

ALBANY FUND FOR EDUCATION

School Innovation Program Project Request

Please Note: An AFE Grant Committee member will work with you to maximize the impact of this grant.

Date: _____

Name of School: _____

Principal: _____

Principal signature: _____

Project Title: _____

Amount Requested: _____

(Grants awards generally range between \$100 and \$600. Multi-school or large-scale projects may be awarded up to \$2000, or, in very special circumstances to \$3000. An individual school can receive no more than \$3000 in a single calendar year.)

Name(s) of Community Partner(s): _____

(Community partners are those groups that will help make this project a success by contributing their time and/or resources. They are not vendors receiving payment unless significant in-kind contributions are involved.)

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

Project Description:

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

What will the impact be on student learning and achievement? _____

How will the results be measured? (Be as specific as possible here in terms of improved test scores, reading levels, student interests, etc.)

What commitments have been made/are expected from the community partners involved in this project?

Budget Description: (Please include all other resources you have 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: _____