

# 2022–2023 Application Form

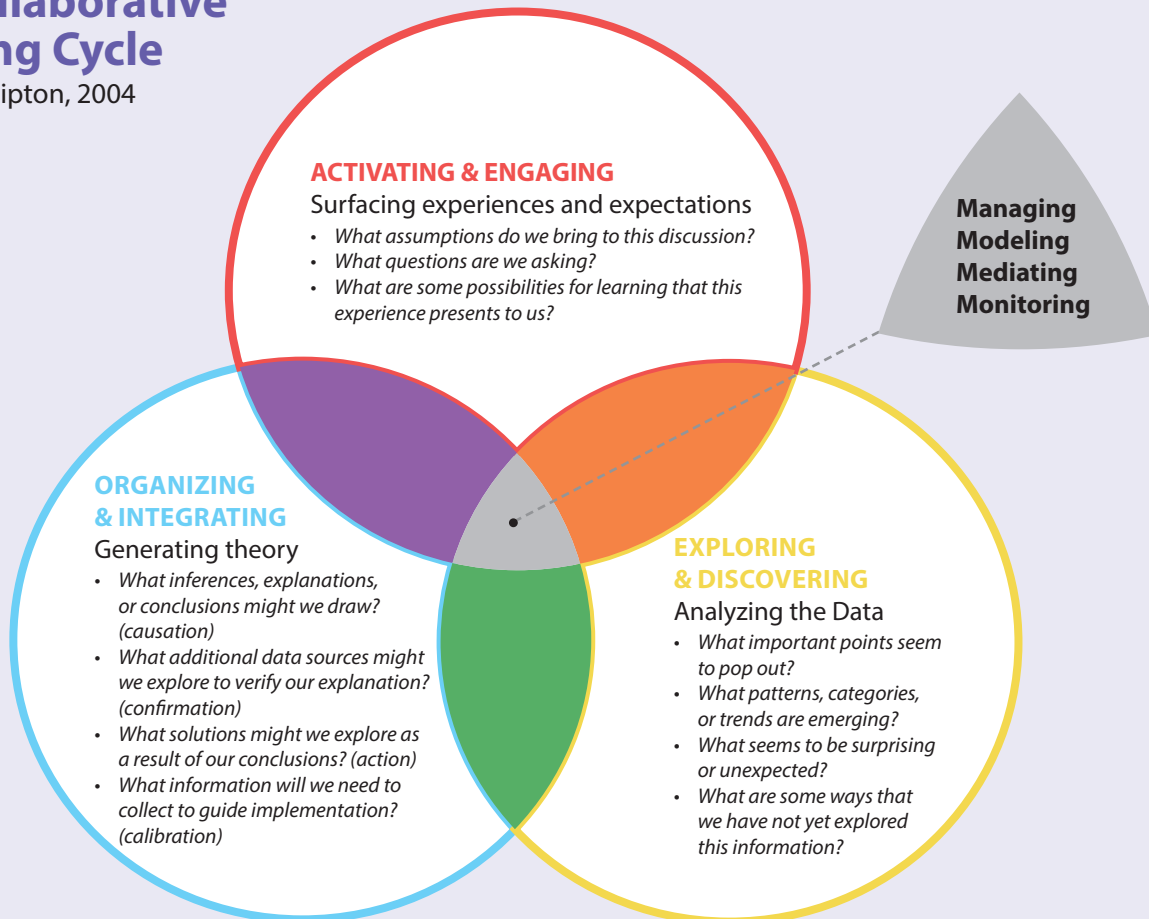
## Collaborative Learning Team Grants

*This is available to MTS members only. Please note: Project results and reports will be shared.  
Deadline: October 25, 2022*

PROJECT TITLE	
SCHOOL DIVISION(S)	
SCHOOL(S)	
TEAM LEADER NAME	
TELEPHONE	
EMAIL	

### The Collaborative Learning Cycle

Wellman & Lipton, 2004



## PARTICIPANTS

Please list the names of all participants (min. 4 – max. 12)

N.B. Each team member is required to complete and submit an Impact Form with this application. (See separate form)

NAME	POSITION/ROLE	SCHOOL			LOCAL	IMPACT FORM
		EY	MY	SY		
1		EY	MY	SY		
2		EY	MY	SY		
3		EY	MY	SY		
4		EY	MY	SY		
5		EY	MY	SY		
6		EY	MY	SY		
7		EY	MY	SY		
8		EY	MY	SY		
9		EY	MY	SY		
10		EY	MY	SY		
11		EY	MY	SY		
12		EY	MY	SY		

**1. Briefly outline the purpose of your project and what you hope to accomplish.**

**2. What is your question? (Problem of practice, issue, change you want to study)**

Action research questions come from everyday questions teachers have about why things happen, how to create a change, or what our next steps should be. When developing your question, it is helpful to consider:

