

Community Telecommunications Network Project/Program Proposal

Project Background (Why is this project important/needed?):

Identify the problem to be solved and provide evidence that supports that need

Identify how this project will meet the need

Identify how you might continue to support this project after CTN funding is over

K12 Only: How does this project meet Michigan Grade Level Content Expectations/Common?

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Project Plan:			
Goals Describe the project's goals <i>EX: Teachers and students will be able to share data wirelessly with one another while on field trips</i>	Objectives: Identify activities that support the goals <i>EX: provide to workshop participates EVDO cards and training to use wireless technology</i>	Outcomes: Describe expected learning outcomes including timeline for implementation <i>EX: 10 teachers will learn to use wireless connectivity by the end of March</i>	Target Audience: Describe learners <i>EX: 3rd grade classroom teachers</i>
Project Plan- Collaboration: Identify other project partners, contact information and their role in project implementation			

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Evaluation Plan (How will you know if you have been successful?)

Clearly identify how the project will be assessed for effectiveness of project.

Was the project successful from a content perspective? Present data to confirm

What is the impact of the project on your target group?

Was the project successful from a technology application perspective? Present Data to confirm

Describe recommendations for future use of these technologies

Did the project contribute to long-term collaboration? How?

Describe how this project might be incorporated into organizational activities.

Describe how you will share the learnings from your project

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Specific Project Request (include equipment request and budget if required)

Wireless equipment
Service costs during pilot project
Partial (with in-kind contributions) computer and/or other equipment costs

Board Meeting Date _____

Project # _____

Modified:
January 4, 2015

CTN ACTION:

Moved _____ **Approved**

Second _____ **Denied**

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Budget Worksheet

Total Project Costs:	CTN REQUEST	Inkind Contribution
• <u>Salary/Benefits</u>	_____	_____
• <u>Contracts/Stipends</u>	_____	_____
• <u>Supplies</u>	_____	_____
• <u>Equipment/Connectivity (as appropriate)</u>		
<u>## of Cards X ## of Months X Cost per month</u>	= <u>Connectivity Costs</u>	
<u>## of Cards X cost of Cards</u>	= <u>Card costs</u>	
<u>Other Equipment: (Specific Request)</u>	_____	_____
• <u>Other Expenses (detail)</u> (Rent, Parking, Marketing, ETC)	_____	_____
<u>Total Project Costs:</u>	_____	_____