

**U.S. Department of Education  
Office of Career, Technical, and Adult Education  
Division of Academic and Technical Education**

**PERKINS V STATE PLAN FOR YEAR 2  
FY 2021 (July 1, 2021 – September 30, 2022)**

**REVIEW FORM**

State Name: Michigan

Cover Page: \_\_\_\_\_ 05/24/2021  
Name Date Approved

Narrative Descriptions: Sharon Head 05/24/2021  
Name Date Approved

Budget: Sharon Head 05/24/2021  
Name Date Approved

State Determined Performance Levels - Secondary: Sharon Head 06/11/2021  
Name Date Approved

State Determined Performance Levels - Postsecondary: Sharon Head 05/24/2021  
Name Date Approved

Date Reviewed and Approved by Program Administration and Accountability Branch Chief: \_\_\_\_\_  
Name Date Approved

Date Reviewed and Approved by Director Division of Academic and Technical Education: \_\_\_\_\_  
Name Date Approved

# State Plan, Program Year 2021–2022 Michigan

## Cover Page

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**A. State Name: Michigan**

**B. Eligible Agency (State Board) Submitting Plan on Behalf of State:**

Agency Name: Michigan State Board of Education

**C. Person at, or officially designated by, the eligible agency, identified in Item B above, who is responsible for answering questions regarding this plan. This is also the person designated as the “authorized representative” for the agency.**

1. Name: Brian L Pyles  
2. Official Position Title: State Director  
3. Agency: Michigan Department of Education  
4. Telephone: 517-335-5224  
5. Email: pylesb@michigan.gov

**D. Individual Serving as the State Director for Career and Technical Education:**

Check here if this individual is the same person identified in Item C above and then proceed to Item E below.

**E. Type of Perkins V State Plan Submission:**

- State Plan (FY 2020-2023)  
 State Plan Revision

**F. Submission of Perkins V State Plan as part of a Workforce Innovation and Opportunities Act (WIOA) combined State Plan-FY 2020-23:**

- Yes  
 No

**G. Governor’s Joint Signatory Authority of the Perkins V State Plan:**

Date Governor was sent State Plan for signature: 12/04/2019

- The Governor has provided a letter that they are jointly signing the State Plan for submission to the Department.  
 The Governor has not provided a letter that they are jointly signing the State Plan for submission to the Department.

**H. Lead Individuals Completing This Plan:**

Select the lead individuals completing the plan. If additional individuals without accounts will be completing the plan, return to the Submit Your Report page and click "Request Access" to submit a request for additional user accounts.

**a. Please select the individual responsible for the narrative descriptions in this plan:**

Jill Kroll

**b. Please select the individual responsible for the budget in this plan:**

Christine Black

**c. Please select the lead individual who may be contacted to answer questions about this plan:**

Brian Pyles

**2 State Administration****3 State Leadership** \$ 4351233.00

4 \$ 197600.00

\$ 120000.00

77600.00

\$ 0.00

5 150000.00

6 \$ 50000.00

7 36985481.00

8 \$ 1849274.00

9

\$ 21081724.00

13 Postsecondary Recipients \$ 14054483.00

14 **State Match (from non-federal funds)** \$ 2175617.00

Indicators	Baseline Level	FY 2021	FY 2022	FY 2023	FY 2024	Format
1S1: Four-Year Graduation Rate	96.75	95	95	95	95	Percentage
2S1: Academic Proficiency in Reading Language Arts	58.5	0	58.25	58.5	58.75	Percentage
2S2: Academic Proficiency in Mathematics	34.55	0	34.25	34.5	34.75	Percentage
2S3: Academic Proficiency in Science	0	0	0	0	0	Percentage
3S1: Post-Program Placement	96.45	75	80	95	95	Percentage
4S1: Non-traditional Program Concentration	19	19	19.25	19.5	19.75	Percentage
5S1: Program Quality – Attained Recognized Postsecondary Credential	3.4	3	5.5	7.5	10	Percentage

Michigan State Determined Performance Levels - Postsecondary

Indicators	Baseline Level	FY 2021	FY 2022	FY 2023	FY 2024	Format
1P1: Post-Program Placement	13.02	11.72	12.11	12.5	13.02	Percentage
2P1: Earned Recognized Postsecondary Credential	37.05	33.35	34.46	35.57	37.05	Percentage
3P1: Non-Traditional Program Concentration	16.51	14.86	15.35	15.85	16.51	Percentage

# State Plan, Program Year 2021–2022 Michigan

## State Plan Certification

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I certify that to the best of my knowledge and belief, all information and data included in this State plan submission are true and correct.

I understand that the use of the Personal Identification Number (PIN) supplied to me by the Department to certify and submit these assurances is the same as certifying and signing the document with a hand-written signature.

Signature of Authorized Individual (PIN):

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Title/Agency:

State Director - Michigan I

Date:

05/21/2021