

Maine Association for Health, Physical Education, Recreation and Dance
(MAHPERD)

INNOVATIVE GRANT PROGRAM

PURPOSE:

The MAHPERD Innovative Grant Program is designed to promote the development and dissemination of innovative and effective programs in health education, physical education, recreation and dance.

TERMS:

1. The applicant (project coordinator) is a current MAHPERD member.
2. The maximum award is \$1000.00.
3. The school administrative unit, school or agency must provide a match of at least 50% of the amount awarded by MAHPERD.
4. The project must be implemented within one year.
5. A final report including information on the completed project and an accounting of the MAHPERD funds expenditures is submitted to the MAHPERD Executive Director within 30 days of the project year.
6. Information regarding the project and its results must be disseminated to the MAHPERD membership through at least one of the following ways:
 - a. Article in the MAHPERD NewsletterOR
 - b. Present session at the annual MAHPERD Conference with other award winners

TIMELINE:

Distribution of Applications:	Fall 2008
Applications Due:	Postmarked on or before May 1, 2009
Applications Reviewed:	May/June 2009
Applicants Receive Notification:	June/July, 2009
Grant Year:	Aug. 1, 2009 - June 30, 2010
Final Report Due:	July 31, 2010

INSTRUCTIONS:

- Complete the Innovative Grant Proposal forms.
- Please print or type using only the space provided.
- **Submit the original and two copies** of the grant proposal to:
Dr. Steve Butterfield, 277 14th Street, Bangor, ME 04401

Proposals must be postmarked by May 1, 2009

For further information contact Steve Butterfield at steve.butterfield@umit.maine.edu

MAHPERD Innovative Grant Proposal

General Information:

1. School/Agency: _____
2. Project Coordinator: _____ Phone: _____
Address: _____
3. School Superintendent/
Agency Administrator: _____ Phone: _____
4. Project Title: _____
5. Total Amount Requested from MAHPERD: _____
6. Signature: _____ Date: _____
(Project Coordinator)
7. Signature of Support: _____ Date: _____
(School Superintendent/Agency Administrator)
8. E-mail Address: _____

Proposal Information:

SUBJECT

- _____ Health
- _____ Physical Education
- _____ Recreation
- _____ Dance
- _____ Combination of above

GRADE LEVELS (check all that apply)

- _____ Pre-school
- _____ K-5
- _____ 6-8
- _____ 9-12
- _____ Adult/College
- _____ Other (specify) _____

PROJECT COMPONENTS

- _____ Curriculum Development
- _____ Instructional Improvement
- _____ Evaluation/Student Assessment
- _____ Leadership Development
- _____ New Program
- _____ Family/Community Involvement
- _____ Technology in the Classroom
- _____ Other (specify) _____

POPULATION SERVED

- _____ General Student Population
- _____ At-risk Students
- _____ Drop-out
- _____ Parents/Family/Community
- _____ Special Education
- _____ Teachers/School Staff
- _____ Adult Education/Adults
- _____ Other (specify) _____

MAHPERD Innovative Grant Proposal

PROPOSAL ABSTRACT: (Summary Description of Proposal - 100 words or less)

I. STATEMENT OF NEED: (Describe the present situation and why it needs to be changed. Use specific data such as test scores, survey results, documented trends, etc. Refer to professional literature where appropriate. Use the space provided)

II. OUTCOMES: (Describe the change you expect will occur as a result of your innovative project/program. Use the space provided)

MAHPERD Innovative Grant Proposal (cont.)

III. PROJECT ACTIVITIES AND TIMELINE: (How will the project be planned and implemented and when will each project activity be completed. Use the space provided.)

MAHPERD Innovative Grant Proposal (cont.)

IV. EVALUATION PLAN: (How will you know you have achieved the desired outcome: Explain procedures you will follow, instruments you will use, and criteria for success. Use the space provided.)

V. DISSEMINATION PLAN:

MAHPERD Innovative Grant Proposal (cont.)

VI.A. BUDGET PLAN FOR MAHPERD FUNDS:

ITEM	DESCRIPTION	COST
Contracted Services		
Materials/Supplies		
Equipment		
Other (specify)		

TOTAL REQUESTED: _____

VI.B. MATCHING FUNDS: **Attach a letter** from the funding SAU/school/agency indicating that it will provide matching funds at least up to 50% of the funds requested from MAHPERD. The letter must state the exact amount that the SAU/ school/agency will contribute.