MET BOARD OF TRUSTEES
School In-Service Training Grant (Pre-K–5)
Supported by the Clarence Olander Fund and NCTM

Applicant: ___________________________ # __________________ City/St ___________________________ Amt req: ________

**REQUIRED INCLUSIONS**

<table>
<thead>
<tr>
<th>ITEM</th>
<th>Yes</th>
<th>No</th>
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<tbody>
<tr>
<td>Complete proposal cover page, including NCTM Pre-K–8 school membership number with applicant’s signature</td>
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<tr>
<td>Proposal with clear objectives and timeline</td>
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<td>Budget (no funding for staff travel or equipment)</td>
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<td>Principal’s letter of support</td>
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<td><strong>All of the above must be present for the grant application to be further evaluated.</strong></td>
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A. **Proposal**

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1. Clearly states the need for in-service education program
2. Describes plan for targeted school(s) detailing scope and coherence of activities
3. Describes the qualifications of support staff or programs planned
4. Describe the mathematics content that will be keyed to needs for in-service
5. Specifies number of teachers affected by the program
6. Addresses inner city, rural, isolated, or multiethnic students

B. **Outcomes**

Outlines potential benefits for teaching and anticipated impact of learning

5

C. **Budget**

1. Includes an itemized and realistic budget

5

D. **Principal’s Letter**

1. Communicates ability of grantee, faculty, staff or students to achieve proposed goals
2. Verifies local financial support for the total program

5

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Evaluator(s): ________________________________________________________________

Strengths:

__________________________________________________________________________

__________________________________________________________________________

Weaknesses:

__________________________________________________________________________

__________________________________________________________________________

Recommendations:

__________________________________________________________________________

__________________________________________________________________________

**Recommended Action:**

Definitely fund _______ Possibly fund _______ Do not fund _______