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| **Name of Grant Program: GLEAM K-12** | **Fund Code: 509/510** |

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| **PART III – REQUIRED PROGRAM INFORMATION** |

**PART A – Contact and Basic Information**

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| **A1. District/LEA:** |  | | |
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| ***A2. Contact Person for this Proposal*** | **Name/Role:** | **Email:** | **Phone:** |

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| A3. Please reflect on the progress toward your GLEAM equity-driven goals during the 21-22 and 22-23 school year. Consider the needs of all students, especially those who have been historically underserved, and how the work of GLEAM thus far has represented a diverse group of stakeholders. [response length limit: 300 words] |
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| A4. Please speak to your plan for utilizing GLEAM funds for the 23-24 school year to ensure the practices adopted during this grant program are sustainable. How will you sustain programmatic improvements over time, including beyond the grant period? How will you transfer this work to schools and classrooms not included? Consider how the GLEAM grant intersects with and aligns to other district initiatives. |
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*Thank you, GLEAM districts, for the investment of time to prepare this proposal.*