# 2014-2015 Distance Education Grant

## 

## Cover Page

Issue Date: April 14, 2014

Due Date: May 15, 2014

|  |  |
| --- | --- |
| **District/College Provider:** |  |
| WSN Program Title: |  |
| Address: |  |
| Total Student Enrollment: |  |
| K-12 Distance Education Student Enrollment: |  |

|  |  |
| --- | --- |
| Program Administrator: |  |
| Phone: |  |
| Email Address: |  |
| Mailing Address: |  |

|  |  |
| --- | --- |
| Amount Requested: |  |
| School Year: |  |

WDE Program Contact:

Scott Bullock, Distance Education Program Consultant

Support Systems and Resources Unit

Phone: 307-777-7418 FAX: 307-777-6221

E-mail: scott.bullock@wyo.gov

For WDE Use Only

|  |  |
| --- | --- |
| LEA #: |  |
| Award Amount: |  |
| Date Approved: |  |

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## A. Individual Course Design and Creation

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| **Course Information:** | | | | |
| Course Title: |  | | |
| Description: |  | | |
| Grade Level(s): |  | | |
| Delivery Method:  (Online, WEN video, hybrid, etc.) |  | | |
| Type:  (Core Course, Hathaway Success Curriculum, dual enrollment, Advanced Placement, etc.) |  | | |
| Comments:  (Optional field for additional information) |  | | |
| **Development Timeline:** | | | | |
| Benchmarks | | | Anticipated Due Date |
|  | | |  |
|  | | |  |
|  | | |  |
| 1. Delivery of WSN Documentation to the WDE DE Consultant | | |  |
| 1. Course Completion and Availability to Students | | |  |
| **Budget Narrative:** Itemize/justify specific expenditures | | | | **Total Program Cost:** |
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|  | | |  |
| **Total:** |  |

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## B. Additional Content Design and Creation

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| **Goals:** In this narrative state the goal(s) of the proposal including, but not limited to, what content will be created; why this content is necessary for the program or course; and who will be developing the material. Possible uses include improvements and/or modifications to current courses; curriculum and standards mapping; student handouts and worksheets; learning objects; professional development resources; enrollment documentation; student pre-enrollment survey or readiness assessment; website design; or other program components necessary to comply with requirements imposed under W.S. 21-13-330 and the Chapter 41 Distance Education Rules. | | |
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| **Budget Narrative:** Itemize specific expenditures described and justified in the goals narrative above. | | **Total Program Cost:** |
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| **Total:** |  |

## C. Professional Development

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| **Goals:** Provide a brief description of the specific goals and objectives of the professional development plan such as the source/origination of the training, rationale for this selection, number of participants, and anticipated results. Goals for the requested professional development opportunities must clearly define how the activities will directly benefit the distance education instructors and/or students involved with the program. Applicants must show their professional development goals are aligned to school, district, or college strategic plans, and/or goals. The anticipated results must be measurable, attainable, and realistic. Indicate the purpose and destination of any travel related to the professional development. Possible uses include course fees, conference registration, presentations, necessary software or resources, etc. | | |
|  | | |
| **Budget Narrative:** Itemize specific expenditures described and justified in the goals narrative above. For each professional development opportunity requested, the travel, lodging, or meals must each be listed separately from the fees or costs of the training, conference, etc. | | **Total Program Cost:** |
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| **Total:** |  |

## D. Program Evaluation

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| **Goals:** If the evaluation will be conducted internally, these goals must provide a description of the process and team; evaluative measures; outcomes produced; peer reviews; etc. If the evaluation will be conducted by an external service, describe the source/origination; the services provided; outcomes produced; and rationale for selection. | | |
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| **Budget Narrative:** Itemize specific expenditures described and justified in the goals narrative above. | | **Total Program Cost:** |
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| **Total:** |  |

## E. Program Accreditation

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| **Goals:** Provide the name of the accrediting institution and the rationale for its selection. | | |
|  | | |
| **Budget Narrative:** Itemize specific expenditures described and justified in the goals narrative above. | | **Total Program Cost:** |
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| **Total:** |  |

## F. Maintenance and Operational Needs

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| **Goals:** Clearly specify the intended use of funds and how these funds support the delivery of the overall distance education program. Possible uses include course management systems; server costs; and stipends for instructional support. Funds for maintenance and operational needs will not be awarded for leased course content, staff salaries and benefits, or student tuition reimbursements. | | |
|  | | |
| **Budget Narrative:** Itemize specific expenditures described and justified in the goals narrative above. | | **Total Program Cost:** |
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|  | |  |
|  | |  |
| **Total:** |  |

## Signature Page

|  |  |
| --- | --- |
| District/College Provider: |  |
| WSN Program Title: |  |

*The undersigned agree and support the development and implementation of the distance education program as outlined within this distance education grant request.*

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| --- | --- | --- | --- | --- |
|  |  |  |  |  |
| Program Administrator’s Name or  College’s Director of Distance Education |  | Signature |  | Date |
|  |  |  |  |  |
| District Superintendent’s Name or  College’s Assigned Representative |  | Signature |  | Date |
|  |  |  |  |  |
| Member of the Local Board or  College’s Assigned Representative |  | Signature |  | Date |