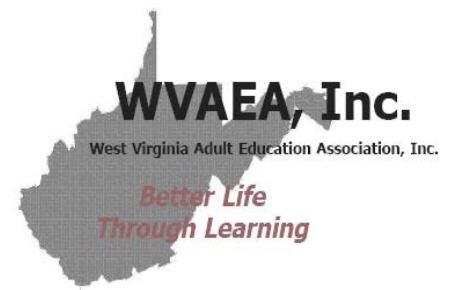


ABE/Literacy Teacher/Tutor Professional Development Grant (Guidelines)



1. Teacher/Tutor must be a current active member of WVAEA, Inc.
2. Program must be a current Grantee of the WV Department of Education Office of Adult Education and Workforce Development or an affiliate of Literacy West Virginia.
3. Program must agree to submit an article to Networks regarding this event and its outcomes.
4. The public outreach committee will review all applications and, if approved, the teacher/tutor will be sent a check *up to* the amount of \$250. (*Some grants may be more or less than that based upon the findings of the committee and the availability of funds.*)
5. Grants may be used for fall and/or summer professional development conference(s), COABE national conference, COABE regional institute, GED® Examiners conference, TESOL, NAASLN, college courses, online courses, etc.

The **ABE/Literacy Teacher/Tutor Professional Development Grant Application** must be electronically submitted to:
kwinter@access.k12.wv.us

or mailed to:
Kathy Hollingsworth, Executive Director
WVAEA, Inc.
RESA Three, 501 22nd Street
Dunbar, WV 25064

ABE/Literacy Teacher/Tutor Professional Development Grant

(Application)



Name: _____ Date: _____

Job Responsibility: _____

Name of Program/Center: _____

Mailing Address: _____

Email Address: _____ Phone Number: _____

If this grant is awarded:

1) the check should be made payable to: _____

2) the check should be mailed to (address): _____

PD Activity Requested:

(Please circle/highlight one only)

- Fall ABE Conference
- Summer ABE Institute
- COABE
- COABE Regional Institute
- GED Examiners

TESOL

NAASLN

College course (name): _____

Online course (name): _____

Other (please specify): _____

Do you currently have a line item for this in your State approved budget? Yes No

If so, how much of this money have you allotted for this particular activity? \$ _____

(You will not be penalized if no existing funds have been allocated toward this activity. We only need this information to determine how the WVAEA, Inc. grant can best suit your needs.)

Please complete the following information:

Line Item	Cost	Amount Allocated From Your Current Budget (if applicable)	<i>For WVAEA, Inc. Use Only</i>
Registration/tuition			
travel:			
1) airfare			
2) round-trip mileage			
lodging			

Why do you want to participate in this activity? (Please limit your response to space provided)

How will what you learn be utilized within your program? (Please limit your response to space provided)

Will you agree to:

- | | | |
|---|-----|----|
| 1) Conduct a session at the summer and/or fall conference to share what you learned from attending this conference? | Yes | No |
| 2) Submit an article to <i>Networks</i> regarding how what you learned can be applied to an ABE/literacy program? | Yes | No |
| 3) Become an active member of a WVAEA, Inc. committee of your choice? | Yes | No |

applicant's signature

date

Please submit this completed form to:
 Kathy Hollingsworth, Executive Director, WVAEA, Inc.
 RESA III 501 22nd Street
 Dunbar, WV 25064

For WVAEA, Inc. Use Only

Amount approved \$ _____

Signature of president _____

Signature of Public Relations Committee chair _____