Murphysboro CUSD 186 Education Foundation Grant Evaluation Form

Please submit this form (using separate, additional sheets) upon the installment of your project. Please include photographs and/or video footage if possible. Please return this evaluation by interoffice mail (ATTN: Christopher Grode, Superintendent), email foundation@mhs.org, or online at www.cusd186foundation.org

Name:	School:
Date of evaluation submission	 :
•	the Teacher Grant Program that is sponsored by the Murphysboro indation? Circle all that apply.
District 186 website	Faculty Meeting School Board Meeting
Foundation Website	Other (please
	uld you suggest in publicizing the Foundation:
• What changes, if any, wo	uld you suggest in the application process?
	outcome of your project? Please describe your results. Attach ts and/or your evaluation results.
	produced results that should be replicated in other district in your own classroom in the future? Circle the most applicable
Highly Recommend	Recommend Do not recommend
Recommend with the fo	llowing suggestions for improvement:
•	quipment or supplies that were purchased through your grant. estions do you have for their utilization in the future?

School Board Meeting In-Service Training or Workshop

apply.

• In which of the following ways are you willing to present your project? Circle all that

Thank you for completing and submitting this evaluation in a timely manner to the Murphysboro Education Foundation. Unless an extension is requested, final reports are due by the last day of school (Teacher Institute Day).