OG-2805 PINK Rev. 10/01

Michigan Department of Education OFFICE OF BUDGET, CONTRACTS AND GRANTS

Direct questions regarding this form to 31806.

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		
-		7410 01	SEC approval of graffic chieffa 4/24/2003		
2003 - 2004 Special Projects Grants L ☐Initial ☑Amendment (years) (title)	Inder Centers for Disease Contro	I and Prevention Funding for FY 2t ☐Conti (type)			
Legislation Authorizing this Grant Program	:	-			
☑Federal Grant CFDA Number	93 938	☐State Grant	Commence of the second		
2. Type and Purpose of Grant Program:	(check one)		☐Other (Private, Foundation)		
Special project school health negotiated gr	□Competitive				
the Youth Risk Behavior Survey; carry out a variety of major activities in the Coordi Program federal grant; provide trainings and workshops to parents, teachers, and a		has atsulave fiets variens has	☐Formula		
I provide coordination and oversight on spec	cific projects named in the federal	grant: develop a white nance:	⊠Other		
provide technical assistance; develop netw and, support the annual Wellness Conferen	rorks to ennance statewide efforts nce.	s for school health collaboration;	Designated (enacifu)		
			(specify)		
3. SBE Priorities and Policies that this (Priorities		k all that apply)			
☑Integrating Communities and Schools	Policies 530-41		☐Other		
l .	⊠Bullying				
☑Elevating Educational Leadership	Character Education		(specify)		
Embracing the Information Age	☑Creating Effective Le	earning Environments	•		
Ensuring Early Childhood Literacy	☐Family Involvement				
☑ Ensuring Excellent Educators4. Grant Categories (if not described in					
, , , , , , , , , , , , , , , , , , , ,					
5. Target Population to be Served by Gr	ant.				
Michigan educators, collaborative partner a	gencies, and school-aged youth.				
6. Total Funds Awarded:					
Previously awarded to other applicants:	New award:	Total grant	ts awarded:		
\$551,100	\$4 3,871	\$594,971			
7 Eligible Applicants	CV TANK KANDONING TAKAN MAKA				
7. Eligible Applicants: Designated applicants are Educational Mat	erials Center/Central Michigan Ur	niversity. Michigan Department of	Community Health, Michigan Education		
Special Services Association (MESSA), Go	vernor's Council on Physical Fitn	ess. Health and Sports/Michigan F	itness Foundation, Michigan Council for		
Maternal and Child Health, Michigan Congr Association, Calhoun Intermediate School I	ess of Parents, Teachers, and St District, Michigan Inter-Tribal Cou	udents, School Community Health ncil. Michigan Public Health Institu	Alliance/Michigan Primary Care te, and American Cancer Society		
Association, Calhoun Intermediate School District, Michigan Inter-Tribal Council, Michigan Public Health Institute, and American Cancer Society.					
8. Description of Priorities Given to Any Specific Population or Location: NOT APPLICABLE					
	Specific Population or Location	n: MNOT APPLICABLE			
	Specific Population or Location	in: MNOT APPLICABLE			
	Specific Population or Location	n: ⊠NOTAPPLICABLE			
	Specific Population or Location	n: ⊠NOTAPPLICABLE			
	Specific Population or Location	n: ⊠NOTAPPLICABLE			
9. Grant Administration:					
Office Unit		Contact	<u>Phone</u> 241-4284		
Office Unit School Support Services Coo			Phone 241-4284 335-0565		

10. OFFICE		
Office Director Approval Signature:	Sole Stack	Date: 1-10-04
Phone: 3-23/3 Com	ments://	· · · ·
	\mathscr{Y}	
11. BUDGET OFFICE		
Budget Office Approval Signature:	NA	Date:
Comments:	erske vilde de komment og komment og til de en vilde som en state en er træste til de en en en en en en en en En en	
12. GRANTS OFFICE	Control of the Contro	
Grants Office Approval Signature:	Mary and Charted	Dete: 1/23/0x
Comments:		,
	Exhibits Band C are not required	
13. DEPUTY SUPERINTENDENT		
Deputy Superintendent Approval Signature:	Carol Wolenberg	Date: 1-23-04
Comments:	8	
14. SUPERINTENDENT		
Superintendent Approval Signature:	7000	Date: 1-26-04
Comments:		
Communica.		

INSTRUCTIONS:

- A. Complete items 1-10 on this form. The Grants Administration Unit will facilitate completion of items 11-14.
- 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

Applicant Recommended for Funding	Amount Requested	Amount Recommended
Michigan Congress of Parents, Teachers, and Students	\$ 43,871	\$43,871