

TEACHER EXCHANGE PROGRAM 2022 APPLICATION Colorado

Photo

PERSONAL INFORMATION						
Last Name		First Name	Mi	Middle Name		
Gender		Date of Birth	City of Birth			
(Male, Female)		(Month spelled out)				
Address		City	State	Zip Code		
Home Phone	Work Phone	Cell Phone	Email Add	ress		
Do you have a curre	ent passport?] Yes □ No				
EMERGENCY COI	NTACT INFORMATIO	N				
Primary Contact:		Second	Secondary Contact:			
Name:		Name:	Name:			
Phone Number:		Phone I	Phone Number:			
Email Address		Email A	Fmail Address			

EDUCATIONAL BACKGROUND	
Please provide college/university information starting	with the most recent.
Education Information#1	
Name and address of Institution	City, State and Country
Name of Degree/Diploma including subject of expertis	e Years completed/attended
Education Information#2	
Name and address of Institution	City, State and Country
Name of Degree/Diploma including subject of expertis	e Years completed/attended
Education Information#3	
Name and address of Institution	City, State and Country
Name of Degree/Diploma including subject of expertis	e Years completed/attended
COLORADO TEACHER LICENSE CERTIFICATION	
	and other exams you have completed. Spell out the name Illy authorizes you to perform.
Colorado Teaching License #	Administrator #
Endorsement:	

AWARDS AND/OR RECOGNITIONS
REFERENCES
List the information of two supervisors or principals who can comment on your professional skills, character and dependability. Do not list relatives, friends or fellow teachers.
Reference #1:
Name:
Position:
Telephone Number: Email Address:
Relation to you (i.e. principal, supervisor):
Reference #2:
Name:
Position:
Telephone Number: Email Address:
Relation to you (i.e. principal, supervisor):
RELEVANT TEACHING EXPERIENCE
Years of teaching experience:
Teaching Experience#1
Name and address of Institution:

Type of Institution:	☐ Public	□Priva	te			
Inclusive Dates:						
From		То			No. of Yea	rs
Employment Status:			Studer	nt Ages:		
Average Number of Stud	dents per Class:					
Subjects:				Grades:		
Teaching Experience						
Name and address of In	stitution:					
Type of Institution:	□Public	□Priva	te			
Inclusive Dates:						
From		То			No. of Yea	rs
Employment Status:		Student Ages:				
Average Number of Stud	dents per Class:					
Subjects:Grades:						
LANGUAGE BACKGRO	DUND					
Language Proficiency (sp		ciency – Exce	ellent/Good/Fa	ıir)		
Foreign Language Speak		Read		Write		
	☐ Excellent	☐ Good	☐ Excellent	☐ Good	☐ Excellent	□ Good
	☐ Fair	□ None	☐ Fair	□ None	☐ Fair	□ None
	☐ Excellent ☐ Fair	☐ Good ☐ None	☐ Excellent ☐ Fair	☐ Good ☐ None	☐ Excellent ☐ Fair	☐ Good ☐ None
	☐ Excellent	□ Good	☐ Excellent	☐ Good	☐ Excellent	□ Good
	☐ Fair	☐ None	☐ Fair	☐ None	☐ Fair	☐ None

Have you ever been convicted of a crime? \Box Yo	es□ No						
PERSONAL ESSAY							
and motivation for applying to the Colorado Bina	to tell us more about your background, activities, interests, tional Teacher Exchange. You are asked to write an essay of honestly about interests or experiences that have been atten in Spanish.						
 How will your participation in the Coloral following: 1) You, 2) Your school, and 3) The Migrant community 	do Binational Teacher Exchange Program benefit the						
 In your opinion, what personal characteristics or qualities are important in order to be an effective and successful Exchange Visitor to Mexico? 							
What motivates you to participate in the	What motivates you to participate in the Colorado Binational Teacher Exchange Program?						
 What is your approach to teaching a fore students? 	ign language or subject of expertise to groups of 20-30						
Why is this cross-cultural experience imp	ortant to you? Cite two reasons.						
Signature of the Applicant	 Date						
Printed Name	 Date						

The deadline to submit applications to participate in the Colorado Teacher Binational Exchange is

December 31, 2021

Date

Date

School Principal Signature

Regional Migrant Director Signature