



Northeast RPDC Teachers' Academy Application 2009-2010

Name: _____

Subjects Taught/Grade Level: _____

Years of Experience: _____

Highest Degree Earned: _____

Name of School District: _____

Name of School: _____

School Address: _____

School Phone Number: _____ Home Phone Number: _____

Email Address: _____

Recent Educational Experience: School District/School Name (current first)	Grade Level and/or Content Area	Years in District

Write a short narrative answering the following questions and attach to your application:

- What educational issues/challenges most concern you in your classroom?
- If selected, what do you hope to gain from your experience in Teachers' Academy?
- What is your current involvement in school reform or in professional development?

Provide two letters of recommendation: one from your school administrator, and one from a teacher colleague.

Fee: \$500 Scholarships may be available based on funding.

I understand that if I am accepted into the Teachers' Academy, I am expected to participate fully in all Academy activities.

Applicant's Signature: _____

The building principal must sign below to indicate his/her willingness to support your participation in the Northeast Teachers' Academy.

Principal's Signature : _____ Date : _____

****ATTENTION: Deadline is August 25, 2009! Enrollment is limited to 20 participants. Regional Kick-off will be September 1, 2009. Time and location details will be e-mailed to participants when determined.**

- Be sure to**
- Attach: Narrative response to the questions
 - Attach: Letter of recommendation from school administrator
 - Attach: Letter of recommendation from teacher colleague