



## Teacher Development Program Application

- Name: \_\_\_\_\_
- Address: \_\_\_\_\_  
\_\_\_\_\_
- Email: \_\_\_\_\_
- Phone: \_\_\_\_\_
- Education (High School and Post-Secondary)

School Attended:

Date of Graduation:

Diploma or Degree:

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- What area(s) of teaching will you pursue a license in? \_\_\_\_\_
- What language(s) do you speak? What is your level of competence in each (beginner, intermediate, fully lingual)? How long have you spoken this language (i.e. number of years of school, native speaker, etc.)?
  - Language:                      Level of Competence:                      Years:  
\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_  
\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_  
\_\_\_\_\_                      \_\_\_\_\_                      \_\_\_\_\_

**Additional Application Requirements:**

- Along with this application, please produce two recent, signed letters of recommendation. These letters should indicate why you are a quality, qualified candidate for this program. At least one should be from a school district employee.
- Along with this application, please provide transcripts of your courses and grades in your educational career. If you are not yet a college graduate, include high school transcripts. If you are a college graduate, please provide only college transcripts.
- Please attach to this application a one-page, single spaced essay describing the following:
  - Why do you want to be a teacher?
  - Why should we select you for this program?
  - What specific experiences, skills and interests do you have that qualifies you for selection?
  - How will you contribute in a positive manner to the education of our most diverse, needy or underserved students?

**For questions, please contact:****Rich Sipe**

Human Resources Administrator | Greater Albany Public School District

[rich.sipe@albany.k12.or.us](mailto:rich.sipe@albany.k12.or.us)

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