

SpeakUp
Student-led Teacher-facilitated Project
Project Report
2009-2010

SpeakUp Student-led Teacher-facilitated project

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Project Report Form

(Final Report Submissions are due June 11, 2010)

Please complete the following project template. Prior to submission, ensure that:

- All text fields are completed in full;
- The Student Success Leader's contact information is included at the bottom of the form;
- The principal's signature is included in the form below;
- Receipts for any expenditures are retained in your records.

IMPORTANT NOTE: Please ensure that you complete and submit one project report for every project approved.

Section 1

Board Name	<input type="text"/>	⇐ SELECT
School Name	<input type="text"/>	⇐ SELECT
School Address	<input type="text"/>	You may enter your board/school information if they are not in this list or incorrect.
What grade(s) are you in? <input type="checkbox"/> 7 <input type="checkbox"/> 8 <input type="checkbox"/> 9 <input type="checkbox"/> 10 <input type="checkbox"/> 11 <input type="checkbox"/> 12	Project category - Please check the appropriate category for your project. <input type="radio"/> School Culture <input type="radio"/> Classroom Culture	⇐ SELECT
Project Title:	<input type="text"/>	⇐ TYPE
Project ID:	<input type="text"/>	⇐ TYPE
Brief project description: (Max. 155 characters)	<input type="text"/>	⇐ TYPE
Project details: (Each field can accept a maximum of 1000 characters)		
Describe the project and the project goals.	<input type="text"/>	⇐ TYPE
Describe your project team. (e.g. number of students and their grades, number of teachers and their involvement, areas of responsibility for team members)	<input type="text"/>	⇐ TYPE

Who was impacted by your project and how?

← TYPE

(e.g. under- engaged students, students with special needs, at- risk students, English language learners)

Please note: A priority of this initiative is to involve under-engaged students.

Describe any successes in implementing the project.

← TYPE

Describe any challenges you experienced in implementing the project.

← TYPE

Section 2

Financial Report

Your school was allocated funding for your project. Please itemize all expenditures in the space below. Be sure to keep all original receipts on file in case supporting documentation is requested.

Total amount received from Ministry:

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Item category (e.g.: stationery, food, prizes)	Cost per item	Total cost
Total (\$)		

← **TYPE**

Principal Support and Student Success Leader Contact Information

Project ID:

Project Title

School Information

Student Success Leader's Information:

** Please ensure to copy the Student Success Leader in the e-mail when submitting your project report.*

Name

⇐ TYPE

e- mail

Your principal needs to complete this section in order to submit the report to the Ministry of Education. The completed report can be submitted via email, or via fax at 416- 327- 6749.

Principal's Information:

Name

⇐ TYPE

☐ I acknowledge that I am aware of this project and support it.

e- mail

Telephone

e- Signature

Date

How did you hear about SpeakUp projects?

⇐ SELECT

The Ministry continues to value and appreciate your feedback. If you have any additional comments and/ or suggestions, please provide them here.

Please email your completed report to:
SpeakUpProjects@ontario.ca