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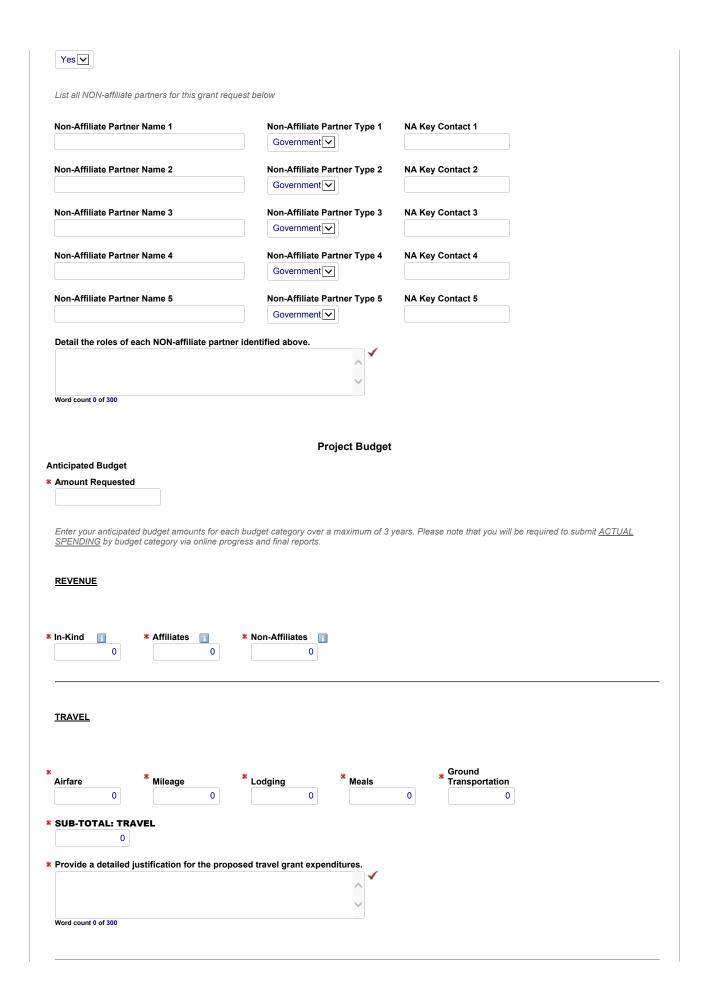
Affiliate Information	Request Information	Project Budget	Anticipated Results	Terms	Attachments	Review My Application
						satisfied with the contents of the rapplication yet, click Save & Finish Later.
			Affiliate Informa	ation		
Printer Friendly Ver * Required before	rsion E-mail Draft final submission					
Affiliate IRS Inform	nation					
The information in correct EIN numb		etrieved from the IF	RS database. If this is no	t your affil	iate, use the bac	k button in your browser to reenter the
IRS Employee ID	Number (EIN)					
Affiliate Legal Na	ame					
Doing Business as it appears on to						
Tax Registration	Date					
Affiliate General In * Affiliate Name The pre-populate name if different to	d affiliate name is the or	ganization name re n file. Federal Educ	gistered with the IRS for ation Association should	the EIN n	umber provided. he International A	You may change this to your local affiliate affiliate requesting the grant.
* Street Address		^				
		~				
* City\Province For non-U.S., pro	vide state, province, teri	ritory, county as req	uired			
* State Non-U.S. affiliates	s select "Non-U.S."					
- Select One -						
* Country						
- Select One -	V					
* Postal Code						
* Affiliate Type	* Membership	Density * Ar	e you a Local Option l	JniServ?		
- Select One -	- Select One	e - 🗸	∕es ∨			
* Number of Affilia	ite Members * Nu	ımber of Potential	Affiliate Members			
Local Affiliate Lead	dership Contact					
			affiliate leader's contact cutive Director) is pre-po			you may skip this section.

