

**Mountain Plains Adult Education Association  
Teacher Innovation Scholarship**

TITLE OF PROJECT

\_\_\_\_\_

TOTAL FUNDS REQUESTED (*Maximum \$250*):

NAME: \_\_\_\_\_

POSITION: \_\_\_\_\_

ORGANIZATION: \_\_\_\_\_

MAILING ADDRESS: \_\_\_\_\_

PHONE: \_\_\_\_\_ FAX: \_\_\_\_\_

E-MAIL: \_\_\_\_\_

SIGNATURE OF PROGRAM DIRECTOR (*your supervisor*) \_\_\_\_\_

**I. What and why**

**a. Describe the project. What is the objective? [For research projects, what is the question?] What do you plan to do?**

**b. Why is the project needed?**

**c. Who and how many will benefit from the project? How will they benefit?**

**d. What community or geographic area will benefit from this project?**

