

OEA Member

2018 – 2019

Barb Drennan

Promising Practices Grants

*Information and
Member Application Form*



OEA Center for Great Public Schools (CGPS)

WORKING TOGETHER FOR PUBLIC EDUCATION



Barb Drennan Promising Practices Grants

OEA Member Application (2018-2019)

The Barb Drennan Promising Practices Grants provide an opportunity for UniServ Councils to support student learning and the professional development of OEA members in their local associations. The Washington County UniServ Council is awarding four (4) \$500 grants.

ELIGIBILITY Active OEA members are eligible to apply.

DEADLINES & INSTRUCTIONS

- **DEADLINE: Friday, January 11, 2019**
- Please either complete this application **OR** complete and print the interactive grant application form on the OEA website: www.oregoned.org/images/uploads/pages/Promising_Practices_Member_Form.pdf. This link also provides the option to download the form onto your own computer.
- **Submit grant application via Mail, Scan/Email or Courier.**
 - Mail: OEA/Grants, 20450 NW Amberwood Dr. #125, Beaverton OR 97006
 - Scan and Email to: mel.harmon@oregoned.org
 - HEA members can use District Courier to send to HEA Office, Attn: Mel or Jill
- Washington County UniServ Council Grant Committee will review the applications and will notify grant winners/issue award checks.

SUBMISSION REQUIREMENTS

- Part 1: Complete cover sheet**
- Part 2: Complete narrative**
- Part 3: Complete lists of unit and total cost (see F below)**

NARRATIVE

Answer the following questions using the headings below. Attach completed Narrative and return to UniServ Office.

A. Improving Student Achievement

What specific need will you address to improve student achievement?

B. Implementation

How will you use the grant to meet your goals?

C. Assessment

How do you plan to assess progress toward meeting your project goals?

D. Research

Explain/provide data and/or research that supports the anticipated positive results of your "practice."

E. District Support

Has your school district been approached for financial support, and if so, what was the response?

F. Cost Summary

Applications must include:

- 1) a complete list of requested items, and
- 2) unit and total costs

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MEMBER APPLICATION COVER SHEET (Attach to Front of Narrative Application)

Date of Application: _____

MEMBER INFORMATION

OEA Member's Name: _____

Home Street Address: _____

City, State, Zip: _____

Cell Phone _____

Home Email: _____

Occupation / Work Title: _____

Work Street Address: _____

City, State, Zip: _____

Work Phone: _____

Work Email: _____

GRANT INFORMATION

Project Title: _____

Project Site: _____

Street Address _____

City, State, Zip: _____

Phone: _____

Funds Requested:

\$250

\$500

If unsure, please check with your local UniServ office

LOCAL ASSOCIATION

Name (No initials please) _____

Education Association _____

NUMBER OF STUDENTS SERVED IN PROJECT

Preschool/Elementary _____

Middle/Junior: _____

High School _____

Post-Secondary _____

TERMS OF AWARD – SUMMARIES SUBMITTED

If this grant is awarded by your Local UniServ Office, I agree to the following:

1. To use the funds during this school year as indicated in this application.
2. To submit during this school year:
 - a. A short written summary of the completed project.
 - i. The summary should discuss the impact on teaching and learning with your students.
 - b. One (1) photo of the project in action by June 30, 2019.
3. I also agree that the application materials and grant summary can be used by OEA for public purposes to help other educators. I understand that application materials become the property of OEA and will not be returned. If the grant is awarded, I agree to share my project with OEA members in a variety of ways. Possible sharing opportunities include presentations at local Association meetings, writing an article for the local newsletter or *Today's OEA* magazine, inclusion on the OEA website or participating in OEA conferences.
4. Summaries to be sent to: Penny Hildreth at: penny.hildreth@oregoned.org in the OEA Center for Great Public Schools.

I agree with the TERMS of this grant

Member Signature _____

Date: _____

UniServ Consultant Signature _____

Date _____

UniServ #: _____