

General Information

Grant Number	156
Project Title	GOALS Gaining Occupational and Academic Life Skills
Please select the MAIN curriculum area your grant addresses.	Physical Education
Does your grant have a technology component? (Will you have technology equipment, software, etc. in your budget?)	<input checked="" type="radio"/> No <input type="radio"/> Yes
Primary Contact Information	
First Name	Audra
Email	audra_heins@allenisd.org
Last Name	Heins
Phone Number	469-450-9989
Campus	Rountree Elementary
Main Subject	Special Education
Grade(s)	<input type="text" value="Pre-K"/>
I have co-applicants.	<input type="checkbox"/>

Describe details of the project

Grant Number	156
Campus/Student Information	
Your campus:	Rountree Elementary
Will other campus' be involved/impacted by this grant?	<input checked="" type="radio"/> No <input type="radio"/> Yes
Your grade(s):	Pre-K
Will other grades be involved/impacted?	<input checked="" type="radio"/> No <input type="radio"/> Yes
Project Purpose	
<p>What is the problem, need, or opportunity that this grant will address? Explain what students will know and be able to do as a result of this project and/or how a problem will be addresses and/or how a situation improved because of the grant. (500 words or less.)</p>	
<p>Our campus has an early childhood population of 300-350 students who all share one outside play area. We are in need of more equipment to provide opportunities to teach our students hand-eye coordination, strength and balance. I want to purchase basketball and soccer goals along with playground balls to allow for more areas to promote motor development.</p>	
Project Description	
<p>How will the project or program be implemented? Describe activities and tasks. Who is the target population and in what ways will they benefit? (500 words or less.)</p>	
<p>The equipment purchased will be used 2-3 days a week by all early childhood students to teach catching, throwing and hitting a target.</p>	
Allen ISD Goals/ TEKS	
<p>Which Allen ISD goals/TEKS does this project support? Provide only two or three examples.</p>	

This GOAL program addresses every preschool physical education and pre-writing goal set by TEA.

Measurement

What specific measurements will be used to evaluate the effectiveness of the project? (500 words or less)

The effectiveness of the GOAL program will be assessed on many Individual Education Plans, as well as weekly teacher observation and beginning, middle and end-of-year reports on motor growth.

Teaching Methods

What teaching methods will be used to implement this project? (500 words or less.)

Teacher and student modeling for throwing, catching, kicking, rolling, and hitting a target.

Timeline

What is the project timeline and the date of implementation?

This program will begin in September of 2015 and continue through the life of the equipment.

Curriculum/System Support

Explain how this idea or project enhances/supports Allen ISD curriculum or existing systems.

This GOAL program allows for a fun and engaging way to promote balance, coordination, and strength to improve physical skills leading to reading, writing, and speech development.

Budget details

Budget Details ** All awarded funds will be available by September of the next school year.

Budget Item	Item Type	Unit Cost	Quantity	Total Cost
Beginner Basketball Portable Hoop	Instructional Supplies or Resources	129.0	3	387.0
Soccer Goals	Instructional Supplies or Resources	49.99	3	149.97
Sport Balls - Complete Set	Instructional Supplies or Resources	42.99	6	257.94
Taxes and shipping	Other Expenses	100.0	1	100.0

BUDGET TOTAL 894.91

Are there any additional funds available for this grant? Campus or District Funds? PTA funds? Let us know if you have or will be seeking funds from other sources to help with this project.

Additional funds? No
 Yes

Signature page and principal contact

Principal Approval Required

Please provide the Name and Email of your Principal

First Name	Last Name	Email Address(Completed)
Melissa	Pursifull	melissa_pursifull@allenisd.org

Applicant Signature

By entering my name below I signify that I understand that if I move within the District and have written the grant myself, I may take the grant with me to my school (as long as it is appropriate for my classes). If I have written the grant as part of a team, I will leave the grant behind with the team. If I leave AISD, I will leave the grant with the school for which I wrote the grant. As a condition of this grant, I will complete an evaluation form provided by the Foundation.

Signature Audra Heins

Date 03/27/2015

Principal's approval form

I certify that this would be a good use of funds for our school and this grant supports the district goals and/or our campus improvement plans. **Do NOT include any identifiers, such as: campus name, your name, teachers name or mascot **

No actions possible.

Comments

Motor development (large gross motor skills) is critical in Early Childhood. I support this grant proposal!

History and final disposition of application

State Change History

State Change *****
03/27/2015 08:46:35
Submitted

State Change *****
03/27/2015 08:48:15
Accepted

Grant Status

Grant Awarded Yes
 No

Award Amount 895