

2024 Lean into Learning

Innovative Technology Education Fund

Qualifying Information

The Innovative Technology Education Fund's Lean into Learning grant supports innovative approaches to teaching and learning through self-selected professional development. Innovation **requires fresh thinking**: a new possibility, opportunity or approach to learning and/or teaching that will inspire excitement and curiosity in your classroom or school. Successful LIL grants could reflect a willingness to go beyond a traditional conference.

NOTE: Read your application carefully before submitting; incomplete applications cannot be considered for funding.

Name of Conference, Subject Expert or Location(s) for Site Visit*

State name of conference, subject expert or city(ies) if a site visit

Character Limit: 100

School Zip Code*

Please enter 5-digit zip code

Please choose best description*

Choices

Yes, we are an accredited public, independent or parochial school in Missouri or Illinois.

No, we are not an accredited public, independent or parochial school in Missouri or Illinois.

Yes, we are a licensed K-12 charter school in Missouri or Illinois for three years or more.

Agreement Commitment*

I agree to complete and submit my feedback to ITEF **within 10 business days** of completing my PD. I understand failure to comply removes me from eligibility for a PD grant in the following year. My feedback will include a) my key learnings; b) how the experience will impact my pedagogy; c) whether this experience should be recommended for other educators.

Choices

Yes, I agree to comply with the feedback requirements.

No, I do not agree to comply with the feedback requirements.

Application

Name of School and District*

Character Limit: 100

Name of Educator(s) Attending PD*

List the following:

1. First and last name
2. Role/title
3. School email address
4. Preferred summer email address
5. Preferred phone number

Character Limit: 2500

Lean into Learning Awareness*

How did you learn about this grant opportunity? If from another educator or social media source, please specify.

Character Limit: 1500

Professional Development Selection*

What type of professional development are you selecting? Check all that apply.

Choices

- Attend a conference or training
- Bring an expert to your school or district
- Collaborative work session
- Visit a school

Professional Development Selection*

Why did you select this professional development experience?

Character Limit: 1500

Successful PD grants reflect creativity, expand an educator's knowledge and include at least one peer educator with whom the experience can be shared. ITEF believes sharing the PD experience expands thinking and increases the synergy and exploration. Therefore, ITEF requires an additional educator be included in your request. See instructions below for how to list a second educator within one application.

Bringing PD to your School or District*

We are bringing an expert to our school or district.

Choices

- Yes, we are bringing an expert.
- No, we are not bringing an expert.

Preparation for Bringing PD to your School or District

1. Who is the expert(s) you are inviting? List name, title, professional affiliation.
2. What is the date of your event?
3. How many people will be invited?
4. Where is the venue for the speaker?
5. What is the venue address? Does the venue accommodate social distancing if needed?
6. Is the expert you are inviting to facilitate your PD available to present online?
7. How will your district support this plan?

Character Limit: 5000

Attending a Professional Development Experience

List the name of the conference, event, school visit or virtual conference you wish to attend. Where and when is it occurring?

Include website links to the conference, school or other relevant information if available.

What?

Where?

When?

List the date your professional development experience begins and the date it ends.

Character Limit: 2500

Professional Development Participation

If you are attending a conference, event or visiting a school, or virtual conference/event, who from your district or school will also be in attendance? **List their name(s), title(s) and email.** If the per person cost is \$2000 or less, you may list another educator on your application. If the cost exceeds \$2000 per person, a separate application must be submitted. Your PD request **MUST NOT** exceed \$4000 per application.

Character Limit: 1500

Innovative Approach to Teaching*

How does this professional development experience support an innovative approach to teaching?

Character Limit: 1500

Sharing Learnings with Peers*

How will you share your learning with other educators and colleagues?

Character Limit: 1500

Professional Development Expenses*

List all expenses associated with your experience. State specific costs with links, quotes, etc where possible when listing fees, honorariums, etc. **State a total \$ amount for your request.** *Your PD request MUST NOT exceed \$4000 per application.*

Character Limit: 2500

Innovator Grant Application*

Will you apply for an Innovator grant in the upcoming grant cycle?

Choices

Yes, I will apply.

No, I will not apply.

E-payment Approver*

If your grant is approved, ITEF transmits payment electronically. State the **name, title and email** of the administrator who can approve e-payments. Note: ITEF will cover any administrative fees incurred by this transaction.

Character Limit: 1000

Letter of Recommendation*

You must include a signed letter of recommendation from a school administrator such as your principal or direct supervisor that demonstrates you have their support to participate in this professional development experience. **The letter must include their name, title and email on official school or district letterhead.**

File Size Limit: 2 MB

Thank you for your interest.

Thank you for your interest in the Lean into Learning program.

Thank you for your interest but you do not qualify for this grant at this time.