



**WESTFORD SCHOLARSHIP AND GRANT COMMITTEE
SAG EDUCATOR GRANT APPLICATION, 2016-2017**

Complete this form and submit electronically to sag@westfordma.gov

The SAG Educator Grant Application is Due on January 31, 2017

Applicant Information:

Name(s): _____

Role: Teacher School Council School Committee

School(s): _____

Grade(s): _____

Job Title(s): _____

Contact email: _____

Contact phone: _____

Project Information:

Project Title: _____

Project Type: Program Event Equipment Supplies

Area: Fine Arts Liberal Arts Technology Other

Funding Requested: \$ _____

Individual awards will not exceed \$1,000. Awards may be made in addition to funds from other sources obtained by the applicant(s).

Project Schedule: _____

Semester and dates that program/event will occur or that equipment/supplies are required.

Approximate number of students who will directly benefit from this project: _____

Project Narrative:

1. Summarize the proposal. Describe the target audience and explain how the project will be executed, including dates and locations of key events or milestones. You may provide additional narrative on a separate sheet, but please concisely describe the proposal here.

2. Explain how the project will reach and benefit Westford students. What results do you expect, and how will you evaluate them? Include plans for promoting and publicizing the project.

3. If collaborating with organizations outside of the Westford Public Schools, list major qualifications of key personnel involved in this project. If collaborating with other staff members and/or volunteers, list their names and assigned roles. Attach additional pertinent information—resumes, references, reviews, press releases, and so on—as appropriate.

4. If this project involves purchasing equipment and/or supplies, please provide information about the manufacturer, product specifications, maintenance, and other pertinent detail. If specification sheets, reviews, or photographs are available, please attach them.

5. Explain how this project will enhance the existing curriculum/curricula. If the project has a sustainable impact (i.e., future students in the grade /school will benefit), please discuss.

Financial Information:

Provide a breakdown of total project cost.

Personnel:	\$ _____	Description: _____
Equipment:	\$ _____	Description: _____
Supplies:	\$ _____	Description: _____
Other:	\$ _____	Description: _____
Total Cost:	\$ _____	

Source of additional funds (if applicable): _____

Signatures:

Applicant's Signature Date

Classroom Teacher's Signature (if different from Applicant) Date

Curriculum Coordinator's Signature Date

Digital Learning Specialist's Signature (if applicable) Date

Building Principal's Signature Date

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Amount Approved: \$ _____

Committee Chair's Signature Date

***The Westford Scholarship and Grant Committee will require the winning applicant(s) to provide a brief written summary (including photographs, if appropriate) outlining how the grant award benefited the Town of Westford. The written summary and photographs may be made public to the Town of Westford.**