

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 8/12/2008

2010--2011 Safe and Drug-Free Schools Grant
(year) (year) (title)

Type: Initial Amendment Continuation

Legislation Authorizing This Grant Program: PL 101-297 Elementary and Secondary Education Act of 1965, As Amended

Federal Grant: CFDA Number 84.186A 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.):

Enhance collaboration between education, health, communities, parents, and other key stakeholders to reduce disparities and promote the health, well-being, and academic achievement of all of Michigan's school-aged youth.

3. Background/Purpose of Grant Program: Prevent drug use and violence in schools.

Type of Grant Program: (check one)

- Competitive
 Formula
 Other: (specify below)
Designated

4. Target Population to be Served by Grant:

School-aged youth, their parents, and teachers/administrators.

5. Eligible Applicants:

Local Educational Agencies, Public School Academies and Intermediate School Districts

6. Award Information:

Amendment Date(s): 4-11-11

Amendment Amount(s): \$15,900

Total Recommended Award to Date: \$292,702

Original Award Date: 1-24-11

\$ _____

Original Award Amount: \$276,802

\$ _____

\$ _____

7. Program Office Responsible:

Office

Unit

Contact

Phone

Grants Coord. and School Support

Coord. School Health and Safety Programs

Kyle Guarrant

50565

This Form Was Prepared by: Patty Lawless

Phone Number: 31122

120
4-11-11

8. OFFICE
 Office Director Approval Signature: Mary K. Chantel Date: 4-11-11
 Phone: _____ Comments: _____

9. GRANTS OFFICE
 Grants Office Approval Signature: Mary K. Chantel Date: 4-11-11
 Comments: _____
 Exhibit A Not Required Exhibit B Not Required

10. DEPUTY SUPERINTENDENT
 Deputy Superintendent Approval Signature: Carol Z. W. Herberg Date: 4-12-11
 Comments: _____

11. SUPERINTENDENT
 Superintendent Approval Signature: Michael P. Flanagan Date: 4-12-11
 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.

**Michigan Department of Education
Coordinated School Health and Safety Programs**

2010-2011 Safe and Drug Free Schools Funding for FY 2011

Applicants Recommended for Funding

<u>Applicant</u>	<u>Previous Award</u>	<u>Amended Amount</u>	<u>Total Recommended Award</u>
Michigan Primary Care Association	\$ 54,802	\$ 15,900	\$ 70,702
Total	\$ 54,802	\$ 15,900	\$ 70,702