- *How the question will enhance or change your professional practice and/or be of value to your students, school and/or colleagues?*
- *If it can be answered within the context of our daily teaching?*
- *The availability of time, information, literature and other resources.*
- *The ability to sustain the interest of the team over the course of the year.*

**3. What process was used to develop your question?**

When thinking of the process you used to develop your question, it is helpful to consider:

- *Was it a collaborative process where everyone feels they had a voice?*
- *Does everyone have the same understanding of the question and the work to be done?*

**4. What kind of information will be collected to help answer your question and to engage in reflections and planning? Thinking about what information to collect is important for planning and decision making about what's working, not working, and next steps. The information should be reliable, valid and collected from multiple sources at regular intervals. When choosing what information to collect, it is helpful to consider:**

The information should be reliable, valid and collected from multiple sources at regular intervals. When choosing what information to collect, it is helpful to consider:

- *Information can come from literature reviews, student-based and school-based document analysis, observations, interviews, case studies, surveys, and collaborative conversations.*
- *Why are we collecting the information and how will it help answer our question?*
- *Who will collect the information and when and where will it be collected?*
- *How will information be collected and put into a useable form to help with reflections and planning?*

WHAT?	WHY?	WHERE?	HOW?

**5. How are we scheduling our time?** The Team Facilitator will work with your team for three “Collab labs”. The facilitators have prepared slides to guide the team through the various stages of action research.

Typically, the goals of each Collab lab are as follows:

- *Collab lab #1 – planning, activating, and engaging (creating the learning space, establishing the intentions of the team, reviewing the stages of the action research process)*
- *Collab lab #2 – observe, reflect, act – deconstructing information, exploring, and discovering*
- *Collab lab #3 – observe, reflect, act – organizing and integrating information, generating theory, and planning next steps*

MEETINGS	COLLAB LABS	INFORMATION ANALYSIS, REFLECTING, REPORTING AND ACTION PLANNING	DOCUMENTING AND REPORTING
<i>NB Meetings must adhere to the collective agreements including occurring outside of preparation time.</i>	<i>Three suggested dates that will be scheduled with your facilitator:</i>	<i>Number of meetings/times you think you will need to analyze and interpret your information and make decisions about whether to:</i>  <ul style="list-style-type: none"> <li>• <i>Continue with the intervention</i></li> <li>• <i>Stop the intervention</i></li> <li>• <i>Modify the intervention</i></li> </ul>	<i>Number of meetings you will need to complete project reports:</i>
	1		
	2		
	3		

**6. Equity**

**a. How will we address barriers to participation in the project?**

**b. How will the project engage team members to use their voice and develop practical skills to effect change?**

**c. How does this project allow for network and coalition building among members to effect change?**

## PROJECTED EXPENDITURES

BUDGET	MTS CLFT GRANT	IN-KIND CONTRIBUTIONS	EXTERNAL FUNDING SOURCE
<i>Release Time (including meeting dates)</i>			
<i>Mileage</i>			
<i>Accommodations</i>			
<i>Meals</i>			
<i>Professional Resources (list below – not to exceed 20% of total grant)</i>			
<i>Miscellaneous (list below)</i>			
<b>TOTAL</b>			

Cheque should be made payable to the following (please check one):  School or  Local Association

### Responsibilities of the Team Leader

- Oversee the collaborative learning team plan in consultation with the CL Team facilitator from MTS
- Book meeting rooms including technological equipment needed by the CL Team facilitator, provide photocopies and refreshments for participants
- Work with CL Team facilitator to determine the meeting focus, location, and dates
- Submit a final report including a breakdown of the budget to MTS by May 31st

### Responsibilities of the CL Team Facilitator

- Connect with Team Leader when project has been approved
- Support with the planning and organization of material for each collaborative learning (Collab-Lab) session
- Facilitate three sessions throughout the year

The type of inquiry project, number of teachers involved, impact on teacher practice and agency, and regional representation are some factors that will be considered during the approval process.

Please Email this form to Ashley Fifer (afifer@mbteach.org)

PLEASE KEEP A COPY OF YOUR APPLICATION

**Please use the below space to add any further details to this application.**

# Member Impact Form

<b>SCHOOL NAME</b>	
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**MEMBER NAME**

<b>MTS MEMBER NUMBER</b>	
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## REFLECTIONS BEFORE THE PROJECT STARTS

*What is your motivation for joining this collaborative learning team?*

*How do you hope this project will impact your practice?*

## REFLECTIONS AFTER THE PROJECT ENDS

*How did the project impact your practice?*

*What are your three big take-aways?*