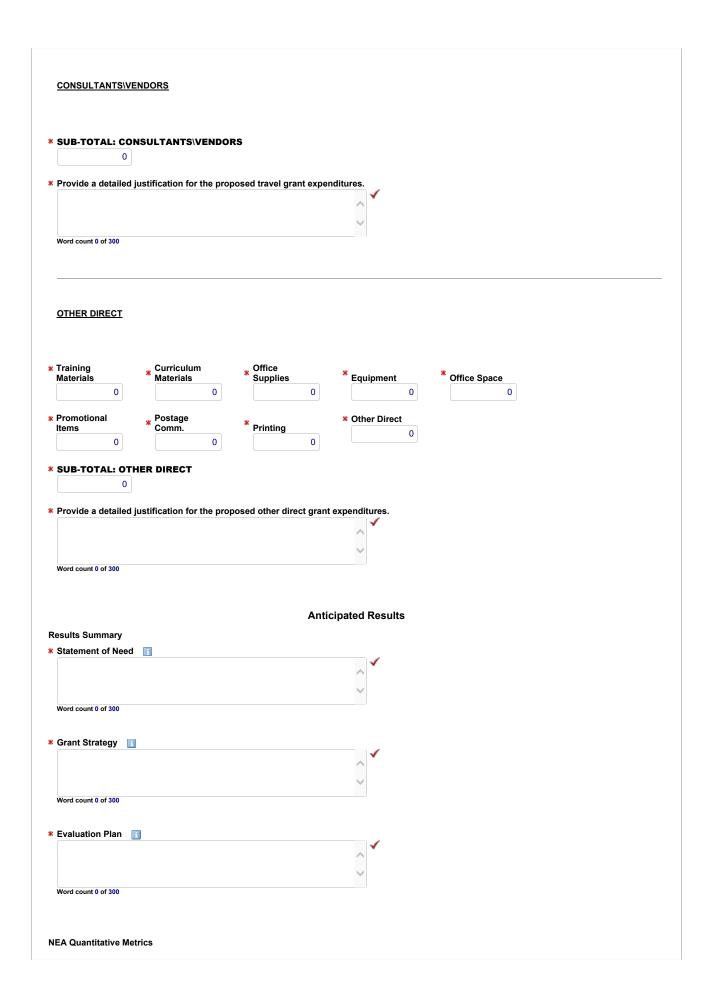
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Work City\Province					
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Work Postal Code					
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filiate Partners Will you be partnering w Yes	ith other NEA a	iffiliates on this	s project?		
Will you be partnering w					
Will you be partnering w Yes☑		rs for this grant I		Affiliate Key Contact 1	
Will you be partnering w Yes List all NEA state and local		rs for this grant I	request below.	Affiliate Key Contact 1	
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7/22/2020							
Project Title							
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Nord count 0 of 100				~			
Total Request Amou	nt						
s your State Affiliate	aware of this grant	application?	Request Type	e/Status			
Yes			Contributions	s-Read Across Americ	ca-In Review	▽	
quest Primary Grant	t Contact						
		atad from the last	application you	submitted Please up	data as annlis	abla ta ansura au	ır records are up to date.
rne imormation in this	section is pre-popula	ited iforti the last	application you s	submitted. Flease upt	iale as applic	able to elisure ou	ii records are up to date.
Prefix	First Name	Middle	Name\Initial	Last Name		Suffix	
- Select One -						<none></none>	
Title							
inc							
Work Address							
Work State For Federal Education	Association select "N	Non-U.S."					
	n Association select "N	Von-U.S."					
- Select One -	Association select "N	Von-U.S."					
For Federal Education	Association select "N	vlon-U.S."					
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For Federal Education - Select One - Work Country - Select One - Work Postal Code E-mail Work Phone Mobile Phone	Extension v	work Fax	r affiliate? If yes	i, has this been disc	ussed with t	he manager of ti	ne impacted staff?
