

LUNENBURG PTO REQUEST FOR FUNDING

APPLICATION MUST BE TYPED

? Please type your responses below and email it to: administrator@lunenburgpto.org ?
Applications will be accepted between 12/23/09 and 1/22/2010

APPLICANT INFORMATION

Applicant Name: Sandy Laserte and Dale Diamantopoulos.

School: Turkey Hill Middle School

Position: PE / Health staff

Contact Phone Number: 978-582-4110

PROJECT INFORMATION

Project Title: Music Update

Amount Requested \$735.00

Project Start/End Dates: Spring 2010

1. Project Description: Summarize the proposed project in the space provided. Describe who is the target audience; what will happen; when and where it will occur; and how the project will be executed. NOTE: You may provide additional narrative on a separate sheet of paper, but you must summarize the project here. Your answer in the space below may not exceed 750 characters. We are requesting curriculum updated materials (most of our videos are over 20 years old!). We teach four grades of Health. Curriculum adoption \$ was cut. Alternatives to our activities enhance the educational process. See attached sheet - 2. Describe the planning process for this project. What individuals and organizations have been involved as partners and/or advisors? How would partial funding impact this project? Your answer in the space below may not exceed 500 characters.

These materials were part of the curriculum adoption renewal process and there was no funding. These DVD's will last a long time and will be used by many students. Whatever can be funded would enhance our curriculum.

3. Explain how this project will reach and benefit the students of your school. How will you know the project is successful? Your answer in the space below may not exceed 500 characters.

Our society tunes into the screen - students relate to current information and visuals. Pre and Post open ended questions are traditionally given at the end of a unit of instruction which includes information provided through these resources.

_____	Signature-Type Name Here	Title	Date
FOR PTO USE SUBMITTED BY DEADLINE __ yes __ no			
\$ _____			
_____	Amount Approved	Signature of PTO	
Representative	Title	Date	