

ALBANY FUND FOR EDUCATION

School Innovation Program Project Request

Feel free to copy for additional projects

Date: _____

Name of School: _____

Name of Community Partner: _____

Principal: _____

Principal signature: _____

Project Title: _____

Amount Requested: _____

Project Description:

Budget Description:

What is the innovation you are proposing and how does it differ from current practice?

How many students, teachers, parents and other community members will participate in these projects?

What will the impact be on student learning and achievement and how will the results be measured? (Be as specific as possible here in terms of improved test scores, reading levels, student interests, etc.)

Who are the community partners in the project and what commitment have they made to the project?

Who is the "sparkplug", i.e. leader, for the project?

What other resources have you obtained?

Will the AFE funding help you leverage additional funds from other sources?

What options are there to continue the program long-term?

Project Coordinator: _____

Address: _____

Day Phone: _____

Home Phone: _____

Fax: _____

Cell Phone: _____

E-mail address: _____