

NCTM Associate Affiliate Grant **Deadline: Postmarked by June 1, 2009**

2009–2010 Guidelines

The **Associate Affiliate Grant** is an award up to \$2000 for an exceptional grant proposal.

Purpose

The Mathematics Education Trust (MET) Board of Trustees, based on the recommendation of the Affiliate Services Committee (ASC), awards the Associate Affiliate Grant to an NCTM Associate Affiliate. The purpose of this MET-funded grant is to support efforts of Associate Affiliates to serve mathematics teachers by—

- building membership and revenues;
- promoting creative projects that help make NCTM and its Affiliates be more visible to the public and educational partners; or
- supporting the strategic priorities of the National Council of Teachers of Mathematics.

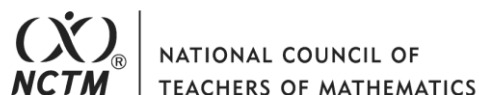
Criteria

Applications will be judged based on the following criteria:

- Does this project address a significant need?
- Does the project address an NCTM strategic priority?
- Is the project creative?
- Are the goals, objectives, activities, and procedures of the project clear?
- Is the project cost effective for the number of participants and its potential impact?
- Are criteria for assessing the effectiveness and impact of the project included?
- Is the grant application complete, including a DETAILED itemized budget?

Notes to Applicants

- The deadline for applications will be strictly adhered to in order to support thoughtful and timely committee consideration.
- Affiliates applying for a grant **MUST** be “In Good Standing,” including payment of the appropriate 2009-10 affiliation dues by June 1, 2009.
- Applicants must agree to write a brief summary of the project upon its completion.
- Applications for repeat projects by the same Affiliate will not be considered.
- Applications will not be considered for activities that have already occurred.
- Affiliates will need to repay any funds not used for the proposed grant project.
- “Grant Writing Guidelines and Tips” and a scoring rubric are available online in the Affiliate section of the NCTM Web site.
- Your ASC representative can assist with the application process by providing feedback and suggestions. Please take advantage of this service by contacting him/her well before the application deadline.



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NCTM Associate Affiliate Grant Deadline: Postmarked by June 1, 2008 2009–2010 Application

Please refer to the 2009–2010 Associate Affiliate Grant Guidelines when completing this application.

TITLE OF PROJECT: _____

Application Date: _____

Affiliate Name: _____

Start date of project: _____ Completion date of project: _____

GRANT CONTACT PERSON

AFFILIATE PRESIDENT

Name: _____ Name: _____

Address: _____ Address: _____

Home Phone: _____ Home Phone: _____

Work Phone: _____ Work Phone: _____

Fax: _____ Fax: _____

E-mail: _____ E-mail: _____

Affiliate Office Held: _____

Send correspondence to GRANT CONTACT PERSON AFFILIATE PRESIDENT

Affiliate Services Committee Regional Representative: _____

Grants will be awarded based on the following components:

Answer the following questions on separate paper. Label each answer. (See the attached Scoring Rubric.)

AFFILIATE STATUS Is your Affiliate In Good Standing?

RATIONALE What need is to be addressed? What NCTM strategic priority does the project address?

GOAL How will this project meet the identified need?

DESCRIPTION What are the components and implementation plans for this project? Include a timeline describing when the activities of each project will occur. (Include how the Mathematics Education Trust will be acknowledged for its contribution.)

EVALUATION What criteria will be used to assess the effectiveness and impact of this project? For example, Affiliate could use interviews, checklists, questionnaires, etc., for evaluation purposes.

BUDGET Attach a budget (maximum \$2000) indicating all anticipated expenses and revenues, as well as other source(s) of funding for this project such as cost sharing by the Affiliate, if applicable. Budget items must **not** include food or drink. Make sure this document includes an explanation of expense assumptions or estimations to support the stated budget

Send two copies of your completed proposal to Affiliate Services at NCTM Headquarters.

GRANT CONTACT SIGNATURE

AFFILIATE PRESIDENT SIGNATURE

Date: _____

Date: _____



NATIONAL COUNCIL OF
TEACHERS OF MATHEMATICS