

The Nueva School Innovative Learning Conference Request for Educator Grant

Registrants requesting an educator grant must submit this completed form to ilc@nuevaschool.org or 650.344.9302 (Attn: Desiree Viray).

Funds for educator grants are limited. Recipients may receive full or partial grants. Decisions for professional development funds will be made on a rolling basis.

Preference will be given to educators from neighboring public school districts that either qualify for Title 1 funding or have a significant free and reduced lunch student population. Preference will also be given to recipients who have not received funds for this conference in the past.

Kindly complete both pages of this document and sign.

Last First Preferred Name Address: Number and Street City State Zip Code Email (during school year) Phone (during school year) Email (during summer break) Phone (during summer break) Grade level(s) you work with/teach/administer Years in education School District Name of School Grade Levels in School Is this a Title 1-funded school? What percent of your student population qualifies for free and reduced lunch? School's Address:	Name:				
Number and Street City State Zip Code Email (during school year) Phone (during school year) Email (during summer break) Phone (during summer break) Grade level(s) you work with/teach/administer Years in education School District Name of School Grade Levels in School Is this a Title 1-funded school? What percent of your student population qualifies for free and reduced lunch?	Last	First	Preferred Name		
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Grade level(s) you work with/teach/administer Years in education School District Name of School Grade Levels in School Is this a Title 1-funded school? What percent of your student population qualifies for free and reduced lunch?	Email (during school year)		Phone (during school year)		
School District Name of School Grade Levels in School Is this a Title 1-funded school? What percent of your student population qualifies for free and reduced lunch?	Email (during summer break)		Phone (during summer break)		
Grade Levels in School Is this a Title 1-funded school? What percent of your student population qualifies for free and reduced lunch?	Grade level(s) you work with/teach/administ	er	Years in educ	ation	
What percent of your student population qualifies for free and reduced lunch?	School District	Name of School			
	Grade Levels in School		Is this a Title 1-funded school?		
School's Address:	What percent of your student population qu	ualifies for free and red	duced lunch?		
	School's Address:				
Number and Street City State Zip Code	Number and Street	City	State	Zip Code	

Principal/Head of School Phone	School Phone
Principal/Head of School Email	
Amount of request:	
Explanation of request:	
Which day(s) are you interested in attending? □ Thursday only □ Friday only □ Thursday and Fri	iday
Your role at your school/program/institution	
Have you attended the conference in the past? ☐ Yes ☐ Nes, which year(s):	No
Did you receive a scholarship during your past attendance?	es □ No
Signature	Date