Dear Program Director:

We appreciate your interest in participating in our research study of math identity in after-school programs. The study will investigate how this after-school program develops students’ math identity and increases math engagement and interest. It will investigate whether increasing identity, engagement, and interest leads to greater skill development and academic achievement. As a part of this study, participating programs will receive math activities in four themes, including professional development, curriculum materials, resources, and ongoing technical assistance. Some sites will be randomly selected to implement additional activities expected to improve math identity. Please see the fact sheet for important information about the curriculum, expectations for the study and eligibility criteria.

We would appreciate your cooperation in completing the attached application to help us determine if your after-school program meets the study selection criteria. If you direct multiple after-school programs, please complete an application form for each program interested in participating in the study. All of the information you provide on this application is confidential and will not be used for any purpose other than planning participation in the study.

Please return this application to Kimberly Carmichael at kcarmichael@scafterschool.com. Once we receive your application, a member of the team will reach out to provide you with an overview of the curriculum. If you have any questions about this application or the study, please contact the project director, Andrea Beesley, at abeesley@impaqint.com or (720) 213-3721.

Thank you again for your interest and cooperation.

Sincerely,

Dr. Andrea Beesley, IMPAQ International

Project Director

NSF-AISL Implementation and Impact Study of After-School Math PLUS

# PROGRAM APPLICATION to participate IN

# Math Identity Study

Please complete and return to Kimberly Carmichael at kcarmichael@scafterschool.com.

Name of After-School Program:

Program address:

Program Director’s name:

Program Director’s phone:

Program Director’s e-mail:

1. Is your program a part of the South Carolina Afterschool Alliance? Yes \_\_\_\_\_ No \_\_\_\_\_
2. How many days per week does your after-school program operate? \_\_\_\_\_ days per week
3. How many minutes per day does your after-school program operate? \_\_\_\_\_ minutes per day
4. How many minutes and days *per week* does your program typically focus on math-related activities?

Total minutes *per week*: \_\_\_\_\_\_\_\_

Total days *per week*: \_\_\_\_\_\_\_\_

1. What math-related curriculum or materials does your program use to provide math instruction or math activities (if applicable)? Please list in the space below:
2. Is you program currently implementing any other special programs or math-related initiatives?

Yes \_\_\_\_ No \_\_\_\_ If yes, please list and describe the programs/initiatives in the space below.

1. How many students in your after school program are in the following grades?

4th \_\_\_\_\_

5th \_\_\_\_\_

6th \_\_\_\_\_

1. Does the program have any special enrollment/admissions requirements? Yes \_\_\_ No \_\_\_

If yes, please describe such requirements in the space below.

1. What percent of your after-school program’s student population is in each group:
2. Students qualified for free and reduced-price lunch \_\_\_\_\_\_%
3. Minority students \_\_\_\_\_\_%
4. Students receiving special education services \_\_\_\_\_\_%
5. English language learners \_\_\_\_\_%
6. Girls \_\_\_\_\_%

Please list the names of at least three 4th and 5th grade group leaders who have expressed interest in participating in this study and who have read the study information sheet. Participants must be available to participate in four trainings at the beginning of each module (at the start of the fall and spring semesters in the 2016-2017 and 2017-2018 school year). They must also be willing to implement the math activities in the afterschool program and participate in the study data collection activities. (*Please* *add additional names if necessary.*)

1. Name:

E-mail:

Phone: \_\_\_\_\_\_\_\_\_\_

Grades served: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Name:

E-mail:

Phone: \_\_\_\_\_\_\_\_\_\_

Grades served: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

1. Name:

E-mail:

Phone: \_\_\_\_\_\_\_\_\_\_

Grades served: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_