APPLICATION FOR SUMMER WORK STUDY PROGRAM

Name: ________________________________

Present Assignment/Location: ________________________________

Project Name: ________________________________

1. Project Description/Intended Outcomes
   Please describe your proposal. What is the purpose of this project?
   Include:
   • Rationale: Describe a specific student need (either academic or social/emotional) and how this project will address it.
   • Intended outcomes: How will your practice, or that of your colleagues change as a result of this project? How will student outcomes be impacted?

2. Solution proposed: Describe the process you will undertake to achieve the outcomes stated above and how the impact of this project on student learning will be measured. Include reference to how your work will be shared with colleagues.

3. Support Requested: Print the names of group members who will participate in this Summer Project (if applicable).

Signature of Principal/Supervisor: ___________________________________________________________

Note: Deadline for applications is Friday, May 21, 2021. All applications are to be submitted to: Cora Stempel, Deputy Superintendent (cora.stempel@dcboces.org). All projects must be completed and submitted to the Deputy Superintendent’s office by October 1, 2021.

Committee: Cora Stempel, Lisah Babh, Denise Dzikowski, Sam Rivera