



Instruction Technology Implementation Template

Project Title: _____

Project Owner: _____

New Program: Yes No

Division: High School Middle School Elementary Special Education Other

Target Population: (grade level, school(s), etc.) _____

Measurable Learning Objectives	Capable Existing Technology		Technology to be Acquired			Projected Cost	Professional Development Needs	Projected Cost	Ongoing Cost
	Qty	Item	Qty	Item	Support				
Objective(s): Assessment Tool: Content Area: <input type="checkbox"/> English/Language Arts <input type="checkbox"/> Mathematics <input type="checkbox"/> Science <input type="checkbox"/> Social Studies <input type="checkbox"/> Physical Education/Health <input type="checkbox"/> Arts <input type="checkbox"/> Music <input type="checkbox"/> World Languages <input type="checkbox"/> Technology <input type="checkbox"/> Library <input type="checkbox"/> Other: (Gifted, bilingual, Indian Ed, Migrant, Ed, SEL)		Choose Item: <input type="checkbox"/> Stationary Lab <input type="checkbox"/> Roving Lab (laptops) <input type="checkbox"/> Digital Projector <input type="checkbox"/> Digital Camera <input type="checkbox"/> Video Camera <input type="checkbox"/> Printers <input type="checkbox"/> Handhelds (PDAs) <input type="checkbox"/> Server(s) <input type="checkbox"/> Disk Storage <input type="checkbox"/> Other: _____ <input type="checkbox"/> Software: _____		Choose Item: <input type="checkbox"/> Stationary Lab <input type="checkbox"/> Roving Lab (laptops) <input type="checkbox"/> Digital Projector <input type="checkbox"/> Digital Camera <input type="checkbox"/> Video Camera <input type="checkbox"/> Printers <input type="checkbox"/> Handhelds (PDAs) <input type="checkbox"/> Server(s) <input type="checkbox"/> Disk Storage <input type="checkbox"/> Other: _____ <input type="checkbox"/> Software: _____	<input type="checkbox"/> Managed locally at school level <input type="checkbox"/> Managed at district level	\$_____ Possible Funding: <input type="checkbox"/> Building <input type="checkbox"/> District <input type="checkbox"/> PTA <input type="checkbox"/> Grant <input type="checkbox"/> LOG <input type="checkbox"/> Other: _____	Types of Training: <input type="checkbox"/> Basic Operations <input type="checkbox"/> Software Specific <input type="checkbox"/> Hardware Specific <input type="checkbox"/> Other: _____ Training Models: <input type="checkbox"/> Afterschool Training <input type="checkbox"/> Credit Class <input type="checkbox"/> Summer Academy Class <input type="checkbox"/> Support in Classroom <input type="checkbox"/> Substitute Required <input type="checkbox"/> Other: _____	\$_____ Possible Funding: <input type="checkbox"/> Building <input type="checkbox"/> District <input type="checkbox"/> PTA <input type="checkbox"/> Grant <input type="checkbox"/> LOG <input type="checkbox"/> Other: _____	\$_____ Possible Funding: <input type="checkbox"/> Building <input type="checkbox"/> District <input type="checkbox"/> PTA <input type="checkbox"/> Grant <input type="checkbox"/> LOG <input type="checkbox"/> Other: _____
Six-Year Plan Alignment: Project Description: (may attach additional page(s))									
Implementation: Beginning: _____ Ending: _____	Plan for equipment refresh? <input type="checkbox"/> Yes <input type="checkbox"/> No How Often? _____ Plan for software update? <input type="checkbox"/> Yes <input type="checkbox"/> No How Often? _____			Network Requirements: <input type="checkbox"/> Ethernet <input type="checkbox"/> Internet <input type="checkbox"/> Wireless <input type="checkbox"/> Electrical					
Platform Specific <input type="checkbox"/> Yes <input type="checkbox"/> No		Total Technology to be Acquired			\$		Total Professional Development		\$