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| Middle School Career-Connected Learning Partnership Grant | **Fund Code:** 424 |

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| **District**  |  |
| **School(s):**  |  |
| **Program Lead:**  |  |
| **Program Lead Email:** |  |

**Proposed number of students**

*It is expected that the full program will serve all students in the grade.*

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| Grade | Note | Number of students  |
| 5th  | Optional |  |
| 6th  | Required |  |
| 7th | Required  |  |
| 8th  | Optional  |  |

List all partner schools and/or organizations:

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List additional potential partners:

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How would this program relate to ongoing priorities and initiatives in your district?

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Do you anticipate offering a pilot program before June 30, 2023:

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Budget Narrative: Please describe how funds will be used.

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