

Project Award Application

Application Title:	Use this form as a guide. Attach additional pages as necessary.	
	Individual Project	Collaborative Project
Name of Applicant(s)		
Email Address		
School Building assigned		
Grade level [s]		
Project start date		
Project end date		
How will students benefit from this Project?		
Number of students affected directly		
Project description		
Project Participants (teachers, students, outside speakers, artists, etc.):		
How does this project strengthen learning for all?		

with the district's curriculum standards and instructional philosophy.	
Provide one (1) to three (3) SMART Goals (Specific, Measurable, Attainable, Results-oriented, and Time bound) for this project:	
List your Indicators of Success for this Project. [Evaluation]	
Budget Items [Attach proposed budget]	
Total Amount Requested	
Expenses by item: Please itemize the expenses associated with the project (i.e. services, supplies, equipment)	
Please attach a brief description of the inspiration behind this project.	
Applicant's Signature(s):	
Date:	
Principal's Signature indicates Suppo	ort and Awareness for the Project:
Date:	

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