

**1115-10A –Questionnaire for Proposed Curriculum Projects FORM**

School: \_\_\_\_\_

Teacher(s):

This proposal is to:

adapt an existing curriculum: \_\_\_\_\_ develop a new curriculum \_\_\_\_\_

Name of project::

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

For what group of students is this curriculum project intended?

Age/Grade level(s) \_\_\_\_\_ Approximate number: \_\_\_\_\_

What are the broad goals of this project?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Briefly state the units or topics to be adapted or developed?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

What kinds of assistance do you require for this curriculum project?

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Date of Submission

\_\_\_\_\_  
Department Head (Secondary)

\_\_\_\_\_  
Teacher

\_\_\_\_\_  
Administrative Officer

\_\_\_\_\_  
Teacher

\_\_\_\_\_  
Superintendent or his/her designate

**PLEASE SUBMIT TO THE SUPERINTENDENT OR HIS/HER DESIGNATE**