

General Information

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|---|--|
| Grant Number | 851 |
| Project Title | Rountree Running Club |
| 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 | Nichole |
| Email | nichole.duncan@allenisd.org |
| Last Name | Duncan |
| Phone Number | 214-418-6532 |
| Campus | Rountree Elementary |
| Main Subject | English/LA - Elementary |
| Grade(s) | 1 |
| I have co-applicants. | <input type="checkbox"/> |
| Social Media | |
| Please provide your work-related social media contact information. | |
| Facebook | |
| Twitter | Duncanroutree1 |
| Other (please specify) | |

Describe details of the project

| | |
|---|--|
| Grant Number | 851 |
| 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): | 1 |
| Will other grades be involved/impacted? | <input type="radio"/> No <input checked="" type="radio"/> Yes |
| Please select all grades that will be involved/impacted by the grant. | <input type="checkbox"/> 1 <input type="checkbox"/> K <input type="checkbox"/> 2 <input type="checkbox"/> 3 <input type="checkbox"/> 4 <input type="checkbox"/> 5 <input type="checkbox"/> 6 |
| Project Purpose | |
| What is the problem, need or opportunity that this grant will address? Describe the impact of this project on your students. (500 words or less.) | |

Childhood obesity is becoming an epidemic in today's society. 16% of all children age 9 and over are overweight or obese. This number has tripled since 1980. An additional 15% are considered at-risk for becoming overweight. Adolescents with no health

insurance or with public insurance such as Medicaid are more likely than those covered by other insurances to be overweight. (American Journal of Public Health, 93, 2105-2110.) Many of our students go home and spend hours or even days simply sitting in front of a television or video game. This grant would fund a walking/running club that would eventually serve as training for the Rudolf Run and the Allen Eagle Run. Our grant would help all students learn the positive benefits of exercise as well as improving their self-images.

Project Description

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.)

Rountree Runners would be open to all Rountree students K-6. (Initial funding would cover all expenses for 125 students.) We would meet 1 day weekly after school to walk or run as a group. The club would utilize various methods of motivating our athletes such as tracking miles on a map, competing for distance walked or ran, and training for various Allen walking/running events. The students would benefit physically, mentally, and emotionally, and ideally form habits that will help them to become active teenagers and adults.

Project Summary

Provide a brief summary for use on the Foundation's website and social media. (2-3 brief sentences)

Rountree Running club strengthens our students bodies and minds. Students learn to set goals for themselves and push themselves to achieve those goals. The beauty of running club is that they realize that they can do more than they thought they could. This is the benefit that will continue on after running club is over.

Allen ISD Goals/ TEKS

Which Allen ISD goals/TEKS does this project support? Provide only two or three examples.

The National Educational Standards for Health PK - 12 from the American Cancer Society state the following objectives which would be met by this grant:

- 6.2.1 Identify a short-term personal health goal and take action toward achieving that goal
- 7.2.1 Demonstrate health practices and behavior to maintain or improve personal health
- 8.2.2 Encourage peers to make positive health choices

P.E. K-6 3.b describe and select physical activities that provide opportunities for enjoyment and challenge;

P.E. K-6 3.c participate in moderate to vigorous physical activities on a daily basis that cause increased heart rate, breathing rate, and perspiration

Measurement

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

The effectiveness of this project would be determined by the number of students who participate in it and finish the program coming weekly to the club, and how many participate in the Allen Eagle Run.

Teaching Methods

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

The teacher sponsors will be modeling good running/walking behaviors. We will continue the use of our PBIS program to teach the students to show PRIDE (preparedness, respect, integrity, determination, and encourage others while running. We will be building community with our student runners. We will be teaching how to have healthy and fun competition with one another.

Timeline

What is the project timeline and the date of implementation?

The club will commence in October 2018 through March 2019.

The runners will be encouraged to participate in the Allen Eagle Run. Running Club will meet in May for a celebration and awards.

Curriculum/System Support

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

Rountree Runners gives our students alternatives to just going home to sit in front of the television or a video game. The program gives the kids a goal to reach for. It has helped many kids come out of their shell and be leaders in the classroom as well as the running field. Many of these kids are not aware of how talented they are and when they begin running and they are good at it their self esteem grows and transfers to the classroom.

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 |
|--------------------------|-------------------------------------|-----------|----------|------------|
| Completion award | Other Expenses | 3.0 | 125 | 375.0 |
| Medals for 1st, 2nd, 3rd | Other Expenses | 2.75 | 21 | 57.75 |
| Incentive Chart | Instructional Supplies or Resources | 7.19 | 7 | 50.33 |
| Labels | Instructional Supplies or Resources | 27.99 | 1 | 27.99 |
| Note Cards | Instructional Supplies or Resources | 2.99 | 1 | 2.99 |
| Toe Tokens | Other Expenses | 7.95 | 4 | 31.8 |
| Chains | Other Expenses | 13.0 | 1 | 13.0 |
| 26.2 tags | Other Expenses | 5.79 | 1 | 5.79 |

BUDGET TOTAL 564.65

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. (Not your name)

| First Name | Last Name | Email Address(Completed) |
|------------|-----------|--------------------------|
| Lara | Utecht | lara.utecht@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 Nikki Duncan

Date 02/01/2018

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

Supports the CIP to promote and nurture collaborative relationships essential for health and wellness.

History and final disposition of application

| State Change History | |
|----------------------|---|
| State Change | ***** 02/01/2018 14:48:30 Submitted |
| State Change | ***** 02/09/2018 17:35:55 Accepted |
| Grant Status | |
| Grant Awarded | <input type="radio"/> Yes <input type="radio"/> No |
| Award Amount | |