



Application for CREATE School Professional Development Grant

Guidelines for Approval:

- Funding will be awarded based on the number of allocated instructional units at a school as determined by enrollment through the District Office. The amount requested **can be less than** but not exceed the maximum listed below. Your school is not guaranteed the full amount. Funding will be determined by the quality of professional development initiative (in accordance with Florida’s PD Standards) and how it supports the district focus areas.

1 – 30 teachers	=	\$1,000
31 – 50 teachers	=	\$1,500
51+ teachers	=	\$2,000

- All requests must be linked to at least one ACPS professional development initiative.
- Proposals must be submitted by September 15, 2017.
- All proposals must be reviewed and approved by the Office of Professional Development.

School: _____

Amount Requested: _____

*Check the appropriate box under **District Initiative** that supports the funding requested*

District Initiative: Closing Student Achievement Gap			
(√)	Quality Instruction	(√)	Meeting the Needs of all Learners
<input type="checkbox"/>	ACPS Instructional Framework	<input type="checkbox"/>	Building Relationships with Students
<input type="checkbox"/>	Data-Driven Instruction	<input type="checkbox"/>	Cultural Competency
<input type="checkbox"/>	Assessment for Learning (Formative)	<input type="checkbox"/>	Differentiated Instruction
<input type="checkbox"/>	Collaborative Planning	<input type="checkbox"/>	High Expectations for All
<input type="checkbox"/>	Deepening Content Knowledge	<input type="checkbox"/>	MTSS/RTI
<input type="checkbox"/>	Planning for Standards-Based Instruction	<input type="checkbox"/>	Parental & Community Involvement
<input type="checkbox"/>	Classroom Management/PBIS (Tier One)	<input type="checkbox"/>	Universal Design for Learning
<input type="checkbox"/>	Webb’s DOK/Gradual Release	<input type="checkbox"/>	Transforming Challenging Student Behavior
<input type="checkbox"/>	Other:	<input type="checkbox"/>	Other:

On a separate document, please provide the following information:

1. Describe the requested project or professional development. Include in your description an **itemized** estimate of costs for training materials, teacher stipends, training consultants, and/or substitutes needed.
2. How will this training impact **closing the student achievement gap** at your school?
3. How will you evaluate the effectiveness of the training?

Principal Signature

Date

Director of Professional Development Signature

Date