



Proposal Deadline: December 1

Name: _____ AAPT Member ID#: _____

Date: _____ Home Phone: _____

Email: _____

School Information:

School Name: _____

Street Address: _____

City/State/Zip: _____

Phone: _____ Fax: _____

School Email: _____

Title of Project

Project Objective (*describe the expected outcome of your project*):

Project Plan

Describe how you plan to implement your project. Please be specific.

Project Schedule

Attach an outline of the schedule you plan in order to complete your project. NOTE: The project must be completed within one year after the grant is awarded. You will be expected to present a paper at an AAPT meeting within one year of completing your project. AAPT will provide you with \$200 to assist you with travel to the meeting when you present your paper.