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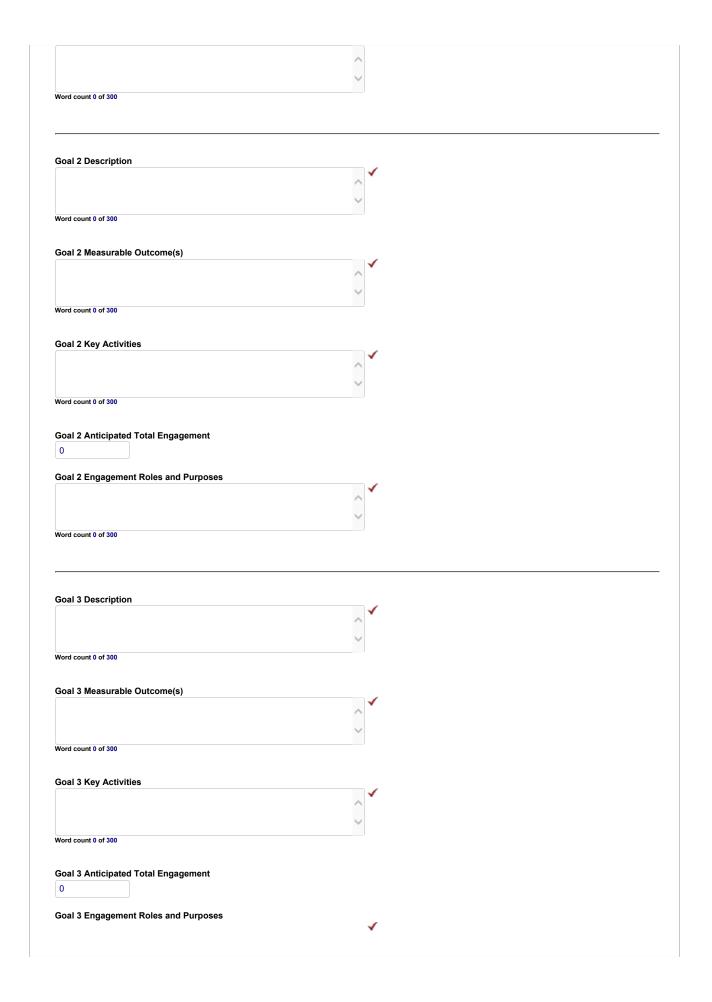
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Word Count of Groot	
* How does the event/activ	rity to be funded by NEA RAA event grant fit in the affiliate's overall initiatives?
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	→
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Describe the proposed evaluation of Diverse Reader	vent/activity to be funded by the NEA RAA Event Grant and how it will help highlight the RAA theme of "Celebrating a s."
	^
	~
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What is the location of you	our proposed event(s)/activity?
	∀
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W What I and Annaistions	and Sahaal(a) will be involved?
Wildt Local Associations	and School(s) will be involved?
Word count 0 of 300	Y
word count 0 or 300	
* How would you use the p	proposed activity as a membership organizing opportunity?
	✓
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* Describe the plan for inve	olving parents, community members, partners and others.
	^ *
	∀
Word count 0 of 300	
* Geographical Area Serve Select the State or Country	d by the grant? that is <u>MOST</u> impacted.
- Select One -	
* Membership Category(ies	s) involved in the grant?
☐ Aspiring Educators	0 %
☐ Active Professional	0 %
☐ Higher Education	0 %
□ESP	0 %
Retired	0 %
□ Lemen	<u> </u>
Strategic Objectives	
Strategic Objectives * Which one of the NEA Go	pals is most aligned with the purpose of your grant proposal?

