

THE EDITH WINTHROP TEACHER CENTER  
475 WEST HARTSDALE AVENUE  
HARTSDALE, NY 10530  
914-948-8037  
[www.ewteachercenter.org](http://www.ewteachercenter.org)

***PROFESSIONAL  
DEVELOPMENT  
TECHNOLOGY  
PROGRAM  
(PDT)***

2011-2012

PLEASE TYPE

APPLICATION #  
FOR EWTC USE ONLY

## Professional Development Technology Program School Year 2011-12

Applicant(s) Name(s) \_\_\_\_\_ Grade/Area \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Primary Contact Applicant or Designated Group Leader \_\_\_\_\_

Primary's E-Mail \_\_\_\_\_

Home/Cell Phone \_\_\_\_\_

Project Title \_\_\_\_\_

School \_\_\_\_\_ School District \_\_\_\_\_

School Address \_\_\_\_\_

School Phone Number \_\_\_\_\_ Superintendent \_\_\_\_\_

**Please submit PDT Applications before  
4:00 PM, Friday, December 16, 2011 to  
The Edith Winthrop Teacher Center of Westchester  
475 W. Hartsdale Avenue  
Hartsdale, NY 10530**

I understand that if my school is awarded technology equipment for my proposal, I will submit a **Final Report no later than 4:00 p.m. - Friday May 11, 2012** on the results of the project.

Applicant(s) Signature(s) \_\_\_\_\_

I support this Technology proposal.

\_\_\_\_\_  
**Principal's/Supervisor's Signature**

**PLEASE TYPE**

**LIMIT YOUR ENTIRE PROPOSAL TO THIS APPLICATION FORM**

Grade and Content Area of Project \_\_\_\_\_

Project Title \_\_\_\_\_

Number of staff members \_\_\_\_\_ and students \_\_\_\_\_ directly involved in the project

Subject Area \_\_\_\_\_

**SEE ATTACHED RATING RUBRIC**

1. Program Design/Project Description. Give specific details as to how the technology project is innovative to the classroom, school or district.

2. Time Line: Include a clear, detailed sequence of activities.

**PLEASE TYPE**

3. State the specific classroom/school needs your project addresses. Give any background information on your student environment and/or population.

4. Indicate which Common Core Learning Standard(s) are being addressed. You must cite at least 2 common core standards and explain how each standard applies to this project.

5. Please include the expected outcomes this project will have on your students or others such as colleagues, parents and community.

6. Evaluation (How will you evaluate the effectiveness of this project?) Include evidence or an example of what assessment tools you will use to assess effectiveness.

**PLEASE TYPE**

**Budget** - Please **itemize** all expected expenditures. Please specify the technology, wires and software you will need to purchase to make this technology work in your class or school. **You must include a copy of the purchase orders skus and numbers with the requested item(s) highlighted.**

**(Budget cannot exceed \$600. If it does, state from where extra funds will come from).**

Item Description	Quantity	Unit Price	Total
			<b>Total Requested \$</b>



## **The Edith Winthrop Teacher Center of Westchester**

475 W. Hartsdale Avenue  
**Hartsdale, NY 10530**  
**(914) 948-8037**  
**fax: (914) 761-8854**  
[www.ewteachercenter.org](http://www.ewteachercenter.org)

**TEACHER CENTER STAFF:**  
Barbara Scaros, Director  
Susan Farrell, Program Coordinator  
Theresa Gallucci, Admin. Assistant

**TEACHERS TEACHING TEACHERS**  
**Serving the Districts of Ardsley, Dobbs Ferry, Elmsford, Greenburgh CSD No. 7,  
Greenburgh Eleven, Hastings-on-Hudson, & Tarrytown**