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FEB 10 2004

DEPUTY SUPERINTENDENT

GRANT OFFICE USE ONLY

Notification to ITS:

Initials:

GRANT AWARD APPROVAL FORM

1. Official Name of Grant Program:

Date of SBE approval of grant criteria 4/24/2003

2003 - 2004 Special Projects Grants Under Centers for Disease Control and Prevention Funding for FY 2004
 Initial (years) Amendment (title) Continuation (type)

Legislation Authorizing this Grant Program:

Federal Grant CFDA Number 93.938 State Grant Other (Private, Foundation)

2. Type and Purpose of Grant Program: (check one)

Special project school health negotiated grants will be disseminated to support coordination and support for the Youth Risk Behavior Survey; carry out a variety of major activities in the Coordinated School Health Program federal grant; provide trainings and workshops to parents, teachers, and agency staff; evaluate and provide coordination and oversight on specific projects named in the federal grant; develop a white paper; provide technical assistance; develop networks to enhance statewide efforts for school health collaboration; and, support the annual Wellness Conference.

Competitive
 Formula
 Other
Designated _____
(specify)

3. SBE Priorities and Policies that this Grant Program Supports: (check all that apply)

Priorities
 Integrating Communities and Schools
 Elevating Educational Leadership
 Embracing the Information Age
 Ensuring Early Childhood Literacy
 Ensuring Excellent Educators

Policies
 Bullying
 Character Education
 Creating Effective Learning Environments
 Family Involvement
 Safe Schools

Other

(specify)

4. Grant Categories (if not described in Item 2): NOT APPLICABLE

5. Target Population to be Served by Grant:

Michigan educators, collaborative partner agencies, and school-aged youth.

6. Total Funds Awarded:

Previously awarded to other applicants: \$594,971
New award: \$7,000
Total grants awarded: \$601,971

7. Eligible Applicants:

Designated applicants are Educational Materials Center/Central Michigan University, Michigan Department of Community Health, Michigan Education Special Services Association (MESSA), Governor's Council on Physical Fitness, Health and Sports/Michigan Fitness Foundation, Michigan Council for Maternal and Child Health, Michigan Congress of Parents, Teachers, and Students, School Community Health Alliance/Michigan Primary Care Association, Calhoun Intermediate School District, Michigan Inter-Tribal Council, Michigan AIDS Fund, Michigan Public Health Institute, and American Cancer Society.

8. Description of Priorities Given to Any Specific Population or Location: NOT APPLICABLE

9. Grant Administration:

Office
School Support Services

Unit
Coordinated School Health and Safety Programs

Contact
Elizabeth C. Haller

Phone
241-4284
335-0565

9617 579

10. OFFICE	Office Director Approval Signature: <u><i>Julius Stark</i></u>	Date: <u>3-6-04</u>
	Phone: <u>373-2374</u>	Comments:
11. BUDGET OFFICE	Budget Office Approval Signature: <u>N/A</u>	Date: _____
	Comments:	
12. GRANTS OFFICE	Grants Office Approval Signature: <u><i>Mary Ann Chartrand</i></u>	Date: <u>2/9/04</u>
	Comments: <u>Exhibits B and C are not required.</u>	
13. DEPUTY SUPERINTENDENT	Deputy Superintendent Approval Signature: <u><i>Jenny Hughes</i></u>	Date: <u>2-16-04</u>
	Comments:	
14. SUPERINTENDENT	Superintendent Approval Signature: <u><i>Tom Jallo</i></u>	Date: <u>2-18-04</u>
	Comments:	



INSTRUCTIONS:

- A. Complete items 1-10 on this form. The Grants Administration Unit will facilitate completion of items 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.
- 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 Grant Administration Unit.

**2003-2004 Special Projects Grants
Under Centers for Disease Control and Prevention
Funding for FY 2004**

<u>Applicant Recommended for Funding</u>	<u>Amount Requested</u>	<u>Amount Recommended</u>
Michigan AIDS Fund	\$5,000	\$5,000
Calhoun Intermediate School District	\$2,000	\$2,000