

Special Project Proposal Template

Sections 1 &2: To be completed by the student.

Please Print

Section 1: Student Inform	mation		
Last Name:		First Name:	
Grade:	School:		
Section 2: Project Overvie The section below provides g		ject plan with guiding questi	ons to help reflect upon your learning.
Project Title/Topic:			Course Level: 10 20 30
Project Description (attach a	additional documentation if requ	ired):	 Guiding Questions: What are you going to do for your project? What do you hope to accomplish? Who or what organizations are going to be involved? Who will be supporting you during this project (e.g., a mentor from the community, a teacher, an Elder)? How does your special project differ from or build upon what you have learned in school?
Project Rationale (attach ad	ditional documentation if require	ed):	 Guiding Questions: Why are you interested in or passionate about this project? How will this project impact you and influence your future goals? In what ways will your project impact your community?

Student Background	Cuiding Quartierer
Student Background:	 Guiding Questions: Do you have previous experience in this area of study? If so, please describe. How is this project going to be different from, or an extension of, what you have studied in school?
Project Goals, Learning Activities and Project Documentation:	 Guiding Questions: What do you hope to learn? What knowledge/skills will you acquire or improve by pursuing this project? For example: leadership abilities, teamwork, technological applications, artistic processes. How are you going to demonstrate that you achieved your goals? You might document your learning, for example, through: journal entries or logs, video or other media, presentation or demonstration, observation notes from your mentor, periodic and final reports. How will you challenge yourself and target different and target different and target different and target different ways of learning? For example, through: Critical thinking Researching Skill building designing, modelling or creating
Project Plan:	Guiding Questions: • What is the project timeline? (min of 100 hours) • Start/end dates • Hours per day/week • What resources will you need? • How often will you meet with supervising teacher and/or mentor? • How will you share your learning with others? For example: • peers, • community, • school.



Sections 3 - 5: To be completed by the school's supervising teacher in collaboration with student and mentor.

Section 3: Supervising Teacher Information									
Last Name:									First Name:
Phone Number:									Email:
Section 4: Project Mentor Information (if applicable)									
Last Name:									First Name
Phone Number:									Email:
(Please refer to the student's statements in Section 2: Project Goals, Activities and Assessment. Have you considered how the Special Project will help students achieve the Broad Areas of Learning and Cross-curricular Competencies? How will the project be monitored? What is the communication plan for reporting to ensure student, mentor, parent/guardian and teacher are informed? How will you present your learning for it to be assessed? (Video journal, photos, etc.)Evidence of Learning:Assessments:									

Attach additional pages if needed.



Student Name	Signature	Date
Parent/Guardian Name	Signature	Date
School's Supervising Teacher	Signature	Date
Project Mentor	Signature	Date
Principal or Designate	Signature	Date
Director of Education or Designate	Signature	Date

** The signed proposal is to be kept in the Student Cumulative file for 5 years. **

** All completed special project proposals are to be submitted to the Ministry of Education using Form 8.1 Secondary Level Non-Academic Course - New Mark Addition **

