GREATNESS STEMS FROM IOWANS

GOVERNOR'S STEM ADVISORY COUNCIL

dedicated to building a strong STEM education foundation for all Iowans

2017-18 STEM Scale-Up Program Application

The application due date is March 3, 2017, 5:00pm Central time. Applicants will be notified on or about April 3, 2017.

Download the Commitment Signature Form and get it signed by the appropriate officials before you begin to apply and upload it at the end of this application below.

<u>NOTE:</u> * Indicates a required field.

1) Applicant STEM Region * (select one)
Visit www.IowaSTEM.gov/Regions if you are not sure of your school district's STEM region.

2) Applicant First Name: *

3) Applicant Last Name: *

4) Applicant Organization/School: *

5) Students in the following school district(s) will be served by this STEM Scale-Up Program (please list all school districts, one per line): *

6) Applicant Title in Organization/School: *

7) Applicant Organization/School Address: *

Applicant Organization/School Address 2:

8) City *

9) County *

10) Zip Code *

11) Applicant Phone Number (with area code): *

12) Applicant Summer Phone Number (with area code): *

13a) Applicant School/Organization E-mail: *

13b) Applicant Summer E-mail: *

14) Is your shipping address for STEM Scale-Up Program materials and equipment different from above? (Yes or no? If so, please list your alternate shipping address)*

15) Applicant's Lead Administrator Name: *

16) Applicant's Lead Administrator E-mail: *

17) Applicant's Lead Administrator Phone Number: *

18) Applicant's Institution Business Manager Name: *

19) Applicant's Institution Business Manager E-mail: *

20) Applicant's Institution Business Manager Phone Number: *

21) What is the 2016-17 program you are applying for?: * (Select one) *NOTE: If you are applying for more than one program, you will need to fill out an application for each program you desire.*

22a) Number of educators who will implement this program: * [   ]

22b) List the name, e-mail address, and grade level for each educator implementing:
If you have more than 10 educators implementing this program, please contact your regional STEM manager. You can find their contact information at www.IowaSTEM.gov/Regions

23) Who are your intended participants? (Select all that apply) *
- ☐ Pre-K
- ☐ Kindergarten
- ☐ First Grade
- ☐ Second Grade
- ☐ Third Grade
- ☐ Fourth Grade
- ☐ Fifth Grade
- ☐ Sixth Grade
- ☐ Seventh Grade
- ☐ Eighth Grade
- ☐ Freshman
- ☐ Sophomore
- ☐ Junior
- ☐ Senior

24a) Will this program be implemented in school or out of school (or both)? *

24b) How many classrooms, sections or groups will the program be implemented in?*

25) Estimated number of youth who will participate: * [   ]

26) Based on estimated youth participating (in #25), what percentage of these youth are on free/reduced lunch? _____ % (please refer to http://reports.educateiowa.gov/ for guidance of free/reduced lunch by Iowa Schools. Any questions about this report, please email them to info@iowastem.gov)

27) Based on estimated youth participating (in #25), what is the ratio of male to female (ie…50% male, 50% female) _____%, _____%.

28) Based on estimated youth participating (in #25), what is the ratio of race/ethnicity breakdown (ie…50% white/Caucasian, 50% non-white/Caucasian) _____% white/Caucasian, _____% non-white/Caucasian

29) If applying for more than one STEM Scale-Up Program, please rank preference for this program (e.g. 1st of 3, 2nd of 2) *

30) After reading the "What is Required" section of the program's one-pager, describe how you envision fulfilling the expectations of this program in the context of your learning environment, how your plan fulfills the program expectations, and how this program fits your school/organization's long term plans for STEM? (300 word limit) *

31) Given that the STEM Scale-Up Program of the Iowa Governor's STEM Advisory Council is intended to "seed" or start programs (not sustain), what are your school/organization's plans to sustain this program in future years in terms of costs for consumables, licensing, training, etc.? (300 word limit) *

32) The STEM Council established the priority to reach children of high need and/or underrepresentation (specifically ethnic/racial minority, gender distribution, free or reduced lunch, special needs and low academic performance). Please describe how your plan for implementation of the requested STEM Scale-Up program addresses the STEM Council's priority for equity in your school/community. (300 word limit) *

33) Sign and upload your Commitment Letter, which can be downloaded by clicking on the link under the "Required Materials and Resources" section at the beginning of this application. *
Files must be less than **2 MB**.
Allowed file types: **pdf doc docx**.