

REDONDO BEACH UNIFIED SCHOOL DISTRICT

PAR
(Peer Assistance and Review)

Application for PAR Professional Development Grant

Names of Applicants (Must be at least two individuals); or school(s); and/or grade level(s)/departments(s): _____

Work Site(s): _____ Date: _____

Please include the document attached : ♦ Professional Development Grant Budget

Site Administrator/Principal Approval: _____ Date _____
Site Administrator/Principal Signature

For PAR Panel Use Only

Approved Amount \$ _____

Denied

Reasons/Notes:

REDONDO BEACH UNIFIED SCHOOL DISTRICT

PAR
(Peer Assistance and Review)

**PAR Professional Development Grant
BUDGET**

Professional Development Grant Proposal Title: _____

Names of Grant Participants; or school(s); and/or grade level(s)/departments(s): _____

Instructions: Fill in categories in which the group anticipates expending funds.

<i>Expenditure Category</i>	<i>Description</i>	<i>Amount Budgeted</i>
Presenter(s)- Include Names:	Include presentation topic(s)	
Materials:		
Supplies:		
Release time (Substitutes) # days x \$110/day x # participants		
Other :		
TOTAL		

For PAR Panel Use Only

Approved Amount \$ _____ Denied

Reasons/Notes:

Signature, Chairperson, PAR Panel: _____