

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 11/14/2006
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2009--2010 Title I, School Improvement Funds to Support Regional Assistance to High Priority Schools
 (year) (year) (title)

Type: Initial Amendment Continuation

Legislation Authorizing This Grant Program: Title I, Sec. 1003. School Improvement

Federal Grant: CFDA Number 84.010a 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.):

Priorities: Elevating Educational Leadership, Ensuring Excellent Educators
 Policies: Creating Effective Learning Environments

Attain substantial and meaningful improvement in academic achievement for all students/children with primary emphasis on high priority schools and students.

3. Background/Purpose of Grant Program: Type of Grant Program: (check one)

Provide funds to intermediate school districts to support initiatives to improve academic achievement in high priority schools. Funds will be used to provide professional staff and direct services to improve student achievement by implementing a school improvement, corrective action or restructuring plan, as required by the particular phase of each high priority school.

- Competitive
- Formula
- Other: (specify below)

4. Target Population to be Served by Grant:

Students and staff in high priority schools (Title I schools indentified for any phase of improvement due to proficiency).

5. Eligible Applicants:

Intermediate school districts with at least one Title I school within its boundaries that is identified for any phase of improvement due to proficiency level.

6. Award Information:

Amendment Date(s): _____	Amendment Amount(s): \$ _____	Total Recommended Award to Date: _____
Original Award Date: <u>10/5/09</u>	_____	\$ <u>7,000,000</u>
Original Award Amount: <u>\$7,000,000</u>	_____	\$ _____
	_____	\$ _____

7. Program Office Responsible:

<u>Office</u>	<u>Unit</u>	<u>Contact</u>	<u>Phone</u>
OEII	Academic Support	Linda Forward	3-8480

This Form Was Prepared by: Linda Hecker

RECEIVED

Phone Number: 1-2559

OCT 19 2009

DEPUTY SUPERINTENDENT
CHIEF ACADEMIC OFFICER

8. OFFICE		
Office Director Approval Signature:	<i>A. Mauplin Holloway</i>	Date: <u>10/8/09</u>
Phone: _____	Comments: _____	
9. GRANTS OFFICE		
Grants Office Approval Signature:	<i>Mary L. Chantel</i>	Date: <u>10-16-09</u>
Comments: _____		
<input type="checkbox"/> Exhibit A Not Required <input checked="" type="checkbox"/> Exhibit B Not Required		
10. DEPUTY SUPERINTENDENT		
Deputy Superintendent Approval Signature:	<i>Sally Vangel</i>	Date: <u>10-20-09</u>
Comments: _____		
11. SUPERINTENDENT		
Superintendent Approval Signature:	<i>Mike</i>	Date: <u>10-21-09</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.

**Title I, School Improvement Funds to Support
Regional Assistance to High Priority Schools
F.Y. 2009-10 Preliminary Allocations**

Intermediate School Districts (ISDs) Recommended for Funding

ISD Code	ISD Name	Allocation
09000	Bay-Arenac ISD	\$70,000
11000	Berrien RESA	\$140,000
12000	Branch ISD	\$70,000
13000	Calhoun ISD	\$140,000
18000	Clare-Gladwin RESA	\$70,000
17000	Eastern Upper Peninsula ISD	\$70,000
25000	Genesee ISD	\$490,000
33000	Ingham ISD	\$280,000
39000	Kalamazoo RESA	\$140,000
41000	Kent ISD	\$1,330,000
50000	Macomb ISD	\$280,000
51000	Manistee ISD	\$70,000
52000	Marquette-Alger RESA	\$140,000
56000	Midland County ESA	\$140,000
61000	Muskegon Area ISD	\$210,000
63000	Oakland Schools	\$350,000
73000	Saginaw ISD	\$350,000
80000	Van Buren ISD	\$70,000
81000	Washtenaw ISD	\$210,000
82000	Wayne RESA	\$2,380,000
STATE TOTAL		\$7,000,000