

## REQUEST FOR SCHOOL OR AREA PROJECT

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:
<p>Attach a Project Proposal including the following:</p> <ul style="list-style-type: none"> <li>A list of participants and their schools</li> <li>A detailed description of project including:               <ul style="list-style-type: none"> <li>How the project is aligned with Division goals</li> <li>Interest and applicability to teachers</li> <li>Benefit to student Learning</li> </ul> </li> </ul> <p>Attach a detailed Budget: <b>(Maximum payable is \$50/participating teacher)</b></p> <ul style="list-style-type: none"> <li>The expenses and cost of related to the speaker(s)</li> <li>The cost of consumable materials for use in the project</li> <li>Expenses associated with organizing the project</li> <li>Required media resources</li> </ul> <p><b>**Release time/costs for participants will NOT be covered under the School/Area Project</b></p>	
Total Estimated Cost: _____	See claim information on Claim form 423-03(a)
_____ Application Date	_____ Signature of Applicant
_____ Date Received by zone rep	
_____ Approved by Committee on this Date	_____ Signature of Professional Development Chair
<p><b>**SEND PROPOSAL AT LEAST 4 WEEKS IN ADVANCE TO THE PROFESSIONAL GROWTH ZONE REPRESENTATIVE FOR COMMITTEE APPROVAL.</b></p> <p>Please send as <b>ONE</b> complete document.</p>	