Select One -	
lect up to five keywords (out of 5)	0) that further describe your grant program content and focus:
Affiliate leadership development	,,
Assessment of student learning	
Bully free	
Career pathways/career continuun	1
Centers for teaching and learning	
Classroom management	
Closing the achievement gap	
College and career ready standard	ls/programs
Community outreach and engagen	nent (parents, family, community)
Community schools	
Contract waivers and flexibility	
Cultural competancy/culturally resp	ponsive pedagogy
Curriculum standards and/or devel	opment
Distributive leadership	
Early career induction/orientation	
Educator evaluation/effectiveness	
English language learners	
ESP career growth continuum\grov	wth models
ESP early career orientation	
ESSA	
Gifted and talented	
Improving instruction/instructional	strategies
Instructional leaders	
LGBTQ/SOGI	
Literacy	
Mentoring/coaching	
NBCT/jump start	
New leaders development	
PA/PAR	
Policy change/contract waiver Pre-service teaching	
Priority schools	
Professional learning/professional	communities
Recruitment of educators of color	communities
Recruitment of educators	
Residency	
Restorative justice	
Retention in the profession	
Safe and healthy schools	
School improvement	
School to prison pipeline	
Social justice	
Social/emotional justice	
Special education	
Student learning objectives	
Student mentoring	
Student success	
Unconscious bias	
Virtual professional development	
☐Whole school systems learning	
· ·	
-Affiliate Partners	
II you be partnering with any non	-affiliate organizations on this project?





Provide values for all applicable quantitative metrics below. For those metrics not applicable to your grant request, leave default value of zero (0).
If awarded, actual figures will be collected as part of regular progress reports.
* Anticipated # Members Engaged 0
* Of those members engaged, the anticipated # that takes part in other/additional union activities, programs, and/or events
0
* Anticipated # Members Recruited
0
* Anticipated # of Sharable Resources Developed
NOTE: These resources are expected to be shared with NEA.
0
* Anticipated # Community Stakeholders Engaged
e.g., family, community\local leaders
0
* Anticipated # Leaders Identified
0
Program Specific Quantitative Metrics
* Anticipated # Facebook Page Followers
0
* Anticipated # Twitter Followers
0
Andisinated # Venture Channel Visuare
* Anticipated # Youtube Channel Viewers 0
Grant Specific Metrics
Please provide detail for up to 8 goals specific to this grant request.
Goal 1 Description
- Court - Bossington
Word count 0 of 300
Word Count v or 300
* Goal 1 Measurable Outcome(s)
_ \ ✓
Word count 0 of 300
* Goal 1 Key Activities
→
Word count 0 of 300
* Goal 1 Anticipated Total Engagement
0
* Goal 1 Engagement Roles and Purposes
◆ Gual I Engagement Roles and Pulposes



Terms IEA GRANT TERMS 1. Only NEA affiliates are eligible for these NEA grants. By applying for this grant, you affirm that your affiliate is an NEA affiliate subject to the requirements of the NEA Constitution and Bylaws. 2. Record all member recruitment and engagement data (one on ones, new members, and new leaders) in My Workers VAN, NEA360, or another mutually acceptable and accessable destabase that allows the information to be appended to the member's profile. 2. Record all member recruitment and engagement data (one on ones, new members, and new leaders) in My Workers VAN, NEA360, or another mutually acceptable and accessable destabase that allows the information to be appended to the member's profile. 2. Record all member recruitment and engagement data (one on ones, new members, and new leaders) in My Workers VAN, NEA360, or another mutually acceptable and accessable destabase that allows the information to be appended to the member's profile. 3. Progress reports are due electronically in the format provided, within 30 days of completion of the event or every six (s) months if you undertake a year-long campaign. This includes budget reports completing the actual expenses incurred during grant implementation with the original budget. If significant changes are made, the primary grant contact should contact their assigned NEA liation. 3. Affiliate badewine will sharps reported meterials, and key learnings with other term, or if there has been a lack of progress. If the grant term needs to be aftered, the affiliate should contact their assigned NEA grant liaison. 4. Progrant funds received, will be spent by the end of the grant term, in accordance with the proposed goals, program, and budget. NEA was also assigned to each avancted grant. The affiliate selectronically leg., virtual events and the member of the progress. If the grant term needs to be aftered, the affiliate should contact their assigned NEA grant liaison. 4. Progrant funds received, will be spent by the end of the grant term, in acc		^
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Verify Name of Person Au	thorized to Agree to Grant Terms	
	Attachments	
	There are no files attached.	