

GRANT OFFICE USE ONLY

Notification to ITS:

Initials:

# GRANT AWARD APPROVAL FORM

1. Official Name of Grant Program:		Date of SBE approval of grant criteria NA		
2006 - 2007 (years)	Title V, Part A - Innovative Programs (title)	<input type="checkbox"/> Initial (type)	<input checked="" type="checkbox"/> Amendment	<input type="checkbox"/> Continuation
Legislation Authorizing this Grant Program: Section 2101 P.L. 107-110 No Child Left Behind Act of 2001				
<input checked="" type="checkbox"/> Federal Grant CFDA Number 84.298A		<input type="checkbox"/> State Grant		<input type="checkbox"/> Other (Private, Foundation)
2. Type and Purpose of Grant Program: (check one) Support local education reform efforts and implementation; provide innovation and education improvement for all students including at-risk youth; improve school teacher and student performance including professional development and class size reduction.			<input type="checkbox"/> Competitive <input checked="" type="checkbox"/> Formula <input type="checkbox"/> Other  (specify)	
3. SBE Priorities and Policies that this Grant Program Supports: (check all that apply)				
<u>Priorities</u>		<u>Policies</u>		<input type="checkbox"/> Other
<input checked="" type="checkbox"/> Integrating Communities and Schools		<input type="checkbox"/> Bullying		(specify)
<input 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 type="checkbox"/> Family Involvement		
<input checked="" type="checkbox"/> Ensuring Excellent Educators		<input type="checkbox"/> Safe Schools		
4. Grant Categories (if not described in Item 2): <input checked="" type="checkbox"/> NOT APPLICABLE				
5. Target Population to be Served by Grant: All K-12 students and educators, public and non-public.				
6. Total Funds Awarded: Original: \$2,810,983      Current Recommended: \$17      Revised: \$2,811,000				
7. Eligible Applicants: Local school districts, public school academies, intermediate school districts, and state agencies educating children ages 5-17.				
8. Description of Priorities Given to Any Specific Population or Location: <input type="checkbox"/> NOT APPLICABLE Priority is given to high poverty districts based on free lunch and census poverty. Priority is also given to sparsely populated districts.				
9. Grant Administration:				
<u>Office</u> Office of School Improvement	<u>Unit</u> Regional/Field Services Support	<u>Contact</u> Margaret Madigan	<u>Phone</u> 517-373-4588	

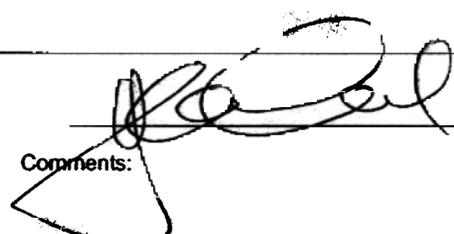
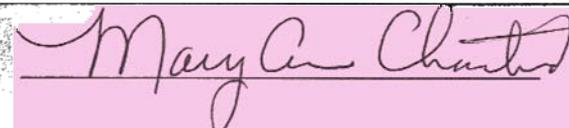
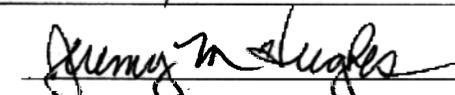
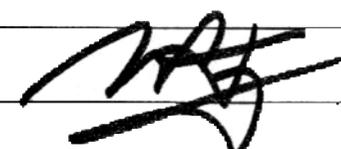
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SEP 13 2006

DEPUTY SUPERINTENDENT

<p>10. OFFICE</p> <p>Office Director Approval Signature: _____</p> <p>Phone: 1-3147</p> <p>Comments: _____</p>	 <p>Date: 9/11/06</p>
<p>11. BUDGET OFFICE</p> <p>Budget Office Approval Signature: _____</p> <p>Comments: _____</p>	<p>Date: _____</p>
<p>12. GRANTS OFFICE</p> <p>Grants Office Approval Signature: _____</p> <p>Comments: _____</p>	 <p>Date: 9/13/06</p> <p>Exhibits B + C are not required</p>
<p>13. DEPUTY SUPERINTENDENT</p> <p>Deputy Superintendent Approval Signature: _____</p> <p>Comments: _____</p>	 <p>Date: 9-14-06</p>
<p>14. SUPERINTENDENT</p> <p>Superintendent Approval Signature: _____</p> <p>Comments: _____</p>	 <p>Date: 9-15</p>

**INSTRUCTIONS:**

- A. Complete items 1-10 on this form. The Grants Administration Unit will facilitate completion of items 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.
- 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 Grant Administration Unit.

Exhibit A

2006-07 Title V, Part A – Innovative Programs

District Name	Previous Award	Recommended Change	Recommended Award
Ottawa ISD	\$3,454	-\$260	\$3,194
Holland Public Schools	5,255	177	5,432
West Ottawa Public Schools	1,757	48	1,805
Coopersville Public Schools	518	35	553
Ionia Twp. #2	4	17	21
<b>Total Recommended Change</b>		<b>\$17</b>	