



Teacher as Readers Grant Application

Sponsored by the GST Teacher Center

Date: _____ Name of Applicant: _____

Work Phone:: _____ E-mail: _____

District: _____ Building: _____ Grade/Subject: _____

Book Title: _____

Author: _____ Publisher: _____

Price/Book: _____ Copies Requested: _____

Please check one: Content_____ Pedagogy_____

Proposed # of hours: _____

Proposed Group Members (Name, Grade/Subject)

What are you hoping to learn through this book study?

Applicant Signature

Administrative Approval