NAME_____ DATE_____

ADDRESS _____

BUILDING_____

GRADE LEVEL_____

NUMBER OF STUDENTS AFFECTED BY THE PROPOSAL _____

LENGTH OF PROJECT_____

AMOUNT REQUESTED_____

SUMMARY (In a few sentences summarize what the project proposes to do and the need it will fulfill.)_____

_____

_____

ACTIVITIES (What will you do?  What will students do?)_____

_____

_____

_____

RESOURCES (What will you need to implement the project?)_____

_____

_____

_____

RESULTS (What evidence do you expect to see of student learning?) _____

_____

_____

_____