

# ABSTRACT TEMPLATE:

84.325D

**Absolute Priority:** \_\_\_\_\_  
**Organization:** \_\_\_\_\_  
**Project Title:** \_\_\_\_\_  
**Start Date:** \_\_\_\_\_  
**End Date:** \_\_\_\_\_

**Project Director:**

**Full Name:** \_\_\_\_\_  
**Address Line 1:** \_\_\_\_\_  
**Address Line 2:** \_\_\_\_\_  
**City:** \_\_\_\_\_  
**State:** \_\_\_\_\_  
**Zip Code:** \_\_\_\_\_  
**Telephone:** \_\_\_\_\_  
**Email Address:** \_\_\_\_\_  
**Average Time on Project, Year 1 (%):** \_\_\_\_\_

**Additional Key Personnel (not including project director listed above):**

| Full Name / Position / Program                                     | Average Time on Project, Year 1 (%) | Email Address              |
|--|-------------------------------------|----------------------------|
| Example: John Smith, Ph.D./Professor/ Special Education Department | Example: 25.2%                      | Example:john.smith@UXX.EDU |
|  |                                     |                            |
|  |                                     |                            |
|  |                                     |                            |
|  |                                     |                            |

**Briefly describe the purpose and expected outcomes. (100 words or fewer)**

**Briefly describe how the project will be designed, managed, and evaluated to address the identified outcomes. (100 words or fewer)**

**Disability (or disabilities) focused on by the project (check all that apply):**

- Autism \_\_\_\_\_
- Deaf-blindness \_\_\_\_\_
- Deafness \_\_\_\_\_
- Developmental Delay (DD) \_\_\_\_\_
- Emotional Disturbance (ED) \_\_\_\_\_
- Hearing Impairment \_\_\_\_\_
- Intellectual disability \_\_\_\_\_
- Multiple disabilities \_\_\_\_\_
- Orthopedic impairment \_\_\_\_\_
- Other health impairment \_\_\_\_\_
- Specific Learning Disability \_\_\_\_\_
- Speech or language impairment \_\_\_\_\_
- Traumatic brain injury \_\_\_\_\_
- Visual impairment, including blindness \_\_\_\_\_

**Age group(s) of children with disabilities focused on by the project (check all that apply):**

- Birth to 3 \_\_\_\_\_
- Preschool \_\_\_\_\_
- Elementary School \_\_\_\_\_
- Middle School \_\_\_\_\_
- High School \_\_\_\_\_
- Postsecondary \_\_\_\_\_

**Target content area(s) focused on by the project (check all that apply):**

- |   |   |
|---|---|
| <input type="checkbox"/> Assessment _____                               | <input type="checkbox"/> ELs with Disabilities _____                  |
| <input type="checkbox"/> Behavior _____                                 | <input type="checkbox"/> Accessible Educational Materials _____       |
| <input type="checkbox"/> Early Childhood _____                          | <input type="checkbox"/> Technology Research and Development _____    |
| <input type="checkbox"/> Inclusive Practices _____                      | <input type="checkbox"/> Assistive and Instructional Technology _____ |
| <input type="checkbox"/> Instructional Strategies _____                 | <input type="checkbox"/> Transition Services _____                    |
| <input type="checkbox"/> Literacy _____                                 | <input type="checkbox"/> Dropout Prevention _____                     |
| <input type="checkbox"/> STEM _____                                     | <input type="checkbox"/> Family Engagement _____                      |
| <input type="checkbox"/> MTSS _____                                     | <input type="checkbox"/> Related Services _____                       |
| <input type="checkbox"/> Data Collection, Analysis, and Use (373) _____ | <input type="checkbox"/> Dispute Resolution _____                     |

**Geography focused on by the project (check all that apply):**

- Urban \_\_\_\_\_
- Rural \_\_\_\_\_
- Suburban \_\_\_\_\_

**Absolute Priorities (specify one):**

- 325D Priority 1-Preparation of Special Education, Early Intervention, and Related Services Faculty
- 325D Priority 2-Preparation of Special Education and Early Intervention Administrators

**Competitive Preference Priorities (select each box, as appropriate):**

- Competitive Preference Priority 1-Partnership
- Competitive Preference Priority 2-New Applicants

**Scholar Support through Grant:**

| Budget Period | Number of Scholars per Cohort Receiving Support* | Percent of Funding Designated for Scholar Support |
|---------------|--|---|
| Year 1        |  |   |
| Year 2        |  |   |
| Year 3        |  |   |
| Year 4        |  |   |
| Year 5        |  |   |
| <b>Total</b>  |  |   |

**\*Note:** Indicate the total number of scholars in each cohort that are receiving support in a budget period (e.g., Budget Period Year 3: 3 [Cohort 1] + 2 [Cohort 2]).

**How is the program delivered (check one)?**

- Online \_\_\_\_\_
- In-person \_\_\_\_\_
- Hybrid \_\_\_\_\_