

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 | 09/12/2006 |
| 2006--2007 <u>My Dream Explorer Grant</u> (years) (years) (title) | | | |
| Type: <input checked="" type="checkbox"/> Initial <input type="checkbox"/> Amendment <input type="checkbox"/> Continuation | | | |
| Legislation Authorizing This Grant Program: Section 98(8) of PA 342 of 2006 | | | |
| <input type="checkbox"/> Federal Grant: CFDA Number _____ | | <input checked="" type="checkbox"/> State Grant | <input type="checkbox"/> Other (Private, Foundation) |
| 2. Purpose of Grant Program: To secure a statewide license for "My Dream Explorer" to provide access to high quality media rich career development resources for all Michigan elementary, middle, and high school buildings and students at no cost beginning in October 2006. | | 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 type="checkbox"/> Integrating Communities and Schools | <input type="checkbox"/> Elevating Educational Leadership | <input checked="" type="checkbox"/> Embracing the Information Age | <input type="checkbox"/> Ensuring Early Childhood Literacy |
| <input type="checkbox"/> Ensuring Excellent Educators | <input type="checkbox"/> Ensuring Early Childhood Literacy | <input type="checkbox"/> Ensuring Excellent Educators | <input type="checkbox"/> Ensuring Excellent Educators |
| <input type="checkbox"/> Bullying | <input type="checkbox"/> Character Education | <input type="checkbox"/> Creating Effective Learning Environments | <input type="checkbox"/> Family Involvement |
| <input type="checkbox"/> Safe Schools | <input type="checkbox"/> Safe Schools | <input type="checkbox"/> Safe Schools | <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: Elementary, middle, and high school students | | | |
| 6. Total Funds Awarded: \$500,000 | | | |
| 7. Eligible Applicants: ISDs in partnership with Michigan Virtual University | | | |
| 8. Description of Priorities Given to Any Specific Population or Location: <input checked="" type="checkbox"/> NOT APPLICABLE | | | |
| 9. Grant Administration: | | | |
| <u>Office</u> | <u>Unit</u> | <u>Contact</u> | <u>Phone</u> |
| Grants Coordination & School Support | Grants Unit | Louis Burgess | 53672 |
| Prepared by: Jill Bradshaw | | Phone Number: 62116 | |

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Dept Supt for Admin

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10. OFFICE

Office Director Approval Signature:

JB Mary L. Chute

Date:

10/5/06

Phone:

Comments:

11. GRANTS OFFICE

Grants Office Approval Signature:

JB Mary L. Chute

Date:

10/5/06

Comments:

Exhibit A Not Required

Exhibit B Not Required

Exhibit C Not Required

12. DEPUTY SUPERINTENDENT

Deputy Superintendent Approval Signature:

Paul Wolentz

Date:

10-6-06

Comments:

13. SUPERINTENDENT

Superintendent Approval Signature:

[Signature]

Date:

10-9-06

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.

**2006-2007 My Dream Explorer Grant
Section 98(8) of Public Act 342 of 2006**

| <u>Applicant</u> | <u>Amount Requested</u> | <u>Amount Recommended</u> |
|------------------|-------------------------|---------------------------|
| Branch ISD | \$500,000 | \$500,000 |
| | | Total \$500,000 |