

**AFT Innovation Fund**  
**Phase One Application**

Complete this Phase One Application and send to the AFT Innovation Fund via fax (202/393-7481); submit online at [www.aft.org/innovate](http://www.aft.org/innovate); or mail to: AFT Innovation Fund, American Federation of Teachers, 555 New Jersey Ave. N.W., Washington, DC 20001 no later than **May 25, 2009**.

**Affiliate Information**

Affiliate Name \_\_\_\_\_ Local No. \_\_\_\_\_

Affiliate President \_\_\_\_\_

Address \_\_\_\_\_

Phone \_\_\_\_\_ Fax \_\_\_\_\_

E-mail \_\_\_\_\_ Web site \_\_\_\_\_

**Preferred mode of contact :** \_\_\_\_\_

Amount Requested \* \_\_\_\_\_

\*Grant will be awarded up to \$200,000.

**Will this be a(n):**

Planning Grant

Implementation Grant



**Affiliate members include (check all that apply)**

- PSRPs  Teachers
- Other (please specify job categories) \_\_\_\_\_

**Cycle One funding priority areas are listed below (see Attachment A for details). Check the priority area of your idea or project:**

- Design new systems that cultivate effective teaching systemwide
- Develop professional pathways and new compensation systems that enable educators to have different roles, responsibilities and rewards
- Address out-of-school learning factors by leading the development of high-quality, scalable and adaptable public school options in urban education
- Other/unanticipated breakthrough innovation ideas (blow us away!)

**What type of innovative idea is this? (Check all that apply.)**

- Cutting-edge approach new to the district
- An approach that hasn't been tried anywhere
- Transfer of an innovation from another field to an education context
- Scaling up an "exception to the norm" project with a proven track record to become the norm
- Other (please explain) \_\_\_\_\_

**1. What is your innovative idea?**

**2. How will you measure the success of your venture?**

**3. Who will staff this venture, and what unique experiences and skills will your staff bring to this proposal?**

**4. How much time can your union devote to this new endeavor?**

**5. What new partnership will you create, or how will you expand current partnerships through this initiative?**

**6. What is the capacity and willingness of the district and/or other partners to support your idea?**

**7. How is your idea sustainable and adaptable?**

**Local president's signature\*** \_\_\_\_\_ **Date** \_\_\_\_\_

*\*All applications require the support of your AFT local union president prior to submission.*