GREAT EXPECTATIONS
INSTRUCTOR APPLICATION FORM

PERSONAL INFORMATION

Applicant Name_____SS#_____

Home Address_____

City_____ State_____ Zip Code_____

Home Phone_____Home e-mail_____

Cell Phone_____

Name of School Site_____District Name_____

School Address_____

City_____ State_____ Zip Code_____

School Phone_____School email_____

PROFESSIONAL EXPERIENCE

Number of Years Teaching Experience_____
(Minimum 3 years, current school year may count as the third.)

Certifications Held_____

Grade Levels Taught_____

Subjects Taught_____

References:

(Name) **(Principal/Direct Supervisor)** (Phone #)

(Name) **(Professional Reference)** (Phone #)

GREAT EXPECTATIONS EXPERIENCE

Initial Methodology Training _____
(Date)

Additional Great Expectations Training Experience
(GE Institute, GE Conferences, Saturday Sessions, etc.)

_____
_____
_____
_____
_____
_____
_____
_____

Professional Presentation Experience
(*List only those experiences in which you were the presenter.)

_____
_____
_____
_____
_____
_____
_____

School, district or state leadership experience (Committee, Task Force, Team Leader. Etc.)

_____
_____
_____

Has a GE Instructional Coach observed in your classroom? YES NO

If yes, please list the name of the GE Instructional Coach _____

Acknowledgement of application (Office use only)

_____ _____
President & CEO/Coordinator Date

☐ Recommended for intern training ☐ Not recommended at this time