MICHIGAN DEPARTMENT OF LABOR & ECONOMIC OPPORTUNITY | WORKFORCE DEVELOPMENT

Perkins Postsecondary

Local Leadership Grant Application (2025-2026)
Career and Technical Education (CTE) Administrator

Authority: PL 115-224 Completion: Voluntary. Consideration for funding will not be possible if form is not returned. Questions regarding this form should be sent to Judy Becker at LEO-MiCC@Michigan.gov.

Educational Agency: _____

2-digit College Code: _____ Recipient Code: _____ Zip Code: _____

Address: _____ City: _____

Email: _____ Phone: _____

If the CTE Administrator's Address is DIFFERENT from that shown above, fill out information below:

CTE Administrator Name: _____

Address: _____ City: _____ Zip: _____

Email: _____ Phone: _____

If qualification credentials are not on file with Perkins Postsecondary, approval will not be granted until receipt and verification that the proposed appointee meets the qualifications.

Name of Approved Appointee or Proposed Appointee: _____

Position Title: _____

Dates for Program Year (enter MM/DD/YYYY): _____ through _____

Qualifications have been met.	☐ Yes	☐ No
Qualifications of proposed appointee on file with Perkins Postsecondary	☐ Yes	☐ No
Appointee is NEW. Complete and submit Administrator Work Plan	☐ Yes	☐ No
Appointee is returning CTE administrator and wishes to extend the Approved Work Plan currently on file with Perkins Postsecondary.	☐ Yes	☐ No

The Local Leadership grant application must be submitted annually.

CERTIFICATION

I certify the information in this application is true and correct to the best of my knowledge.

President Name: _____ Date: _____

Signature: _____ Email: _____

Send completed form to Perkins Postsecondary at LEO-MiCC@Michigan.gov and retain one copy