|  |  |  |  |
| --- | --- | --- | --- |
| Date |  | School Name |  |
| Principal or Vice Principal |  | Inquiry Contact Name |  |
| Amount Requested  to a maximum of $250.00 prior to case study submission |  |  |  |
|  | | | |
| How are these funds going to support your inquiry?  What is it being use for?  Direct impact on teacher learning and inquiry? |  | | |
|  | | | |



# SD #36 AESN Inquiry Project Request For Funds

**2018-2019**

|  |  |  |  |
| --- | --- | --- | --- |
| Comments |  | | |
|  | | | |
| Amount Approved |  | Received By |  |
| Date Transfered |  | | |

For Office Use Only