \$10,000