

# GRANT AWARD APPROVAL FORM

Date of SBE Approval of Grant Criteria 12/8/2009

### 1. OFFICIAL NAME OF GRANT PROGRAM:

2009--2010 Title I, Part C Migrant Education Program Identification and Recruitment Centers  
(year) (year) (title)

Type:  Initial  Amendment  Continuation

Legislation Authorizing This Grant Program: Title I, Part C of No Child Left Behind Act

Federal Grant: CFDA Number 84.011a  State Aid Grant: Section Number \_\_\_\_\_  Other (Private, Foundation)

### 2. SBE Priorities, Policies, and Programs that this Grant Supports (This information can be found on the SBE approved grant criteria form.):

The Michigan Migrant Education Program, Title I, Part C of No Child Left Behind, is focused on children in migratory families. This unique community in Michigan is served through academic, health, and social services. Migrant students tend to fail or to be at risk of failure to meet high academic standards due to school interruptions and frequent moves. The State Board's goal is for all students to receive assistance in meeting Michigan's high academic standards.

3. Background/Purpose of Grant Program: Prior to this funding cycle (2010), the Identification and Recruitment Centers for the Michigan Migrant Education Program were funded on the continuation basis. Changing demographics and migration patterns prompt reconsideration of program standards and criteria.

Type of Grant Program: (check one)

- Competitive  
 Formula  
 Other: (specify below)

### 4. Target Population to be Served by Grant:

Students who are, or whose parents are, migratory agricultural or fishing workers who have moved within the previous 36 months to obtain temporary work in agriculture or fishing.

### 5. Eligible Applicants:

Local and intermediate school districts and private nonprofit agencies operating summer educational programs for migratory children.

### 6. Award Information:

Amendment Date(s): _____	Amendment Amount(s): \$ _____	Total Recommended Award to Date: \$43,456
Original Award Date: 1/25/2010	_____	\$ _____
Original Award Amount: \$43,456	_____	\$ _____
_____	_____	\$ _____

### 7. Program Office Responsible:

Office	Unit	Contact	Phone
Office of Field Services	Special Populations	Mike Radke	3-3921

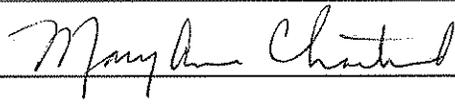
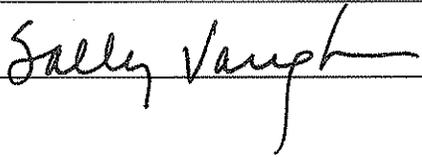
This Form Was Prepared by: William Rowan

RECEIVED

Phone Number: 3-2693

FEB 01 2010

DEPUTY SUPERINTENDENT  
CHIEF ACADEMIC OFFICER

<b>8. OFFICE</b>		
Office Director Approval Signature:		Date: <u>1-29-10</u>
Phone: _____	Comments:	
<b>9. GRANTS OFFICE</b>		
Grants Office Approval Signature:		Date: <u>2-1-10</u>
Comments:		
<input type="checkbox"/> Exhibit A Not Required <span style="margin-left: 150px;"><input checked="" type="checkbox"/> Exhibit B Not Required</span>		
<b>10. DEPUTY SUPERINTENDENT</b>		
Deputy Superintendent Approval Signature:		Date: <u>2-2-10</u>
Comments:		
<b>11. SUPERINTENDENT</b>		
Superintendent Approval Signature:		Date: <u>2/3/10</u>
Comments:		

### INSTRUCTIONS

- A. Complete items 1-8 on this form. The Grants Administration and Coordination Unit will facilitate completion of items 9-11.
- B. **Attach three (3)** sets of Exhibits A and B (one original and 2 copies). Do not staple the pink form nor the originals of Exhibits A and B.
  - Exhibit A---List of applicants (alphabetical order) recommended for funding, the amount requested and the amount Recommended to be funded.
  - Exhibit B---List of applicants (alphabetical order) not recommended for funding and the amount each requested.
- 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**.

**Note:** This process takes, on average, two weeks from the time the packet with the Office Director's signature on it is delivered to the Grants Office, until the time the fully signed packet is routed to the person administering the grant program. This time varies depending upon the number of corrections that are necessary and the availability of all of the signers. It can take longer particularly around holiday times when the signers may be out of the office. Proofread and plan accordingly.

**EXHIBIT A**

Note: Allocations listed on this website are preliminary based on budget projections from the U.S. Department of Education for federal programs and State School Aid Act for state programs. Preliminary allocations are to be used for planning purposes only. Final allocations will be calculated after the U.S. Department of Education announces final

**TITLE I - PART C  
Migrant Education Program  
Identification and Recruitment Centers  
2009-10 Preliminary Allocations  
Districts Recommended for Funding**

<b>District/ Recipient Code</b>	<b>District Name</b>	<b>Allocation</b>
280000203	Northwestern Michigan Migrant Project	28,974
79110	Reese Public Schools	6,280
80000	Van Buren ISD	8,202
<b>TOTAL</b>		<b>\$43,456</b>