



SPECIAL PROJECT GRANT APPLICATION

Deadline: December 31 or March 31. A secondary call for applications may be initiated for the March deadline.

PART 1: PROJECT OVERVIEW

Project Title

Professional Growth Network

Other professional growth networks involved in this project (if applicable):

Please select the purpose of the project:

- Support new and innovative professional growth opportunities for our members.
- Assist our network in the development of resources.
- Assist our network in developing a strategic plan.

Will the project already be in progress by December 31 or March 31?

- Yes
- No

If the project is in progress, indicate what state the project is expected to have reached by your application deadline date.

PART 2: CONTACT INFORMATION

Project Lead/Contact Person

Mailing Address

City

Province

Postal Code

Contact's Email Address

Contact's Phone

PART 3: FUNDS REQUESTED/FINANCIAL PLAN *Attach the details of the funds requested.**

A. Personnel

Total Cost

	Number	Release Time (Days)	Substitute Costs (Actual or \$270/day)	Total Cost
Teacher/Administrator	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>
Assistant/Vendor/Technician	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>

B. Materials, supplies, facilities, equipment rental, etc. (please specify)

C. Travel (please specify rate)

D. Services (e.g., secretarial, transcription, etc.) (please specify)

E. Other costs (please specify)

Total Funds Requested

* If this project receives Federation grants, it is expected that the funds are spent on the items indicated above. In the case of emergent expenses, please contact the Federation for approval prior to any purchases.

PART 4: PROJECT DETAILS

1. Describe how the project demonstrates one or more of the following characteristics:

Collaboration

Accountability

Identified benefits

Engagement with members, stakeholders and/or other partners

2. Project description and goals including (attach additional pages if required):

- Details of personnel activity on the project.
- Major activities required to carry out the project.
- Any innovative aspects of the project.
- Relevance of the project findings to teacher professional growth, teaching and learning.

3. Expected timeline for the project including planning the project, implementation of major activities, submission of final report and sharing of results.

4. Project communication plan
How does the project fit within the selected purpose?

How does the network intend to share the major results of the project with its' members? Other networks? Federation at large?

PART 5: ACCEPTANCE

It is understood all project activities outlined in this application and sponsored by the Federation's special project grants will be subject to evaluation and monitoring by the Federation.

One representative from each professional growth network involved in the project must sign below.

PROFESSIONAL GROWTH NETWORK

NAME	SIGNATURE	DATE
------	-----------	------

PROFESSIONAL GROWTH NETWORK

NAME	SIGNATURE	DATE
------	-----------	------

PROFESSIONAL GROWTH NETWORK

NAME	SIGNATURE	DATE
------	-----------	------

(Add networks as required.)

Please email to stf@stf.sk.ca.



SASKATCHEWAN
TEACHERS'
FEDERATION