STEM BEST® Program Application STEM BEST + High Demand

(2023-24)
A college of Phot Manager
Applicant First Name:
Applicant Last Name:
Applicant Cabaal Emails
Applicant School Email:
Applicant Phone Number (with area code):
Lead School Type (Public or Private):
City:
Project Lead First Name:
Project Lead Last Name:
,
Project Lead School District:

Project Lead Title:

Project Lead School Address:
Project Lead School Address 2:
Zip Code:
Applicant STEM Region:
County:
Project Lead Phone Number (with area code):
Project Lead School Email:
School Fiscal Agent/Business Manager First Name:
School Fiscal Agent/Business Manager Last Name:
School Fiscal Agent/Business Manager Phone Number:
School Fiscal Agent/Business Manager Email Address:
Communication Official First Name:

Communication Official Last Name:
Communication Official Phone Number:
Communication Official Email Address:
Participating School Information:
School District 1 Information:
Who are your intended participants? Grade Levels:
Was your school district/organization previously awarded a STEM BEST® grant? If so, be sure to use the executive summary below to explain how this proposal expands upon that award, improving upon your previously funded model.
Executive Summary: In 500 words or less, provide an overview of your proposal that identifies major partners, lists broad goals/strategies, and accounts for the student populations to be served through the BEST program:
The following questions pertain to the Program's Student Impact Goals.
Estimated number of students who will participate
Based on the estimated number of students participating, what percentage of students do you anticipate receive free/reduced lunch? (round to nearest whole

number) (please refer to https://iowastem.org/STEM-BEST-links for guidance of
free/reduced lunch by Iowa Schools. Any questions about this report, please email
them to info@iowastem.org)

Based on the estimated number of students participating, what percentage of students do you anticipate will be female? (round to nearest whole number)

Based on the estimated number of students participating, what percentage of students do you anticipate will be racial groups historically underserved in STEM? (round to nearest whole number)

1. Identify the underserved groups in your community and describe the strategies for inclusion of these underserved groups in STEM (ethnic/racial minorities, students with disabilities, students of poverty, women in engineering and computational science fields, men in the health, life science and early childhood fields, etc.).

https://iowastem.org/STEM-BEST-links

- 2.1 Describe how you will create and implement career-linked opportunities for students to actively connect with community employers for personalized, relevant learning aligned to standards and industry needs, to prepare them for future jobs. (Helpful guide: https://iowastem.org/STEM-BEST-links)
- 2.2 Provide evidence of alignment of planned curriculum and activities to your District's goals and improvement plans.
- 3. The STEM BEST Program's foundational principles provide for replication of business and industry within education. Partnerships are essential for this success, especially with local business and industry. Provide the contact information of your program's business and applicable community partner(s) below. [See rubric for types of partners]

Org Name 1 Name:
First Name:
Last Name:
Partner Email:
One sentence description of their
Involvement (Identified partners will receive
an automatic request for more detailed
information):

4. Professional development (PD) must include both business partner support in working with youth as well as educator support in linking industry needs to educational content. To enhance PD, interdisciplinary teams, including business and education professionals, are encouraged. Describe how your program will meet these professional development expectations.

5. Budget and Budget Narrative: Describe below how your program will expend the STEM BEST® grant and meet the 1:1 cost share requirement during the anticipated award period of July through June.

Contract Expenditures by Budget Category (per STEM BEST® application)	Grant	Cost Share	
Curriculum Development	\$0.00	\$0.00	
Grant Funds - Detailed Budget Description (How was the dollar amount determined?):			
Cost Share - Detailed Budget Description (How was the dollar amount determined?):			
Site Visits: travel expenses to visit one or more exemplary BEST model(s) to benchmark and research key attributes	\$0.00	\$0.00	
Grant Funds - Detailed Budget Description (How was the dollar amount determined?):			
Cost Share - Detailed Budget Description (How was the dollar amount determined?):			
Iowa STEM BEST® Convening or Similar Related Conferences/Events	\$0.00	\$0.00	
Grant Funds - Detailed Budget Description (How was the dollar amount determined?):			
Cost Share - Detailed Budget Description (How was the dollar amount determined?):			
Needs Assessment	\$0.00	\$0.00	
Grant Funds - Detailed Budget Description (How was the dollar amount determined?):			
Cost Share - Detailed Budget Description (How was the dollar amount determined?):			
Facility Development, Technology, Liability and Insurance Consultations	\$0.00	\$0.00	
Grant Funds - Detailed Budget Description (How was the dollar amount determined?):			
Cost Share - Detailed Budget Description (How was the dollar amount determined?):			
Professional Development (PD) for STEM Educators and Partners	\$0.00	\$0.00	
Grant Funds - Detailed Budget Description (How was the dollar amount determined?):			
Cost Share - Detailed Budget Description (How was the dollar amount determined?):			
Coordinator and Business Development Support: project coordinator and/or staffing	\$0.00	\$0.00	
Grant Funds - Detailed Budget Description (How was the dollar amount determined?):			
Cost Share - Detailed Budget Description (How was the dollar amount determined?):			
Other costs not specified above	\$0.00	\$0.00	
Grant Funds - Detailed Budget Description (How was the dollar amount deterr	nined?):		
Cost Share - Detailed Budget Description (How was the dollar amount determined?):			
Total Expenditures	\$0.00	\$0.00	

- 6. Detail the continuation of the program beyond the grant period including leadership/personnel, financial considerations and space to operate.
- 7. Detail possible strategies you'll employ for sharing the model with others (within your own school or district, with other schools and districts, other community partners, etc.) in lowa.
- 8. Describe how the program will collect observational and qualitative data (e.g., through site visits, classroom observations, administrator and faculty interviews, student and parent focus groups, partner testimonials, etc.) and quantitative data (e.g., grades, test scores, numeric surveys, etc.). Please note that STEM BEST awardees will be required to provide two years of follow-up reporting to the lowa Governor's STEM Advisory Council.

Additional Comments (In this area, please share with us any special circumstances or information specific to your organization that would be pertinent for us to consider):