



## The Mary Alice Wilson Grant

Awards of up to \$500/ project

Name of applicant(s) \_\_\_\_\_

*Please note that you must be a member to apply for this grant.*

Position(s) \_\_\_\_\_

Name and address of person to whom correspondence should be addressed:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

e-mail address: \_\_\_\_\_

Date application submitted:: \_\_\_\_\_ Night phone number \_\_\_\_\_

*Grants received prior to October 15<sup>th</sup> will be considered at the next Board Meeting following that date. Grants received between October 16<sup>th</sup> and February 15<sup>th</sup> will be considered at the next Board Meeting following February 15<sup>th</sup>.*

School name & district to be served:

\_\_\_\_\_

Population to be served: *grade(s)/ number of students*

\_\_\_\_\_

Beginning Date \_\_\_\_\_ Ending Date \_\_\_\_\_

*Grants should be completed within a one year time period from the award.*

Title of Proposed Project:

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*In a short paragraph, describe your project in general terms.*

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**OBJECTIVES:** *Please be as specific as possible*

1. Mathematical:

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2. Interdisciplinary:

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3. Other:

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*If you have other objectives, please add them at the end of the form.*

## TASKS/TIMELINE FOR PROJECT COMPLETION

*Please list tasks in sequential order with approximate times for completion.*

1. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

2. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

3. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

4. \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

*If you are listing more than 4 steps, please add them at the end of the form.*

### EVALUATION INSTRUMENT:

*Please keep in mind what you have listed for your objectives in detailing what you will be using to assess your project.*

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\_\_\_\_\_

\_\_\_\_\_

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**PROJECT SHARING:**

*You may be asked to share your project at a MATHWEST meeting and/or a MATHWEST newsletter. In what other ways might you share the results of your project with mathematical educators?*

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**EXPENSES:**

*Grants may not be used for conference fees, transportation, or substitute costs. No more than 40% may be used for teacher stipends.*

Description	Amount
_____	\$ _____
_____	\$ _____
_____	\$ _____
_____	\$ _____
Total expenses:	\$ _____

optional: Amount of expenses paid by other sources \$ \_\_\_\_\_

Amount of money requested from Mathwest \$ \_\_\_\_\_

*Grants are awarded twice a year for up to \$500 for each grant.*