

GRANT AWARD APPROVAL FORM

1. OFFICIAL NAME OF GRANT PROGRAM:		Date of SBE Approval of Grant Criteria 1) 10/13/09; 2) 2/14/06; 3) 3/13/07; 4) 3/13/07; 5) 5/13/08	
2009--2010 (year) (year)	<u>Mandated Activities Under the Individuals with Disabilities Education Act (IDEA 2004), Part C</u> (title)		
Type: <input type="checkbox"/> Initial <input type="checkbox"/> Amendment <input checked="" type="checkbox"/> Continuation			
Legislation Authorizing This Grant Program: P.L. 105-17 Individuals with Disabilities Education Act (IDEA)			
<input checked="" type="checkbox"/> Federal Grant: CFDA Number <u>84.181A</u> <input type="checkbox"/> State Aid Grant: Section Number _____ <input type="checkbox"/> 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.): Early childhood programs put children on the path to academic success and meeting the high school graduation requirements. Policies supported include the Policy Framework for Special Education, creating effective learning environments and family involvement.			
3. Background/Purpose of Grant Program: To provide assistance and support to the Office of Early Childhood Education and Family Services and the Office of Special Education and Early Intervention Services in conducting the regulatory activities required under IDEA, providing information for federal evaluation activities, providing activities and information aimed at supporting parents of children with disabilities, providing personnel development and technical assistance, and developing and distributing public awareness referral materials.		Type of Grant Program: (check one) <input checked="" type="checkbox"/> Competitive <input type="checkbox"/> Formula <input checked="" type="checkbox"/> Other: (specify below) Inter-Agency	
4. Target Population to be Served by Grant: Service providers, intermediate school districts, and children who have disabilities and their families.			
5. Eligible Applicants: Grantees currently holding the awards.			
6. Award Information:			
Amendment Date(s): _____	Amendment Amount(s): \$ _____	Total Recommended Award to Date: <u>\$1,743,985</u>	
Original Award Date: <u>11/02/09</u>	_____	\$ _____	
Original Award Amount: <u>\$1,743,985</u>	_____	\$ _____	
7. Program Office Responsible:			
<u>Office</u>	<u>Unit</u>	<u>Contact</u>	<u>Phone</u>
Early Childhood Ed. & Family Services	Infant/Toddler and Family Services	Vanessa Winborne	335-4865
This Form Was Prepared by: Cheryl Najm		Phone Number: 335-1580	

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OCT 26 2009

DEPUTY SUPERINTENDENT
CHIEF ACADEMIC OFFICER

8. OFFICE		
Office Director Approval Signature:	<u>Judy Bueh</u>	Date: <u>10-19-09</u>
Phone: <u>13592</u>	Comments:	
9. GRANTS OFFICE		
Grants Office Approval Signature:	<u>J. G. Finnan</u>	Date: <u>10/21/2009</u>
Comments:		
<input type="checkbox"/> Exhibit A Not Required	<input checked="" type="checkbox"/> Exhibit B Not Required	
10. DEPUTY SUPERINTENDENT		
Deputy Superintendent Approval Signature:	<u>Sally Vande</u>	Date: <u>10-27-09</u>
Comments:		
11. SUPERINTENDENT		
Superintendent Approval Signature:	<u>Mike</u>	Date: <u>10-28-09</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.

Michigan Department of Education
Office of Early Childhood Education and Family Services

2009-2010 Mandated Activities Under the
Individuals with Disabilities Education Act (IDEA 2004), Part C

Applicants Recommended for Funding

1. *Early On*[®] Michigan Interagency Collaboration Grant Awards under the FY 2009-2010 Part C Allocation to Michigan

<u>Recipient</u>	<u>Amount Recommended</u>
Inter-Tribal Council of Michigan	\$25,000
Michigan Department of Community Health	\$148,627
Michigan Department of Human Services	\$74,813
Total Amount Recommended	\$248,440

2. Training and Technical Assistance for Family Involvement

<u>Recipient</u>	<u>Amount Recommended</u>
The Arc Michigan/Michigan Alliance for Families	\$94,805

3. Comprehensive System of Personnel Development

<u>Recipient</u>	<u>Amount Recommended</u>
Clinton County RESA	\$713,719

4. Child Find, Public Awareness, and Information and Referral

<u>Recipient</u>	<u>Amount Recommended</u>
Clinton County RESA	\$340,000

5. *Early On* Qualitative Compliance Information Project

<u>Recipient</u>	<u>Amount Recommended</u>
Wayne State University	\$347,021

Grand Total Amount Recommended
\$1,743,985