



Request for School or Area Project

Form 423-03

Name:	School Phone #:
School:	Zone
Type of Project:	<input type="checkbox"/> Area Project <input type="checkbox"/> School Project
Name of Project	Location:
Begin Date:	End Date:
Attach a Project Proposal including the following: <input type="checkbox"/> A list of participants and their schools <input type="checkbox"/> A detailed description of project including: <input type="checkbox"/> How the project is aligned with Division goals <input type="checkbox"/> Interest and applicability to teachers <input type="checkbox"/> Benefit to student Learning	
Attach a detailed Budget: (Maximum payable is \$50/participating teacher) <input type="checkbox"/> The expenses and cost of related to the speaker(s) <input type="checkbox"/> The cost of consumable materials for use in the project <input type="checkbox"/> Expenses associated with organizing the project <input type="checkbox"/> Required media resources	
**Release time/costs for participants will NOT be covered under the School/Area Project	
Total Estimated Cost: _____	See claim information on Claim form 423-03(a)
_____ Application Date	_____ Signature of Applicant
_____ Date Received	
_____ Approved by Committee on this Date	_____ Signature of Professional Development Chair
**SEND PROPOSAL AT LEAST 4 WEEKS IN ADVANCE TO THE PROFESSIONAL GROWTH ZONE REPRESENTATIVE FOR COMMITTEE APPROVAL.	
Please send as ONE complete document.	